

Inner world of foster care: an in-depth exploration

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Abstract/ Summary

This thesis presents a qualitative case study of successful fostering in Wales. The study examines the social worlds of ten foster families from across Wales and undertakes an in-depth analysis of what helps to promote success in fostering. The families occupy three differing contexts comprising local authority fostering, independent agency fostering and local authority fostering but receiving specialist support from a voluntary agency. The study has aimed to involve all the participants within the foster family: the carers, the foster children, the birth children and, where appropriate, adult birth children who no longer live at home but continue to provide support and care to the foster family. The thesis addresses key issues such as the motivation to foster, and the every day world of caring, food, the body, space and time, and children. The data are discussed in relation to a number of theoretical and conceptual frameworks, including critical engagements with relationality, intimacy and the sociology of the family.

I have attempted to reflect faithfully the agency and the voice of children who participated in this research. In so doing, I have particularly focused on the nature of care in the context of the embodied encounter with the physical and emotional world and to reveal this world from their perspective, and from the adults and significant others who provide foster care. Throughout this thesis I refer to children and young people interchangeably. I do this to avoid repetition. However, where age-relevant distinctions need to be made, I make clear my categorisation of child or young person.

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Conclusion

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Me

My feelings are true.
We rely on you
When I am sad
When I am lonely.

Here I am safe at a foster home.
I feel very happy.
Sometimes I am snappy,
Sorry to say
I'm on my way
To a new life.

Lauren aged 9

Taking Care: A Collection of Writings and Drawings by Children in Care and Young Care Leavers (2004:22). London: BBC Books.

Introduction to thesis

Background to the study

The origins of this study came from commissioned research to evaluate a foster care project. This involved my interviewing staff, social workers, foster carers, educators and the young people in placement (see Rees 2002). In completing this study, I began to appreciate that an outcomes based approach failed to incorporate or evidence the complexity and subtlety of everyday life in foster families. The initial study thus acted as a stimulus which prompted me to formulate my ideas about an in-depth qualitative exploration into the functioning of the foster family, itself a largely under researched topic. As Erera observes:

The foster family itself has received little research attention. The family's structure, dynamics and stage of development, as well as its boundaries and the roles and relationships among family members and with the birth family, all merit further study. (Erera 2002: 56)

Aims of the study

The aim of this study is to look at the everyday lives and experiences of the foster family and to focus on these practices that define this remarkable arrangement. There have been several studies looking at large data sets with regard to looked after children (Sinclair *et al.* 2000; Triseliotis *et al.* 2000). Much research has been driven and prompted by outcomes and targets, which by implication suggest that it is a somewhat homogeneous population who are in care. Yet children and young people are clearly heterogeneous as are their experiences of being looked after:

..since it (children and young people) includes the enormous differences in physicality and capacity found in new-borns.... (to) 17 year olds, not to mention cross-cutting lines of differences relating to gender, nationality, social class, racialised ethnicity, religion etc. (Thorne 2002:253)

There have been few in-depth qualitative case studies of children in foster families, including both foster and birth children; this research hopes to redress the balance. It

is my intention to unpick the circumstances of individual children and individual families in which they have been placed, in order to gather insights into what facilitates successful fostering. Success in fostering is a difficult and sometimes intangible concept (Ward 1995; Sellick and Thoburn 1996). I have thus looked at the everyday world of foster families, the eating, the bathing, the laughing and the fighting. It is the focus on the mundane, the taken for granted, the 'normal' that helps question received assumptions and makes the familiar strange (Savage 2008). Thus, the familiar is unpicked and becomes newly interesting.

Conceptual underpinnings

Whilst this thesis draws on a range of social science theories and perspectives, three key themes are of particular relevance to the conceptual approach and to the framing of the analysis presented here. These are:

- a critical sociological perspective of children, childhood and the family
- a resilience and strengths based approach to children
- a commitment to vocalising the voice of the child

These key themes which frame the study are threaded together by the concept of 'care'. Care and its multiple contexts and meanings continually surfaces, as source of both analysis and explanation of the fostering relationship. Care is often expressed through multiple intimacies which will be discussed later in the thesis. I will now look at each of these underpinnings, starting with a sociological perspective.

It has often been the lack of a sociological focus on the care system in children's services that has led to some simplistic explanations:

A growing literature has emerged on the sociology of childhood (for example Mayall 2002): although with some exceptions this has been underused in child welfare research. (Berridge 2007:2)

Berridge (2007:8) suggests that 'child welfare research which focuses narrowly on applied social work issues tends to be limiting and this 'inhibits the analysis of complex social problems'. Winter (2006), too, notes the lack of a sociological perspective within the looked after children system. I have aimed to broaden the understanding of fostering by putting the foster family under the sociological gaze whilst recognising the important but perhaps over dominant influence of psychological perspectives:

Helping professions are saturated with psychological approaches based on individual, family and community pathology. (Saleebey 1996: 296)

A sociological focus seeks to grasp a wider set of influences than a traditional psychological approach, but it is important to note that there is much overlap between the two disciplines. Winter (2006), suggests that a sociological perspective would allow for understandings and meanings to be highlighted and given more priority hence it is meanings and relationality that become central to this research.

The second conceptual emphasis has been a strengths based perspective of foster care, looking at family placements which appear to be working well. As with Erera, I examine 'diverse families from a strengths perspective, acknowledging their capacities, competence and resilience' (Erera 2002:17).

Whilst it is hard to ignore research which has highlighted the extent to which systems and services have let down children and young people in public care as noted by Happer *et al.* (2006:1), there is relatively little research on looked after children that has a focus on good outcomes. However, there are some notable exceptions (Chase *et al.* 2006; Happer *et al.* 2006).

Utting (2006) asks why and when did social workers stop 'seeing' the strengths of their clients and instead fixated on their weaknesses and problems. Similarly a body of research depicting the disadvantages of young people in care has developed over time, presenting young people as victims. This tendency towards a deficit orientation has failed to recognise the role that the young people themselves play in

determining their own futures and the resilience and resourcefulness they may possess and in some ways this has done them a disservice. By contrast a strengths based perspective in social work is a conceptual position which adopts a more positive way of looking at individuals, families and communities, seeking to support the capacities in individuals and families, rather than focusing on their shortfalls and inadequacies.

The appreciations and understandings are an attempt to correct this overwrought, and, in some instances destructive emphasis on what is wrong, and what is missing...All must be seen in light of their capacities, talents competencies, possibilities, visions, values and hopes. (Saleebey 1996: 297)

The concept of 'resilience led practice', much written about by Gilligan (2001) takes account of relationships, strengths and the social context in which people live. Chase *et al.* (2006:2), drawing upon the work of Gilligan (2001), note that a resilience perspective is based on the belief of self-healing and the self-righting capacity of children and young people, focusing on their strengths and attributes. Happer *et al.*'s (2006) study entitled *Celebrating Success* draws on this point:

We know that looked after children can overcome early experience of trauma and adversity. Our participants demonstrate that children's histories do not have to predict their future, and that journeys through childhood to adulthood can be changed. We are learning that being looked after should be a time at which there is real opportunity for change. (Happer *et al.* 2006:55)

The work of Saleebey (1996: 298) concurs with this message: 'resilience means the skills, abilities, knowledge, and insight that accumulate over time as people struggle to surmount adversity and meet challenges'. This research aims to go further than focusing on the foster child by also examining the resilience, strengths and the attributes of foster families.

Gilligan (1997) notes that the nurturing of children and the developing of their resilience may be more effective in achieving a positive outcome, than securing an

ever elusive state of permanence in child placements. This research has also drawn on a resilience-led perspective and literature which does not focus overly on the past histories of the children but looks positively towards the future. As Chase *et al.* (2006:3) observe, 'the tendency to focus on the negative influences of the past can influence attitudes of professionals towards children from disruptive backgrounds and limit their perceptions of them'. Accordingly, I have not included a specific 'career' history for each child in placement within this study, but have situated the children as they were at my point of contact with them.

Much previous research on fostering has not included the voice of the children involved, especially the birth children who foster:

The theme of voice-voicing experiences, claiming the right not only to speak but also to be listened to - has become a metaphor for political recognition, self-determination and full presence in knowledge. (Thorne 2002:251)

A child focused sociological perspective can facilitate child participation and voice, as Winter notes:

Such research would encourage participation by focusing on their perspectives in and of themselves and, whatever their age, giving them a direct, unfettered voice and bringing these voices in to the public domain to bring influence to bear on policy, procedure and practice. (Winter 2006: 61)

In pursuing a more sociological, resilience oriented and participatory approach to research design, this dissertation will reveal something of the complex and intimate experiences that lie behind the discourse of care. Historically, policy privatised the family and was reluctant to enter the hidden context of the domestic family realm. Whilst we have seen an increasingly interventionist approach to the family over recent decades, policy has still tended to view the family as a private arrangement in which the state should only intervene directly in order to offer essential support and promote citizenship. By contrast, the safeguarding of vulnerable children has been built on a much more standards based, regulatory and controlling framework

with regard to parenting and child development (Smith *et al.* 2004). Fostering has thus straddled the private family and child protection services. As Erera notes:

More than any other family type, it (the foster family) is shaped by laws, policies and practice approaches that are often in contention from differing ideological perspectives. (Erera 2002: 21)

One might expect this increasing formality in foster care intervention given the continuing debate about fostering becoming a profession (Testa and Rolock 1999; Wilson and Evetts 2006). However this highly regulatory approach to foster care does not recognise nor capture the interdependence and everyday moral ‘workings out’ between people in caring relationships (Williams 2004). Nor does it not tell us about the emotional life and relationality of foster families, as it is not based on any knowledge of the interiority, intimacy, affect and subjectivity of the foster family. Thus, we have an insulation between the interior world of care and public policy, in which the latter does not seem to acknowledge the continuity of relationships and the ties of affection. Care is a social process and a daily human activity which needs to be recognised and valued as ‘the self can only exist through and with others and vice –versa’ (Sevenhuijsen 2000:9).

The ‘moral texture’ of family life (Williams 2004:41) is in reality about people in a range of personal caring relationships and working to maintain these. What can be seen is people constantly making moral decisions in connection with others, rather than pursuing individual choices. Children and young people can also be seen as active moral agents who have a strong moral base and they too can consider the implications of their actions in relation to others. The study has sought to consider children as active providers of care as well as recipients of care. Thus, we can see that care is based on mutuality, reciprocity and is central to family and fostering relationships. As Tronto posits ‘The world would look different if we moved care from its current peripheral location to a place near the centre of human life’ (1994:101).

It is the ethic of care and relationality in fostering (Orme 2002; Parton 2003) that provides the analytical thread running through this dissertation and which helps to weave it together.

An outline of the chapters

Chapter One: Fostering in the UK: key features and outcomes.

This first literature review chapter starts with an introduction and background to fostering, followed by the U.K. context of fostering. The chapter summarises statistical sources on fostering activity and considers the types and purposes of foster care. Evaluation studies of foster care are selectively reviewed. The chapter considers the involvement of children in foster care research. Issues of challenging behaviour and foster care training are also considered. The chapter concludes with a discussion of foster families as caring systems.

Chapter Two: Understanding fostering: conceptual frameworks and theoretical approaches.

The second literature review chapter starts with an exploration of these different but complementary conceptual approaches to foster care and related aspects of child development. Firstly, the chapter considers matters of attachment and stability and their links to psychological theory. The chapter then considers resilience and its connections to social and psychological perspectives. The chapter turns next to an area that has been relatively less applied to fostering, that of the sociology of childhood and the family. Notions of individualisation and the gift relationship are also discussed in relation to fostering. Prominent throughout this review is the ethic of care, as a set of discursive understandings that underpins the idea of fostering and its theorisation.

Chapter Three : Methodology and methods.

This chapter outlines the motivation and merits of a qualitative research design. It addresses matters of epistemology and ontology, particularly in the context of a case study approach. The chapter considers access, sampling, ethical issues and the challenges of researching with children. It addresses issues of validity, transcription,

grounded theory and the use of the NVivo data analysis programme. The chapter concludes with a critical summation of the methods chosen and their capacity to capture the highly nuanced world of care in a foster home.

Chapter Four: An introduction to the family: welcome and accepted.

This chapter introduces the families and gives an overview of key participants. The chapter starts with a description of each family (this is supplemented by genogram based data in the appendices). The chapter then presents the demographic material regarding the sample and comparing these data to other relevant research findings. The chapter then outlines aspects of family structure and composition and relates this to recent literature on U.K. families. Related issues of gender and role are then considered. The chapter concludes by reference to recent sociological research on 'displaying families' and considers how foster families may 'display' themselves.

Chapter Five: Family practices and parenting style: warmth and reciprocity.

This chapter looks at care as pivotal for child development in general and explores how this relates to the ways foster carers look after children. The chapter focuses on the family practices of the foster carers, what it is that carers actually 'do'. Parenting style is considered and their care is contrasted with that of the families of origin to demonstrate a very different care experience for most of the looked after children. The chapter then looks at rules within foster families and considers the formalisation of rules and how this may give rise to a notion of the 'bureaucratised child'. The chapter concludes by outlining briefly the support networks available to these families, taking a systems perspective to grasp an often complex weave of individuals, groups and organisations.

Chapter Six: The gift relationship: the long and the short of it.

This chapter reveals the background to these families, their motivation to care, their biographical and cultural histories and examines the central role of both foster mother and father. The chapter invokes the notion of the 'gift relationship' versus individualisation to examine attitudes to fostering. The nature of the 'gift' is explored in relation to providing stable long term care, the implications of this for service providers in delivering durable placements is also considered.

Chapter Seven: An invitation to a good meal.

This chapter considers the ceremony of symbolism of food as an expression of intimacy, affect and belonging. The chapter utilises food as an exemplar to illustrate aspects of parenting approach by carers. The chapter demonstrates how families operationalised many of the principles of good parenting via their approach to food. Issues of choice and access to food by the fostered young people, the routine and preparation of food, regularity and synchronicity are considered (and tie in closely with Chapter Nine which focuses on space and time). The enactment of the family meal is examined, particularly the significance of the 'Sunday Lunch' as a means of family celebration and communing. The chapter concludes with a summation of food as the vital ingredient of association and affect for both family life and successful fostering.

Chapter Eight: Embodying the child in foster care.

This chapter examines the view that the 'body' while often discussed within a sociological framework, is much less considered within social work literature and procedures. The body rarely features in social work assessments or standards. This chapter focuses on issues of care, intimacy and the body, particularly as foster care often involves serial strangers entering the family home. The chapter considers what boundaries need to be in place for these encounters and transitions to be made successfully. The chapter goes on to look at gender, bodily care, comfort and related needs in foster care. The chapter explores the importance of touch as a demonstration of care and intimacy. The chapter highlights how touch is an essential aspect of all relationships and yet some children who are fostered often have limited experience of this. The chapter concludes by reference to matters of boundary, dirt and taboo in fostering.

Chapter Nine: Caring for strangers: the importance of space and time.

This chapter focuses on matters of space and time as perceived by the foster carers. Space and time are rarely analysed dimensions of care and can be seen as particularly critical given that the foster relationship necessitates the acceptance of an outsider into the very private confines of the home. Families need to create space

both literally and emotionally for the stranger coming into the home. It is this acceptance and opening up of the borders that the chapter reveals through the notion of the 'flexible family'. Time is also critical to the process of absorption and building of the fostering relationship. Thus, boundaries both temporal and spatial are considered with particular reference to how foster children internalize such boundaries. The chapter concludes with reflection upon time and its relationship to the life course.

Chapter Ten: Children's voices: space, time and place. 'I've landed on my feet really'.

The final chapter gives a distinct voice to the children in this study. Their perspectives are presented in relation to their wants and desires. Their experience such as around space and time, reveal insights into the fostering process. The chapter considers the importance of communication and the use of computers for keeping in touch. The views of fostered children on leisure activities, what makes for resilience building, warmth, care and parenting from carers are critically examined. The impact of fostering on sibling relationships and positioning within the family is explored with birth children, as is the role of the birth child in the family business of fostering and their responsibilities. The chapter concludes by reference to the importance of extended family networks and community support.

Conclusion.

The analytical thrust of the study is reprised by a summary of the findings and their implications for practice. The chapter reflects upon the way in which foster care both illuminates and is illuminated by aspects of sociological theory. The chapter ends by outlining potential areas for further research raised by this study.

Chapter One. Literature Review - Part One

Fostering in the UK : Key features and outcomes

Introduction

The central aim of this first literature review chapter is to provide a broad context for the empirical research that follows by discussing and analysing the literature relevant to foster care. No attempt has been made to write a history of foster care as this is beyond the scope of this thesis and the chapter focuses mainly on fostering in the UK. The literature review has been divided into two chapters to reflect the emphases of the thesis. The second literature review chapter considers the conceptual framework for the study that draws particularly on notions of resilience, the ethic of care and recent developments in the sociology of the child and family.

This first chapter will look briefly at the context which has underpinned foster care in the UK. The types and purpose of foster care are then considered. This is followed by a section on the outcomes from studies of foster care, covering both long and short term placements. The chapter then focuses on studies that have listened to children within foster care research. The chapter then moves on to the perceptions of foster carers. We then address the inner workings of the foster family before concluding with some reflection upon the way this study has developed in response to key themes emerging from the literature review. The literature pertaining to foster care is now vast, and has moved from 'famine to feast' (Sellick 2006), thus I have focused on sources that are the most relevant to the aims of this study.

Background to contemporary foster care

In the United Kingdom the concept and development of foster care began in Scotland in the mid nineteenth century, although different forms of boarding-out existed as far back as the seventeenth century and beyond (Triseliotis *et al.* 1995). The traditional role of foster care was to act as substitute parent, so very often contact between the child and the birth family was discouraged in an attempt to strengthen the fostering relationship.

Short-term care and family re-unification came to be seen as complementary goals after the 1948 Children Act (Triseliotis *et al.* 1995). Different skills were required as the role developed from foster parent to foster carer, that is, a role often involving work with birth families and contributing to care planning. These changes were reinforced by the move from residential care towards community based care in the 1980s, when increasingly specialist foster carers were recruited as an alternative to institutional care. Rowe and Lambert's classic study (1973) highlighted the plight of many children lingering in residential care and this was part of the impetus to move children away from such institutions. As a consequence of these changes, children entered foster care with diverse needs and frequently with difficult behaviour. Bullock (1990) argued that if foster carers were needed to look after children with challenging behaviour they would have to be partners rather than agents of social workers. The role of partner however does not seem to have been achieved, and many carers do not feel properly valued or listened to (Kirton *et al.* 2007).

Colton and Williams (1997) reviewed international trends and developments in the purpose, definition and practice of foster care. They note that the term 'foster carer' has been implemented specifically to avoid the implication that a child's biological parents have been replaced by individuals and families that foster. The idea of fostering as family support with the aim of family reunification, was given further legislative support by The Children Act (1989). The efforts of Colton and Williams (1997) to define foster care were beset by difficulties, as the same term means different things in different countries, and the difference often extends beyond language to underlying concepts or ideas (Wilson *et.al.* 2004). Given these practice and conceptual diversities, the following definition has been adopted for this thesis:

Foster care is provided in the carers home, on a temporary or permanent basis, through the mediation of a recognised authority, by specific carers, who may be relatives or not, to a child who may or may not be officially resident with the foster carers. (Colton and Williams 1997: 48)

Statistics for foster care

Foster care provides placements for over two thirds of children in England, and

three quarters in Wales looked after by local authorities (Fostering Network 2008). It is a major resource in child and family welfare provision and the proportion of children in public care placed in foster homes has doubled over the last twenty years. There are just over 72,000 children and young people looked after on any given day in the U.K., over 51,000 (70 per cent) of whom live with 43,000 foster families [i.e. non-relative] (Fostering Network 2008). The Fostering Network estimates that a further 10,000 foster carers are needed across the UK. The figures are delineated for both England and Wales below:

England

- 60,000 children looked after on 31 March 2007.
- Over two-thirds of these children (42,300 or 71 per cent) were living with foster families.
- There are approximately 37,000 foster families in England.
- The Fostering Network estimates there is a shortage of at least 8,200 foster families.

Wales

- 4,640 children looked after on 31 March 2007.
- Three quarters of these children (3,465 or 75 per cent) were living with foster carers.
- There are approximately 1,900 foster carers in Wales.
- The Fostering Network estimates there is a shortage of at least 750 foster carers.

(www.fostering.net/media_centre/statistics accessed 9th June 2008)

Most carers remain volunteers and receive an income to cover expenses, and most children enter short-term care and return home quickly (Berridge 1999). A trend toward fee paying in the statutory and particularly in the independent sector has developed in recent years and a more 'professionalised' approach has been taken towards the role, identity of carers and their relationships with other agencies (Wilson and Evetts 2006). In short, fostering is more and more being viewed as a skilled and effective intervention, but many argue that it remains a service that has

yet to be properly funded, supported and researched.

Independent fostering agencies (IFA) were first set up in the UK in 1987, with the intention of offering a better service to foster carers and the children for whom they cared; there are now thought to be as many independent agencies as there are local authority fostering agencies (Sellick 2002). Independent agencies tend to have round the clock support, regular respite care available, additional health and educational services provided to the children being looked after by carers. They also offer carers more financial support. The survey of Independent Fostering Agencies in Britain has challenged conventional wisdom that IFAs are private enterprises which poach local foster carers who then provide children and young people with unplanned placements where none are locally available (Sellick and Connolly 2002:117). Their study found that only 33% of foster carers were directly recruited from local authorities. The outcomes for children placed in either independent fostering or local authority foster homes have not been directly compared, so there appears to be little known about whether the support services provided by independent fostering agencies 'make a difference to children' (Sellick and Connolly 2002:119).

Berridge (1999) argued that many local authority carers are paid below the NFCA (National Foster Care Association) rates, and are thus not reimbursed for what are calculated to be the essential living costs of looked after children. Some suggest that foster carers are therefore subsidising the state (Berridge 1999a). This was echoed again by the National Fostering Network in 2007, noting that most foster families in Wales 'struggle on a low wage and 81 percent of the carers received less than the minimum wage' (2007b:1). Many argue that foster carers are not given the status, consultation or remuneration that they deserve (Hutchinson *et al* 2003). As residential provision reduces across the UK for a variety of reasons, including high costs, so fostering is assumed as the preferred alternative for many of our children. However relatively little research evidence exists on the comparative outcomes for children and young people in foster and residential care (Hayden *et al.* 1999:73). We thus see two areas where there has been little comparative research; between the outcomes for those children placed via an independent agency and those placed

with the local authority; and between residential care and fostering.

Alongside the decrease in residential care provision is the aim of reunification with the birth parents as outlined in the Children Act (1989) and alluded to earlier. This often means (for older children in particular) that there will have been numerous failed attempts at reunification with birth families and this will probably have had a damaging effect upon the young people (Sinclair *et al.* 2000). Children's difficult behaviour can cause stress for carers (Farmer *et al.* 2004) who require increased support to fulfill their role.

Attempting to meet the increased demand for foster care has not been achieved without considerable strain for those involved, nor has it occurred with sufficient attention to resourcing and regulation. Colton *et al.* (2008) note a world wide shortage of foster carers, and difficulties over recruitment and retention. These and related issues were clearly emphasized a decade ago by the National Foster Care Association (1997) whose report *Foster Care in Crisis*, pulled few punches about the worrying state of prevailing arrangements.

The lack of foster carers has a range of implications :

- most foster households are full and do not have immediate vacancies.
- little choice is available for new admissions
- the range of carer competences and preferences does not necessarily correspond with the range of needs of children
- there are marked variations in the levels of carers across the country

A raft of policy and government guidance over the last decade has sought to configure a more preventative structure for children and family services, for example, the Children Act (2004), *Every Child Matters* (DfES 2003) in England and its counterpart in Wales '*Children and Young People: Rights to Action*' (WAG 2004) and *Care Matters* (DfES 2006). The extent that these bear upon fostering directly is not entirely evidenced by research. However, what we do know from Government policy (DfES 2006) is a continuing disparity of outcomes for looked after children. Notwithstanding that we have regulations, guidance and standards

(Smith *et al.* 2004), minimum standards for fostering and changes to the tenure of fostering through the Leaving Care Act (2000), it would appear that we continue as before with worrying trajectories with regard to the well-being of looked after children, and indeed an increasing body of looked after children. It is towards the context of care itself that this chapter focuses, looking at the empirical context.

Types and purpose of foster care

Many of those who enter the care system spend little time there, around 32,000 children in the UK entered the care system in 2000/2001, and a similar number left (DoH 2001a). Among children who ceased to be looked after in England during 2001/2002, just under a third had spent less than eight weeks in care, and around 43% less than six months (DoH 2002a). After a year, the chance of leaving care drops rapidly and those who stay make up the majority of children looked after at any one time. Bullock *et al.* (2002) found that most children go home very quickly and relatively easily, others return after long separations and a few go by default or accident. These sources suggest a basic distinction between short term and long term care. Further distinctions can be made according to the purpose of the stay, for example, a short term placement may occur while a parent is hospitalised or for the purpose of remand. The following outline is adapted from Rowe *et al.* (1989) as a possible general classification:

- Short term - emergency, assessment, remand, roof over head
- Shared care - regular short 'respite' type breaks
- Medium term (task centred) - treatment, bridging placements, preparation for independence, adoption.
- Long term - upbringing.

The '*Fostering Success*' report published by the Social Care Institute for Excellence (Wilson *et al.* 2004), suggested that the above categories are still relevant. Although the same categories still apply, those fostered in each category may have changed. Rowe *et al.* (1989) for example in the 1980s found little evidence of planned, regular respite care for non-disabled children, whereas Rees (2002) some fifteen years later found that planned respite care was more commonly used.

Short stay foster care

Short stay foster care caters for a greater number of children than any other. Social workers see such placements as meeting a variety of needs, for example, to support parents who are at the end of their tether or to manage a temporary crisis. Short-break, respite or relief foster care can work with birth parents in a variety of ways. It can offer a series of short breaks, particularly for disabled children or it can offer respite care to parent and child together or offer ongoing support to the birth parent. Support foster care has been developed as a model of family preservation where a family is experiencing intense relationship problems. Another strand of foster care is specialised, therapeutic or treatment foster care which is likely to be provided by specialist schemes. Typically these schemes offer high levels of support, are often aimed at a challenging clientele and are for a restricted length of stay.

Long stay foster care

The term 'long-term foster care' is widely used but imprecisely defined. Generally, long stay foster children are those who are not seen as returning home in the near future but who are not going to be adopted. They are therefore there for upbringing. Much of the policy and research has focused on this group. The Fostering Network (2007c) suggests that providing a permanent or long-term placement in foster care is the very best option for many looked after children. They advocate that long-term foster care should have equal status as a placement option with adoption once it is established that a child/young person cannot return to live with their birth parents or wider birth family for whatever reason.

The outcomes to be expected from each of these types of foster care are clearly different. Short-term care is unlikely to have a significant impact upon a child's long-term outcomes. Performance measurements and outcome indicators have therefore tended to be based on children who have been looked after for twelve months or more where impact is likely to be more visible.

Findings in foster care

Some of the most comprehensive research in the U.K. has been done by Sinclair *et*

al. (2000) who undertook a large study, involving the foster carers of 596 children, across seven local authorities. The research was undertaken in a three stage 'sweep' approach (see Sinclair *et al.* 2005 b: 20) and the authors have published widely. The initial study by Sinclair *et al.* (2000:255) identified seven trends in the development of foster care in the UK:

- Rarely is a child in foster care without attempts at rehabilitation with birth parents, and with the reduction in residential care this has led to an increase in challenging clientele, including teenagers who have had repeated failures at returning home
- A change in role of carers who are now expected to work in partnership with birth parents, who might once have been regarded as rivals and/or the source of foster children's ills
- There has been no development of a sophisticated theory of fostering. Specialist schemes have developed but they typically lack the elaborate justifications of their North American counterparts
- There are increasing attempts to professionalise fostering
- There are concerns about the performance of foster care for long term stability, education and after care
- There is a lack of choice and shortage of carers, particularly for ethnic minority groups and teenagers
- There is competition from independent foster care agencies which may lure away carers

Profiles of the carers in the Sinclair *et al.* (2000) study found that there were few with young birth children, or where the female in the family worked full time. One could deduce from this that carers perceive that they should not have full time work or have young children and that this may constrain the supply of carers. Sinclair *et al.* (2000) also collected data on the educational background of the carers. They found that generally, the more well educated the carers the less generously they perceived the income from caring. They also found that 46% of the young people in foster care were female and 54% male. They also found that 18% of carers had no child placed with them at the point of completing the questionnaires; again this

could play a part in both the lack of supply of foster carers and in the diminished allowances received. Each carer had on average 1.8 children placed with them at any one time.

Difficulties and complexities in measuring outcomes in foster care

As foster care offers a 'time-limited form of permanence', Sinclair *et al.* (2005b) suggest that 'it should not be evaluated on its own but rather as part of a career' of a child. This raises the question whether foster care should and can be evaluated at all in its own right. For those who have attempted to evaluate foster care, measurements of outcomes have often been the mode of analysis. The measuring of outcomes in foster care is a somewhat contentious area and there is little evidence of the outcomes of foster care being monitored systematically by the professional community in order to guide the development of policy and practice (Kelly and Gilligan 2000).

Much of fostering research in the UK is not rich in comparative analysis, nor in different kinds of outcome measures (Sinclair 2005). Many larger studies of fostered children have difficulty in achieving high response rates, with some studies reporting less than 10% (Shaw 1998). Young children who stay only briefly in the looked after system are often absent from the research literature, as are those who stay in the same foster family for a long time and identify themselves as family members, rather than children in care. Getting permission to interview children about various aspects of their care is problematic and the limited research of children's views on foster care is therefore unsurprising (Berridge 1999).

The main issues around outcome measurements for foster care are the range of factors assessed as measures of outcomes of success or failure, what or who should the outcomes be compared with and what are the outcomes to be assessed against. It was noted for example by Sinclair *et al.* (2005b) that those children who returned home showed little, if any, educational improvement. Thus, should outcomes be measured against what the child might have achieved if returned to birth parents, or against children who have never experienced any disruptions in their lives? The few studies which have compared this have found that children who stay in the care

system longer appear to be less psychologically and physically damaged than those returned to disruptive homes (Sinclair *et al.* 2005 b:10). Forrester's (2007:20) recent review of the outcome literature also suggests that children who return home do worse on a range of measures, including health, education and behavioural difficulties. He notes a lack of research in this area but concluded :

There was little evidence of the care system having a negative impact on children's welfare. Indeed, in almost all of the studies children's welfare improved, while there were none which deteriorated...even after positive care experiences (however) the children in most of the studies had significantly more difficulties than might be expected in the general population.

Thus, we can see some of the difficulties in attempting to measure outcomes. Outcome choices are usually justified in terms of the logistics of the research and resources available. Most child care research is funded by the government or agencies with specific interests and their criteria and agenda generally dominate. Funders sometimes want measures of outcome that reflect their view of the issues or problems that may vary significantly from the views of other key participants. Research capacity is always finite. Outcome studies tend towards breadth to allow statistical rigour but this may not facilitate a depth of understanding. There is now however a growing recognition that we need more of the 'qualitative' type of study that will reveal systematically the experience of being fostered and fostering. As Berridge observed (1997: 41) 'it is hoped that future investigations will include contact with foster carers and with children'.

The measuring of outcomes in foster care is a difficult and imprecise science. However, our knowledge about the characteristics of the child's life and day-to-day parenting which appear to be associated with good outcomes makes it possible to consider interim outcome measures. Whether children have a sense of permanence and a sense of personal identity as they grow up are particularly useful interim outcome measures for children in placement, but they need to be put alongside other measures which developmental psychology suggests are important for all children

(Sellick and Thoburn 1996).

There are aspects of foster placements that can be evaluated in more detail, to see if they correlate with what we know may predict a successful placement. For example, *The Looking After Children: Assessment and Action Records* (Parker *et al.* 1991; Ward 1995) are based on the impact of parenting on child development and demonstrate a different type of complexity for outcome based research. Following the work of Parker *et al.* (1991) and Ward (1995) based on interim outcome measures, the Department of Health funded development work on a set of schedules which can be used to measure whether the day-to-day needs of children who are being looked after are being met. Evidence from longitudinal studies suggests that if success is achieved using these interim measures, the long-term outcomes are more likely to be positive. That said, Sellick and Thoburn (1996) demonstrate the difficulties in looking at interim outcomes, noting the many variables which have to be taken into consideration and they group these as follows (see Table 1.1 overleaf).

Table 1.1 gives an idea of how complex can be the notion of outcome, and how difficult it may be to have confidence that a particular outcome is associated with a particular practice or placement. There are four main challenges in measuring outcomes. Firstly, timescales are very important when trying to make sense of family placement research. It is possible to measure an outcome at any point in time but the outcome may be different at each juncture.

Secondly, there can be difficulties in setting thresholds for placement moves and measuring these. Harwin and Owen (2003) concluded that the number of moves in placement was useful for performance targets, but on its own it is a poor indicator of stability in foster care. From my own earlier research (Rees 2002) I demonstrated how a young person who had moved placement the most (three times) was in fact very settled, having made a positive attachment to the carer and was achieving other positive outcomes with regard to education and access to community resources.

Table 1:1 Variables in fostering

Variables for the child	The characteristics of the child, the age and gender of the child, the degree of life difficulties experienced to date, problem behaviour demonstrated, their pre-placement experience, previous attachments to parents, siblings and previous carer givers.
Variables for the professionals involved	The child's social worker, the foster carer, the foster carers' support worker, education, health, mental health and community involvement.
Other extraneous factors	Including 'chance' that may impact on the outcomes for the young adult identity.

Thirdly, outcomes as assessed by different participants in the fostering process can be very different. Rowe *et al.* (1989) were conscious of relying solely on the opinions of social workers to assess outcome criteria, as the single perspective approach is a major weakness of much foster care outcome research.

Lastly, one cannot measure outcomes at all unless the purpose and types of foster care are considered. The chapter now moves on to look at evaluations of long term foster care.

Research evaluations of long term foster care

Long term fostering is an imprecise concept, for example, at what point does a placement become long term and how definite must it be that a child is not returning home to allow a placement to be deemed as long term (Lowe and Murch 2002). Studies of long-term foster care fall into two categories:

(a) Those conducted during the planned life of placements or shortly after their endings. These either follow a cohort of placements for the period of time after they have been made (e.g.: Fanshel and Shinn 1978; Thoburn, Murdoch and O'Brien 1986; Kelly 1995:), or take a cross sectional look at a sample or population of

placements at one or more particular points in time (Rowe *et al.* 1984; Berridge and Cleaver 1987; Rowe *et al.* 1989; Schofield *et al.* 2002; Sinclair *et al.* 2003a). These studies carried out during or shortly after are by far the most common studies of long term foster care and might be called 'current practice studies'. The drawback of these types of studies is that it is clearly not possible to evaluate long term outcomes of current or very recent placements. The strength of studies close to the time of the placement or during placement however is their immediate knowledge about current practice and its effects on children and how it is perceived by the participants at the time.

(b) Those conducted when placements are over and the children are adults (Festinger 1983; Zimmerman 1982 cited in Wilson *et al.* 2004). These studies are rare and rely heavily on testimony of former foster children. They are harder to carry out for a range of methodological reasons, principally the difficulty in getting access to subjects. These are sometimes called 'follow up studies'. They can tell us about the long term effects of placements but placements may have been so long ago that it is difficult to determine what was attributable to the placement and what to subsequent life events. They also rely on testimony and only from those who are still accessible to the researcher. It is difficult to obtain a broadly based and randomly selected sample (Festinger 1983).

Evaluations of short term foster care

There have been few evaluations of short-term foster care in the U.K. However, Rowe *et al.* (1989) developed a two-pronged approach to assessing outcome; they asked 'did the placement last as long as it was needed?' and 'to what extent were the original aims met'? The aims of short-term foster care are usually more easily met. Rowe *et al.* claimed that over 80% of short term placements lasted as long as they needed to. This figure dropped to 70% for emergency adolescent placements. It was notable in this study that older more experienced foster carers tended to have fewer disruptions. This was not confirmed by the more recent research of Sinclair *et al.* (2003b) into longer term care, which found that older more experienced carers experienced more disruptions, although the older carers also experienced higher levels of satisfaction with the fostering role. Previous studies however have

suggested that the older the carer the more stable the placement (Hill 1989) thus demonstrating the complexity and nuance of evaluation statistics and their interpretation.

Success whose definition?

In order to look at the characteristics and attributes of a foster family that contribute to a successful placement, it is necessary to define 'success'. A satisfactory placement is usually seen as one which lasted as long as it was intended to, prior to reunification or movement on to a planned longer term placement (Leathers 2006). A successful foster placement where the placement has not broken down and has had identifiable positive repercussions has typically been measured by the improved outcomes for the young person placed within the family, and the level of satisfaction for the host family. Berridge and Cleaver (1987) noted however that a break down in itself is not as clear an outcome as might be wished, as it depends on the perception of how long the placement was intended to last. Leathers' (2006) study considered a disruption to be placements which were terminated and followed by another non-permanent placement. Here we can also see how elusive and difficult the notion of 'success' can be.

Sinclair *et al.*'s second stage study (2005a) suggested that success depended on three aspects:

- the children's characteristics - wanting to be fostered, having attractive characteristics
- qualities of foster carer - warm, child-centred carers being more successful
- the interaction between the two parties - whether they 'clicked'

The findings emphasise the crucial importance of the foster carers to the outcome. They also stress the importance of paying close attention to children's views and the importance of early intervention to prevent negative spirals of interaction between carer and child. Previous research on the factors that lead to placement success (Berridge and Cleaver 1987) suggest that breakdowns occur as a build up of events with the apparent reason being more the 'final straw', rather than some singular cause. We now move to issues of matching and interaction.

Nuance and serendipity: looking at the subjective aspects of care

It was noted by Sinclair *et al.* (2005a) that similar children may elicit different reactions from different carers. This somewhat subjective element, sometimes referred to as 'chemistry', or as having 'clicked' is rather elusive. Children stressed the importance of compatible expectations in relation to discipline. However, if a child accepts the carer they are more likely to accept the carer's rules. Even if they are compatible about rules, they may not necessarily be compatible on other things e.g. nurturing, and physical reassurance. Sinclair *et al.* (2005a) found that 'chemistry' led both sides to know intuitively but decidedly that a placement would not work. However such subjectivities cannot be planned for by agencies who cannot easily operate on such tacit criteria (Wilson *et al.* 2004). Sinclair *et al.* (2005a) also noted that if a child wants to leave it is also important to act upon this. However, performance indicators for agencies make this a difficult decision to make, as a change in placement will become a negative indicator.

Some would argue that good foster carers are not produced by good organisations or strategic plans (Wilson *et al.* 2004). They must primarily be acquired through effective selection of people and an agency needs to recruit sufficient carers to allow for a choice of placement to be made and for the views of children to be sought and heard, as we discuss next.

Views from the children

Some research in foster care has not managed to incorporate the voice of the child. This might be because of the approach of welfare professionals:

By making assessments and offering 'expert' advice that draw on constructions of childhood and the child that are derived from the process of parenting and children's experiences of being parented, those welfare professionals are unable, as a consequence, to acknowledge sufficiently what being a child means in terms of that child's experience, agency and personhood. (James and James 2004:201)

Many advocates of children's participation and citizenship have argued that:

taking account of children's perspectives also requires a fundamental change of ethos and culture, and a move away from an adult driven approach to the accepted ways of dealing with issues. (Rose 2006: 287)

It may be that this shift has been difficult to achieve. Nonetheless, Holland's (forthcoming) recent review of research that directly engages with looked after children noted an emerging new tradition internationally, with increasingly sophisticated theoretical and methodological diversity. Within the UK, the two most common methods have been postal questionnaires and interviews.

Postal questionnaires

Postal questionnaires are often utilized with children to collect quantitative data. Beck (2006) collated data from 109 postal questionnaires with regard to issues of young people and mental health. Timms and Thoburn (2006) analysed 735 questionnaires completed by children with regard to their views of the Children Act (1989). Many researchers use a combination of surveys/postal questionnaires and interviews with young people. For example, Sinclair *et al.* (2005b) included interviews with children within their later case studies, and interviewed 20 children and young people in total. Much of their data from children however was generated from the earlier sweep of postal questionnaires. The drawbacks of questionnaires is that they are not generally perceived to be child friendly and often obtain a poor response. As Sinclair *et al.* acknowledge their analysis of the material from the postal questionnaires had to be 'impressionistic' because of the brevity and variety of children's responses and the difficulty interpreting these. The questionnaires lacked detail, history, context and could not be systematically tested. Their three year follow up study to find out where the children had moved to and how they were getting on, also included a postal questionnaire sent to 369 children (2005b).

Interviewing foster children

Some examples of recent illuminating studies that have interviewed foster children have revealed recurring themes of children valuing positive, caring relationships

with carers and social workers. They also note that children often do not understand how decisions have been made and they feel that they have not been listened to (Thomas 2000; Padbury and Frost 2002; Aldgate and McIntosh 2006; Happer *et al.* 2006). For example, Happer *et al.* (2006) interviewed people in Scotland who had experience of being looked after, ranging in age from 16 to 46 years, who were deemed as having made successful lives for themselves. Many highlighted the importance of a significant, caring relationship. Ward *et al.* (2005) interviewed 27 young people two years after they had been looked after and interviewed a further ten young people one year later. Clearly there are benefits from a longitudinal approach as it allows for changes in the reflections of the young people and for progress to be mapped over a period of time.

Birth children

Relatively little attention has previously been paid to the feelings of and impact upon birth children. Doobar (1996) interviewed and ran workshops with young people who were the birth children of carers and they clearly felt that their views were not listened to and that they should be involved in the planning stages of a placement. Fox (2001) undertook such a study and found that birth children wanted to be included in all stages of the planning of the foster care process. She found that birth children can be put at risk by inappropriate matching and they too need preparation for a forthcoming placement. It can be harm to birth children that contributes to placement breakdown. Birth children often have to cope with and accommodate very disturbing experiences and behaviour and may often be left to their own devices to manage a wide range of emotions (e.g. hurt, rejection, anger, shock and feeling let down). Spears and Cross (2003) undertook a small study involving twenty birth children and the majority of children felt they would like to have been more involved in the preparation for placements, and to have more consultation with fostering agency staff.

Farmer's study (2002) concluded that many carers received informal support from their own birth children and where this was forthcoming there were fewer disruptions in placement for the foster child. Thus we can see the significance of birth children to successful fostering.

Twigg and Swan (2007) undertook a meta-analysis of 14 studies looking at birth children. They suggested that birth children have an enhanced awareness of social issues, gain satisfaction from seeing foster children develop and grow. When they become young adults they may well consider fostering themselves. Conversely, some birth children viewed the assumed positives of fostering as over stated. Birth children often found it difficult to complain for fear of being seen as selfish and undermining of their parents choices; they also wanted to support and protect their parents. It was acknowledged in some of the studies that birth children had to deal with aggression and many were recipients of violence and/or threats. Twigg and Swan (2007) noted that in some cases, if similar treatment had been experienced by a child/young person who was being looked after, it may be the subject of a planning meeting, review or child protection conference. Owen (1989) too concluded that there needs to be a change in attitude, policy and practice in order to understand the demands and pressures birth children are burdened with and to address their needs more effectively.

Gorin (1997) and Fox (2001) researched the impact and involvement of the birth children but did not interview the children in placement. Part (1993; 1999) considered birth children and conducted a postal questionnaire with them. Pugh (1999) interviewed nine birth children of foster carers, including some adult birth children. Both Part and Pugh came to some similar conclusions, that the majority of children enjoyed fostering and there were some inherent benefits in doing so. However in neither study were birth children *and* foster children interviewed. Triseilotis *et al.*'s (2000) major Scottish study devotes a chapter to birth children, but they rely solely on the views and perceptions of the foster carers. Few holistic research projects have been undertaken which involve all the voices of the children (both birth and foster) within the foster family unit.

Placement with siblings

Berridge and Cleaver's (1987) study of foster home breakdown remains pivotal in that it highlights aspects still neglected by later studies and they take a more holistic view. Rather than focusing on relationships between the foster carer and the young

person which rely heavily on the assumptions within attachment theory, they found that sibling and peer support were vital. There were fewer breakdowns where young people with other siblings had at least some of those siblings living with them; the children did not change school; other foster children of a similar age were placed together and where they were able to offer each other support. This seemed to promote resilience in children who were mutually supportive of each other, highlighting the caring qualities of children in foster care. The ability of a young person to build and sustain relationships with their peers is a useful barometer of emotional health (Schaffer 1996).

The research evidence on the impact of placements with siblings is equivocal (Dance and Rushton 1999; Head and Elgar 1999; Mullender 1999; Helgar 2005) and some studies have found that being placed with siblings is associated with more successful outcomes (Fratter *et al.* 1991; Wedge and Mantle 1991). One study in the US (Kim 2002 cited in Wilson *et al.* 2004) noted that children who were placed together with their favourite siblings appeared better adjusted than children separated and placed in different foster homes. Children who were emotionally close to their siblings and separated from them had the highest level of maladjustment, those who were not close seemed unaffected by separations. This highlights the difficulty of gleaning definitive findings, which are difficult to extrapolate from the myriad of factors involved and the need for individualized and contextualised understandings. Helgar's meta-analysis of 17 international studies of sibling placements found 'factors associated with separation of siblings are similar and consistent with earlier research' (2005:731) and that joint sibling placements were 'as stable or more stable' than placements of separated siblings. Nevertheless, she concludes with the need for individual assessments to be made for each child.

The presence of other children

There have been mixed findings regarding the presence of the foster parents' own children who are near to the age of the foster children. This significantly increased the likelihood of breakdown in Berridge and Cleaver's study (1987). Sinclair *et al.* (2003b) however did not confirm this finding as they found in their study that birth children being in the household did not have an adverse effect upon placement

disruption. Farmer (2002) however found that if there was a birth child in the home who was between two and five years younger than an adolescent foster child, placements were at increased risk of disruption possibly because these younger children were at more risk from violent behaviour or more vulnerable to being affected by the behaviour. Young people with histories of aggressive or difficult behaviour experienced higher levels of disruption in Farmer's study (2002). She also found that the converse was true; young people who had previously shown emotional distress in the past had fewer placement breakdowns, possibly because they had turned their difficulties inwards rather than acting them out. Having considered research with foster children, birth children and placement with siblings, we now move on to the perceptions of the foster carers.

The view from foster carers

Foster carers' perceptions of young people, their motivation to be carers and their understanding of the fostering remit are vital pieces of information when researching foster care. Buehler *et al.* (2003) examined foster carers' perceptions about the nature of successful fostering. They interviewed 22 foster carers in total. They were keen not to limit the responses of carers too narrowly by asking prescriptive questions. They therefore examined carer perceptions by asking them 'a series of open-ended questions about the rewards of fostering, stresses of fostering, familial and parental beliefs and behaviours that make fostering easier, and interpersonal beliefs and behaviours that make fostering difficult' (2003:64). The selection of those topics was based on a systems and family strengths perspective, which is a preventative based model that focuses on developing or strengthening skills needed to foster successfully. It is vital to understand what carers find rewarding about fostering because these assumptions they hold are likely to motivate them to cope successfully with the demands and stresses of fostering. It is thought that it is the perceived rewards which most likely serve as powerful stabilising forces during times of family stress. The most cited rewards in their study were 'making a difference in a child's life and seeing a child grow and develop' (2003: 66).

The most common stressors cited by Buehler *et al.* (2003) were the behavioural,

emotional and health problems of the children; the age and number of children; and the child leaving or being removed. Common themes with regard to perceived factors facilitating successful fostering centred around the structure of family patterns and daily life. Carers also noted a need for strong organisation and set routines. Carers believed that clear rules and expectations facilitate successful fostering along with consistency. These reflect important parenting characteristics identified in the literature on parenting (Orme and Buehler 2001). Although there has not been much focus in the fostering research on family and interpersonal strengths, some research on family functioning that systematically assesses family life structure and consistency suggests that successful foster families are characterised by routine and structural clarity (Seaberg and Harrigan 1997). The importance of clear, consistent structure, along with a need for flexibility, patience and empathy demonstrates the complex nature of successful fostering. The primary contribution of the Buehler study is the elaboration of familial and parental factors that facilitate or inhibit the fostering process. As Buehler *et al.* (op cit) asked open-ended questions, the respondents reported their thoughts but were not given the opportunity to report the extent to which they agreed or disagreed with statements that reflect themes mentioned by other respondents. They concluded that it would therefore be helpful for future research to focus on foster carers responding to statements that identify potential facilitating and inhibiting factors, using a Likert-style agreement/disagreement response format. Their suggestion helped inform the design of the postal questionnaire in this thesis.

Challenging behaviour and foster carer training

The characteristics of the child being placed in foster care will undoubtedly have an impact on success rates. Berridge and Cleaver (1987) concluded that the older the children are at placement the more likely the placement is to fail. Teenagers for example, are often 'on the move' even in 'ordinary families' and most studies of teenage placement schemes show quite high rates of breakdown. Studies have generally found that foster placements of older children are more prone to breakdown than those of their younger peers: similarly placement aims are more difficult to achieve (Rowe *et al.* 1998). Young people's behaviour can be critical to the disruption of placement. The foster carer's ability to deal with these types of

challenges is also crucial. With the reduction in residential facilities, foster carers are being expected to cope with young people displaying increasingly more challenging behaviour (Sinclair *et al.* 2000).

Quinton *et al.* (1998) studied long term adoptive placements and suggested some parents were able to reduce behaviour by skilled parenting. Others were overwhelmed and their parenting capacities decreased, showing a decline in their parenting skills. A study by Pithouse *et al.* (2002) on a similar theme, looked at training foster carers in the management of challenging behaviour to see if this resulted in a change in the young person's behaviour. Their study employed a control group of 53 carers, whilst another 53 carers attended training. Whilst the training was well received by carers, the research could not identify any change in the child's subsequent behaviour. Indeed, carers perceived that they were coping better with the behaviour, although this was not reflected in the behaviour of the young people. A critical aspect of the study was the short time scale between the training and the check for altered behaviour, some four to six weeks later.

Macdonald's (2002) study was designed to test whether training foster carers in methods designed to help them manage challenging behaviour would have benefits for looked after children and foster carers. Whilst primarily concerned to test whether it enabled carers to manage difficult behaviour, it was of interest to see whether it would enhance carers' confidence in their capacity to care for challenging children. This study too had some disappointing results. Whilst carers in the training programme did not report more success than those in the control group, only a few carers completed the behaviour checklist on which this finding depended. The carers showed a secure understanding of the model but a weakness in the implementation of it. The majority of the carers thought that their child's behaviour had improved in general since participating in the training. If anything, the carers in the training group showed a slight increase in the number of unplanned terminations of placement from post-training follow up. Sinclair *et al.* (2000) found no evidence that training or support affected placement success, but it did affect carer retention. It is difficult to ascertain whether training programmes around challenging behaviour can be effective. These studies mentioned above however were not

longitudinal, which might reveal different findings. Having outlined key themes around challenging behaviour and foster carer training, the chapter now moves on to look at life in the foster home.

Workings of the foster home

Lipscombe *et al.* (2004) found that whilst parenting skills were important, these were based on two-way interactions, termed as 'bidirectionality' whereby the carers influenced the foster child and vice versa. Thus the very presence of the foster child will impact on the family and there will be some reciprocity of caring and some bidirectionality. The contribution that foster children make to a family is an important dynamic and caring should not be seen as a one way process. Here we can see the importance of considering relationality, interdependence and connection (Williams 2004).

Sinclair *et al.* (2003 a,b) examined the dynamics and workings of the family around discipline and the differences between the cultures of foster families and the fostered children. Each family has its own culture and routines. Much of this is taken for granted by the family and only becomes apparent when a newcomer joins. Sinclair *et al.* used a questionnaire survey to ask a number of open-ended questions about what was important to children about their foster care. The second stage, case study (2003a) revealed that the most important aspect of caring was responsive parenting, with carers being able to adapt to the child. The pre-conditions which seemed to allow this were the characteristics of child, the skills of the carer and the compatibility between them.

The level of strain experienced by carers can diminish their capacity to parent (Farmer 2002). Strained carers were more likely to dislike the young people placed with them and as Sinclair *et al.* (2003b) found, liking the child in placement was a significant factor that helped for a successful placement. Interestingly, in Farmer's study (2002) carers appeared to like less those young people who had already been scapegoated and singled out for rejection by their own birth family. Presumably the young people felt less lovable and this belief can perhaps be self-fulfilling in regard to their own behaviour and the reactions of others (Rushton 2003).

Farmer (2002) also found that many of the young people in placement had lower emotional/developmental age than their chronological years, and it was important for the carers to be able to provide activities, learning and play aimed at the children's developmental age. Farmer also found that single carers were receiving less support, partly because they had no means of child care cover, to attend support group meetings or training.

Foster families as systems

Erera considers diverse families (including foster families) from a strengths perspective acknowledging their capacities, competence and resilience: each family is analysed as a family structure in its own right, rather than a variant of the traditional family. Rather than being examined as a family structure in its own right, the foster family has often been defined primarily in the context of child welfare; from that perspective foster families are seen as nuclear families, hosting an additional member. The fact however is that this temporary hosting significantly alters the structure of the family. The central concern of welfare professionals is typically the child, not the host family. Foster families however are not necessarily temporary. If the family have a succession of foster children, this renders their status permanent, yet in the current climate with many nuclear families 'divorcing', they too could also be seen as temporary.

Stereotypes have often been used to depict foster carers; the positive stereotype views foster parents as 'saints' and 'martyrs', dedicated altruistic and idealised parent figures who are able to handle burdens that ordinary parents are not capable of bearing' (Erera 2002: 31). She purports that this positive stereotype has been an isolating factor for foster parents, because if they are so gifted and giving, then they do not need support and nurturing. It is expected that they will somehow resolve all of the child's problems, expending unusual effort in tutoring, mentoring and helping the child function in school and in interpersonal relations. They are not expected to voice their own needs or complain about children, like other parents do. Thus, foster parents feel that others will be disappointed if they behave like other parents. With the positive stereotype comes the opposite polarization which views foster carers as

motivated by financial gain or seeking to adopt by the back door.

The foster family is seen by Erera (2002: 142) as a unique form of 'bi-nuclear extended family'. The foster family often did not start off as a nuclear family. Foster families at least in their early stages constitute distinct sub-systems. As in any system when a new member joins all members need to make adjustments and the relationships within the family become more complex. As the child is not expected to be permanent, s/he may be regarded as an outsider. This may create instability and disequilibrium in the family especially in the early stages (Seaburg and Harrigan 1997). If the foster relationship is defined as temporary, then one could assume that loving and caring for the child are expected to be conditional. Interestingly, foster families are rarely given the legitimacy to grieve for the foster child when s/he leaves their care, partly because it is intended to be a short term relationship. If they do grieve, they may be seen as somewhat inappropriate. Yet, from the perspective of crisis and systems theory the departure of the child is a crisis for the family system (McFadden 1996).

Because of the losses foster children experience, they may experience confusion about who is in or who is out of their family. Foster children are known to exclude their birth parents from their descriptions of their family and they sometimes make no distinction between their foster siblings and their biological siblings (Gardner 1996). In this sense, there may be some family boundary ambiguity. The foster family needs to be flexible but not to the extent where there is a danger of entropy through losing its identity. Thus a fine balance is needed for a successful foster family between maintaining open family boundaries and family cohesion/integrity. Foster families are asked to fulfil an ill-defined role that lacks clearly defined norms. If foster parents act as if they are birth parents they are likely to experience conflict with the child. If they do not act in a parental capacity then they are implicitly acting without normative guidelines (Erera 2002).

It seems that the more foster carers view themselves as professionals who work in partnership with social workers, and who are trained and supported by social workers, the less they view themselves as parents (Erera 2002). The system and

structure of the foster family is one that more than any family is shaped by laws, policies and practice approaches that can often be in contention from differing ideological perspectives about parenting, family life and care (Nutt 2002, Nutt 2006). There is no blue-print to work from and it is a system that is thus potentially fraught with difficulties, as we shall explore further in the chapters that follow.

Conclusion

As can be seen from this first literature review chapter the measuring of distinct outcomes or the causes of success is something of a holy grail. There are numerous interconnecting yet countermanding factors that will impact upon the outcomes of a foster placement, not least the characteristics of those people involved, and it is difficult therefore to quantify and measure the effect of the component parts. As stated at the outset, I have concentrated largely on the knowledge base of UK foster care and have noted the many strengths in the current corpus of work and some gaps which my study will help address. Thus in later chapters I examine successful fostering connected to a range of pre-disposing factors to do with the attitudes and beliefs of carers, discipline, rules and family dynamic issues, all of which affect the outcome of a placement and its success. However we first explore in more depth key concepts that are needed to help analyse and theorise the day to day world of fostering and Chapter Two now introduces psychological and sociological approaches to understand the nature of care between families and children who join them as strangers in need of a home.

Chapter Two. Literature Review - Part Two

Understanding fostering: conceptual frameworks and theoretical approaches.

Introduction

This second literature review chapter focuses on three key conceptual fields that have informed the study design and which interconnect in their exploratory potential for grasping the fostering experience. The three fields offer contrasting and sometimes complementary approaches to childhood and families. First, the chapter addresses perspectives on attachment and stability located within a psychological framework and the basis for much social work. This is followed by examination of children's resilience which is based broadly within a psychological tradition. Thirdly, a sociological understanding of childhood and the family is outlined. The chapter seeks to demonstrate that whilst these are all different, they are not necessarily contradictory approaches. Indeed, the three conceptualisations have been linked together in this chapter and throughout by the study's underpinning theme, that of the ethic of care (Orme 2002), which is invoked and deployed to provide continuity and focus to the study.

Attachment and stability

When researching foster care it is vital to consider the impact of separation from the birth family upon the child. The importance of placement stability is often understood in relation to attachment theory that finds its early exposition in the work of Bowlby (1951). In short, this maintains that in order for infants to develop emotionally, they require a close and consistent relationship with an adult who provides protection, care and comfort (Berridge 2002). Others suggest that all attachment relationships in a child's network are significant in a child's emotional development (Howes 1999 cited in Aldgate and Jones 2006: 84). In addition there are a range of other influences, subsequent child and adult experiences which can modify a person's patterns of attachment (Aldgate and Jones 2006:93) which gives cause for optimism for the looked after child. Ideas about attachment play a key role in the way we understand the needs of looked after children. Clearly children cannot put down lasting attachments if they are constantly changing placements, in which friendship patterns, schooling and health care are also likely to be affected

(Harwin and Owen 2003).

Separation from attachment figures, however unsatisfactory, cuts down basic defences and thus engenders fear (Schofield 2002; Aldgate and Jones 2006). Young people with little or no attachment to an adult at the beginning of a placement are known to experience disruption (Farmer 2002). Foster children need to cope with their fantasies of a pre-placement ideal and with blaming themselves for their removal from their home of origin. Thus planning and preparation are vitally important for young people in making effective transitions and new placement relationships with carers (see Owen 1989). Clearly it would be helpful for foster carers to be aware of attachment theory in considering the behaviour of the young people placed with them. Laybourne *et al.* (2008) undertook a study of a foster care training programme, based on the application of attachment theory. The verbal feedback from the carers was very positive, but they acknowledged that a further, in-depth study needed to be undertaken.

Using attachment theory, Schofield *et al.* (2000:119) delineate four main categories of children:

Table 2:1 Categories of children

Open Book	Shows feelings, hungry for love, eager to please, restless, loud and impulsive.
Closed Book	Reluctant to share feelings, worries and fears. Difficult to get close to. Nice well behaved children.
On the Edge	Frightened, frightening, fragile, distrustful, helpless, sad, could be violent without remorse.
Rewarding Children	Pleasant to carers, make friends easily, causes no problems at school.

According to this typology some young people in the care system will experience more difficulty in placement, whereas other children might adapt more easily to a

new set of carers. This typology if simplistically applied could risk stereotyping young people. Given the likely attachment difficulties of the children who are being looked after, the skills of the foster carer are paramount. Studies have shown that carers providing the greatest stability are likely to:

- enjoy being with children
- be family-centred
- be flexible but firm
- be emotionally resilient
- communicate openly and honestly
- be amenable to outside support

(Fletcher 1993:31)

Other factors in parenting identified by Sinclair *et al.* (2003b) were the handling of attachment, accurate empathy, handling challenging behaviour and promoting self esteem. Attachment theory is not the only lens through which to view young people's development. Coping strategies and issues of resilience are also helpful frameworks that merit full consideration, as the chapter demonstrates below.

Resilience

Notions of resilience are prominent within the social work literature (Cairns 2005). There are many differing definitions of resilience, Gilligan (2001:5) for example, defines resilience as 'comprising a set of qualities that helps a person to withstand many of the negative effects of adversity'. Howe *et al.* (1999:30) define resilient people as those who when under stress and adversity are able to maintain psychological integrity and remain able to draw on a range of personal strengths to cope with those difficulties. Resilience can also be defined as 'normal development under difficult conditions' (Fonagy *et al.* 1994: 233). A resilient child has more positive outcomes than might be expected given the level of adversity threatening their development. This will be of particular importance for a looked after child. Resilience can also be seen in families some of whom can be seen to be more resilient than others (Hill *et al.* 2007; Dolan 2008). Resilience can be developed or diminished by a range of external and internal factors. There have been a number of

studies looking at resilience and looked after children, for example Flynn *et al.* (2004).

A resilience based approach focuses on maximising the likelihood of a better outcome for children by building a protective network around them. The concept of resilience increasingly offers an alternative framework for intervention based on the assessment of potential areas of strength within the child's whole system and building on those areas. This approach does not assume that the foster placement will meet all of the child's needs. Instead the emphasis is on building a web of support for the child. The resilience perspective thus relates closely to the ethic of care and connectedness and particularly to ideas of relationality that are more fully explored in the latter part of this chapter.

Daniel and Wassell (2002:10) have schematically developed this systemic approach as follows:

Biological, individual factors; dispositional and temperamental factors



Close family or substitute family relationships, with secure attachments



The wider community, for example, extra familial support.

The environment beyond the family provides significant opportunities for positive growth and development in children. Supportive people in the wider environment and supportive environments themselves have been associated with protection (Smith and Carlson 1997). The Framework for Assessment (DoH 2000b) is a tool employed by social workers in children's services to assess children and it is based heavily on a resilience and systems based model. Social workers thus assess a child's situation by considering the child, the family and their wider environment.

People are seen to acquire capacities for resilience in two ways, by their inherited genetic disposition and by the effects of subsequent life and social experience.

Positive home experiences, positive school experiences, positive leisure time experiences and their combination are also factors that play a part in enhancing resilience (Haggerty *et al.* 1996). Ungar (2008:231) delineates further the component parts involved in resilience, which he refers to as the 'seven tensions', based on a cross cultural study involving 1500 young people. Ungar (2008) developed these 'tensions', highlighting the importance of relationships and fitting in to the local community. He also highlights adherence to local and global practices, so that young people are culturally located. This latter point is of particular significance for foster children who will have moved geographically, and potentially living in a different class or culture to that of their family of origin.

Much other research to date has focused on risk as a single event (Fraser *et al.* 1999). Evidence suggests however that it is the cumulative effect of risk factors, rather than a single specific risk that tends to produce more consistently negative outcomes (Smith and Carlson 1997). Others have considered the 'tensions' involved in resilience in terms of both risk and protective factors, based on the idea that adaptive behaviour emerges from the interplay of combinations of factors predictive of negative development outcomes, and combinations of counteracting factors that reduce or ameliorate risk (Whittaker 2001).

Schofield and Beek observe (2005:12) 'hopefulness is in itself a resilience characteristic, perhaps as necessary for agencies, workers and carers as it is for looked after children they seek to help'. Thus personal qualities can help children respond adaptively to stressors such as neglect, criticism, family violence and other risks, as identified via clinical data by Wolin and Wolin (1993). They identified protective influences that were largely personal attributes (insight, independence, fulfilling relationships, initiative, creativity, humour and the capacity to distinguish good from bad). Protective factors are defined in part by the degree to which they moderate risk. Examples of other protective factors for foster children are the existence of close attachments and the presence of a supportive extended family member. Berridge and Cleaver (1987) for example found that sibling and peer support were important factors in promoting resilience and preventing placement breakdown. Happer *et al.* (2006) noted the importance of extended family members in the foster family for looked after children. In this study contact with foster carers'

extended family was seen as a sign of belonging, providing attachments across generations and access to experiences which were seen as enriching. The assessment of resilience is not straightforward and the vast majority of studies have been carried out retrospectively. Checklists have been devised that aim to measure levels of resilience (e.g. the International Resilience Project 1997). In contrast to adults, stressful life events can affect not only child and adolescent health and welfare but the developmental process itself (Smith and Carlson 1997).

Whether young people in foster care remain the same, decline or improve during adolescence is affected by a wide variety of factors, one of which is the potential protective factor of the foster home. Oosterman *et al.* (2007) provide a meta-analysis of the factors impacting on resilience which indicated that foster children in highly motivated, involved and nurturing foster families experienced less placement breakdown. They also found the factors that also yielded moderate to strong effect sizes were family resources and support from relatives or support from caseworkers. These factors may exert their protective effects through the quality of caregiving, which may be the more proximal process that protects against risks for breakdown. With the exception of Flynn *et al.* (2004) research generally has been unable to isolate and quantify individual factors of protection and risk, and it is therefore virtually impossible to attribute a quantifiable or numerical factor when evaluating the individual components .

Interventions to promote resilience

The research on protective factors suggests that there are four general categories of interventions to promote resilience and coping: enhancing self-esteem, improving academic achievement, promoting social skills and strengthening families and social supports (Fraser *et al.* 1999). Sources of support for children and adolescents should therefore include: esteem, support, or indications that one is a person of value; informal support such as problem solving advice; instrumental support, that is providing specific resources or services that assist in problem solving; companionship support and the opportunity to engage in activities with others (Smith and Carlson 1997:86). Gilligan's (2007) meta-analysis of 26 mainly US studies found that taking part in extra curricular and out of school activities

improved academic performance. Children in foster care will have experienced and may still be experiencing particular stresses at what is considered to be a very vulnerable period in the lives of all young people, and it will be important to focus on a range of factors that will help to develop protective strategies in order to hopefully change or deviate from any negative trajectory of development.

Measuring resilience

Flynn *et al.* (2004) undertook research intended to derive a new method for identifying resilience among young people in care in Canada. The study looked at 340 young people in foster care between the ages of 10-15 years and 132 children age 5-9 years. The study used a normative comparison from the general population. Resilience was defined on each outcome variable as average or above average to the general population. They found that the percentage experiencing resilience was relatively high on outcomes of health, self esteem and pro-social behaviour. There were moderate outcomes for relationships with friends, anxiety and emotional distress. They found particularly low outcomes with regard to academic performance. This is hardly surprising given that many young people move to numerous foster homes necessitating numerous changes of school (Jackson and Martin 1998; Jackson and Sachdev 2001). Jackson and Martin (1998) found that the protective factors most strongly associated with educational success were:

- stability and continuity
- learning to read fluently at an early age
- having a parent/carer who valued education
- having friends outside care who did well at school
- developing out of school hobbies
- attending school regularly

Flynn *et al.* (2004) found that young people needed a close relationship with the adult care giver, an authoritative style of parenting that was characterised by warmth, monitoring and expectations, a family climate where there was little conflict between parents, an organised home environment, parental post secondary education, parental involvement in the child's education, favourable socio-economic

status and parents who possess many of the protective qualities listed for the child. This is a long list of requirements and qualities, which may be difficult for foster carers to achieve. On a community level they found that protection was afforded by effective schools, pro-social organisations (e.g. school clubs, church groups), neighbourhoods possessing high 'collective efficacy' (high levels of social cohesion and social control) and a high level of public safety with good health and social services. We can see the need therefore for a multi-disciplinary approach to foster care to increase the likelihood of a more positive impact for the child. One drawback with this approach which was based on individual outcome variables, was that it offered a partial view of the child, rather than the child being judged holistically as either resilient or otherwise. This was a quantitative approach which was not able to take into account the socio-cultural context of each child. A qualitative approach however may be better suited to address both the context and to avoid the often arbitrariness in the selection of outcome variables (Ungar 2003).

Reducing the negative factors in a child's life may be helpful as a way of giving the potential effect of the positive factors a chance; a bit like a weighing scale (Haggerty *et al.* 1996). Foster carers and their children also need to be resilient to cope with looking after young people who are vulnerable, at risk and may often demonstrate challenging behaviour. When recruiting foster carers, social workers are often assessing many facets of the prospective carer including their abilities to deal with that challenge and their resilience to withstand the inherent stresses. Resilience has not generally been developed as a concept as applied to adults, except when looking at adults who withstood exceptional hardships as children. Furman (1998) for example writes about adults who moved from adversity to resilience and succeeded as adults despite extreme hardship in their formative years. Happer *et al.* (2006) also looked at people between the age of sixteen and forty six who had achieved success.

Stress buffering/moderating risk

Research studies concerned with stress buffering have generally emerged from the adult literature on stress and coping. Stress buffering and resilience would seem to be two very similar concepts. As yet, there is very little research to evaluate

proactive attempts to promote resilience. There has been some research into resilient families (Lietz 2006; Hill *et al.* 2007; Dolan 2008), but there has been less research into how to promote resilience in foster carers. Lietz (2006) for example, undertook a study of 182 'at risk' families and using a resilience scale adapted from Wolin and Wolin (1993), found that although 'focusing on reducing risk is important, strength building is another important way in which we can intervene with high risk families' (2006:580). When working with foster carers a similar ecological approach would seem to make the most sense, looking at the level of support and protective factors available to the carers. The thesis attempts to do this in the first findings chapter, Chapter Four, 'An Introduction to the Family'. Thus the availability of advice, assistance, remuneration and the existence of self-help/support groups may prove to function as vital moderators of stress.

Oosterman *et al.*'s (2007) meta-analysis of resilience suggests that future research might focus more on caregiving itself, because the quality of caregiving might ultimately explain the effects of some of the more distal factors noted in their review (such as motivation and resources of foster parents) as well as some of the effects of risk factors that were relatively modest. It may thus depend on the quality of caregiving whether a particular risk ultimately results in placement breakdown.

Research on risk and resilience has been guided by a concern with stress moderating processes, a dynamic through which harmful effects of stress are offset by various coping resources. Although this remains a powerful investigatory model, alternative views of process have been advanced, notably the idea of stress mediation whereby stressors may also function to erode environmental and personal coping resources.

What are needed now are many different kinds of research designs, including naturalistic narrative studies that describe the interconnection of people, events and time (Fraser *et al.* 1999:138). The next section is a consideration of the ethic of care, developing the importance of the interconnectedness and interdependence of people's lives, which has often gone unrecognized in social work research and within foster care.

Ethic of care

Some of the protective factors referred to earlier in this chapter that promote resilience were the experience of fulfilling relationships and close attachments, indications that one is a person of value; this often includes the presence of a supportive extended family member. Thus we can see that the importance of caring and being connected to others is part of this resilience framework (see Williams 2004). The quality of those relationships within the supportive network is of great significance. When looked at in these terms plans for young people to 'leave care' and become somehow autonomous are misleading and probably undesirable, as they may lose these valued connections; as Tronto outlines 'we need to re-think our conceptions of human nature to shift from the dilemma of autonomy or dependency to a more sophisticated sense of human interdependence' (Tronto 1994:101).

This suggests that looked after young people should not necessarily 'leave care' or their families, and become completely autonomous, but rather they should remain connected, being interdependent and relying on a matrix of continuing support. Happer *et al.* (2006) noted in their study that some participants continued to live with, or remain strongly connected to: their foster families long after they had stopped being looked after, and that some foster carers continued to be committed to children after they had grown up. Thus the care is not necessarily time-limited and contractual but more far-reaching and reciprocal.

Those who care are often undervalued. Currently our normative political theory tends to degrade others who do the caring work in our society as they are seen to be 'non-productive'. Foster care can be seen in this light as somehow non-productive caring work. Tronto (1994) asserts that care is both a practice and a disposition, and that care involves some form of on-going connection (1994:105); it cannot be solely a practice. Thus Tronto posits that caring cannot happen without an emotional content and helpfully outlines four dimensions of caring, which she terms 'phases', although they are not necessarily sequential (1994: 108-109):

Table 2.2 Four phases of caring

Phase One	Caring about - acknowledging need
Phase Two	Taking care of - assuming some responsibility for the need
Phase Three	Care giving - involves meeting needs, some physical work and direct contact
Phase Four	Care receiving - the object of care will respond to the care received

From Tronto's schema above we can see that in phase four, care is responded to and either appreciated or reciprocated. Tronto suggests that if we analyse our lives we notice that care consumes much of our time, nevertheless we do not pay systematic attention to this. She sees the fragmenting of care as politically useful, identifying the connection between the fragmentation of care and the distribution of power, which 'is better explained through a complex series of ideas about individualisation, autonomy and self-made man' (1994:111). Tronto further asserts that self-made people find it difficult to admit the degree to which the care that they have received has made this possible, as it would undermine the unequal distribution of resources and privilege. Care however is generally underplayed and is associated with the private, the emotional and the needy. Both care and the need for care are thus cast to some extent as weakness.

Care can be seen to be closely connected to women (Orme 2002), and is thereby 'supposed' to be socially constituted within the household, so that it generally becomes the work of the least well off. Feminist theorists have long since made the connection between gender and caring, most notably Finch and Groves (1983) in their classic text *'A Labour of Love'*. Some have argued that men operate more within an ethic of justice, which stresses rights and rules (Held 2006). However as Held points out neither framework can be absorbed by the other, but an adequate moral framework should pay attention to both (2006:15).

Those who are wealthy generally pass on the work of caring to others. Gender, race and class are related to caring in terms of those who are often to be found in the caring roles, but as Parton observes 'care is central to everyone; it is not a parochial

concern of women alone' (Parton 2003 :11). It is important when undertaking a study of foster 'care' to engage with the feminist ethic of care, recognising that care work is often overlooked or devalued because it is associated with privacy and emotion:

Society treats accomplishment, rationality and autonomy as worthy qualities, care is devalued in so far as it embodies their opposites. (Tronto 2004:117)

Thus it might seem that as a way to recognise foster care and its worth we professionalise the foster care role; this has been the thrust in fostering for some time (Testa and Rolock 1999). Waerness (1996) however advocates that enabling good care requires delimiting the power of scientific rationality in the forms of professionalism and bureaucratic governance. The drive to professionalise foster care likewise is not always welcomed and can be seen as an attempt to regulate foster carers and their caring work (Wilson and Evetts 2006). Increasing regulation and legislative changes (DoH 1991,1998, 2000, 2002, 2004) have laid down with increasing precision the requirements for a foster care service. It has shifted 'from an ordinary activity to one which requires regulation and by extension training' (Wilson and Evetts 2006: 40). Some may argue that 'care is no longer associated with altruism or love; it is regulated' (Orme 2002:802). Parton too agrees with this perspective:

The model of professional practice treats rigorous professional practice as an exercise in technical rationality; that is, an application of research-based knowledge to the solution of problems of instrumental choice.... There has been an attempt to rationalise and scientise increasing areas of social work activity with the ever more complex procedures and systems of audit and a narrow emphasis on 'evidence based practice', whereby it is assumed that the world can be subjected to prediction and calculative control.
(Parton 2003:2)

According to Parton (2003) the appeal of professionalism for managers is that it allows for bureaucratic, hierarchical and managerial controls. It also allows for

achievement targets and performance indicators, thereby limiting the amount of discretion. This challenges a service or care ethic as the dominant rationale for accountability. It may be therefore that such a move would devalue care even further.

Parton (2003) argues that subjects can only be understood in context, he recognises the importance of interdependence and the way the political and social cultures in which we live are becoming increasingly relational (2003:8). He concludes that technical knowledge still has a place but needs to be alongside other knowledges and interactions which reveal ourselves as relational beings. This mirrors to some extent Ungar's work (2008) on resilience, that the relational self is nurtured and strengthened by positive support and interaction with others. Featherstone (2009) in her analysis of the literature on the ethic of care asks how people develop and maintain the capacity to care and what models we need to understand the dynamic and on-going interplay between the social and the psychological (2009:9). The ethic of care assumes relationships which are bound by mutual interdependence, and its practice involves the values of attentiveness, responsiveness, competence and responsibility, negotiation and mutual recognition (Williams 1996:678). Interestingly, Williams (2004) noted that what children valued in their relationships with adults was an ethical component of care relating to 'fairness, care, respect and trust' (2004:51). Care, respect and trust are relational and can only be achieved through interaction and relationships. Thus moral identity, it could be argued, is developed through interactive patterns of behaviour, perceptions and interpretations. Orme (2002), too, sees social work as a moral activity with caregivers needing to be able to demonstrate emotional commitment. These aspects of attachment, resilience and their connectedness with an ethic of care, require a more contextual elaboration in the notion of the child and childhood itself if we are to grasp foster care beyond the individual encounter or case. Hence we turn to sociology to link to a broader set of principles about children's relationality in the family and society.

Sociology of childhood

It is important to view research into foster care in relation to developments in the sociology of childhood as an important context within which to frame research with

all children. Much of the traditional focus within sociology has been around power relations in society and in questioning the taken for granted ways in which roles and relationships within society are understood (Kellett and Ding 2004). It can be argued that children living in foster homes have less power, different roles and relationships to other children. Traditionally children were seen as in a process of becoming; that process being maturation into adulthood. However James and James (2004:13) assert that:

Childhood cannot be regarded as an unproblematic descriptor of a natural biological phase. Rather the idea of childhood must be seen as a particular cultural phrasing of the early part of the life course, historically and politically contingent and subject to change.

Since the mid 1980s a number of academic observers have identified factors that led them to say modern childhood is a matter of new and great concern (Mayall 2002). One argument is that the boundaries between childhood and adulthood are drawn ever more distinctly and thus the gulf between the two grows. The beginning of compulsory schooling in Europe led to the emergence of childhood as a separate state (Walkerdine 2004:96). The search for the essential nature of children became an attempt to understand how to better produce rational, stable adults through education, so that they could in time take part as full citizens in democracy. This perceived generational boundary restricts children to subordinate and protected social roles. Yet the divide has also served to demonise some youth and view them as irrational and unstable, as evidenced in the increasing public perception of the threat posed by children and young people to society as a whole (James and Jenks 1996). Some argue that this notion of dependency and 'becoming' needs revision and that we should accept children as being less reliant than before on adults, and able to take more responsibility for their own affairs (Mayall 2002).

Prout (2005) similarly notes that towards the end of the twentieth century there developed a sense that the known social order was fragmenting, due to rapid economic and social and technological change (often termed late modernity); it arose from the de-traditionalisation and modernist destabilisation of institutions.

Prout argues that childhood was affected by this de-stabilisation, as the distinction between adults and children, once clear in modernity as (outlined above) is now blurring. New ways of speaking, writing and imaging children are providing new ways of seeing them, and children are now seen as different from the innocent and dependent creatures that typified much of the early and mid twentieth century (Prout 2005:1). New popular and social science representations both construct children as more active, knowledgeable and socially participative than earlier discourses allow. They are as a result potentially even more difficult to manage, more troublesome and troubling (Prout 2000). James and Prout (1997) introduced the notion of 'pre-sociological' and 'sociological' models of childhood, with children as social actors with an active role in the construction and determination of their own social lives.

The acceptance of the status of children as social actors has led to a change in attitudes to children's competence (Kellett and Ding 2004) and empowering their participatory rights, including child research (Kehily 2004). Part of this shift was because childhood was beginning to be seen as diverse. As Wyness (2004:23) notes, 'acknowledgement has to be made of the diversity of children's childhoods and of children's own part in shaping their childhood experiences'. Thus there is the concept of the 'new' child who is self-regulating, active and socially participative, having more of a life of his/her own. Children have also come to have specific rights as outlined in the UN Convention of the Rights of the Child (1989); this places emphasis on the duties of adults towards children. Children's participation has also become a goal of this convention, alongside protection and the provision of services for children, rendering them a shift in status. Some however see an anomaly here, as the response to vulnerability and protection is enshrined in increased rights (Shanahan 2007). As Prout (2005:34) notes:

The boundary between childhood and adulthood which modernity erected and kept in place for a substantial period is beginning to blur, introducing all kinds of ambiguities and uncertainties.

Thus we can see numerous shifts in our conceptualisation of childhood over the last century, but ultimately a movement towards seeing children more as active citizens,

albeit without the political rights of a citizen. The chapter will now move on to look at the notion of adolescence as an opaque realm of transition between the divides of childhood and adulthood. Many of the young people in this study fall within this category.

Adolescence

Much research into the lives and behaviour of children and adolescents in the twentieth century has been undertaken within the parameters of psychology (Greig and Taylor 1999; Greig, Taylor and MacKay 2007). Traditional developmental psychologists have viewed adolescence as a scheduled passage to adulthood which is rooted in biological factors and characterised by tasks of individual development (Brannen *et al.* 1994), whilst sociology has been more concerned with the broader structural context of youth and young people. Adolescence is supposedly characterised by a period of emotional turmoil and identity formation (Erikson 1968). Adolescence has been seen as a period marked by conflict with parents and adults; this has been seen as a functional requisite of disengagement from parents and a transition into adulthood. Paradoxically the growth of a psychology of adolescence would seem to be accompanied by a decline in the overall well being of adolescents (Compas *et al.* 1995). Morbidity rates for most other age groups have declined in recent decades, whilst adolescent morbidity has increased (Compas *et al.* 1995). Young people generally are experiencing more difficulty in coping with the demands of the modern world with pressures upon education, appearance and social acceptability. Early adolescence has been characterised as a potentially chronic and stressful experience, owing to the largely uncontrollable changes in every aspect of individual development (Smith and Carlson 1997). The notion of adolescence itself has developed because of being seen as an extended period of dependence, through education and lack of employment opportunities for young people. Traditionally, growing up has been seen as a movement from disorder to order, however Lee posits that 'growing up is as diverse in its major and minor currents, its eddies and whirlpools as is the range of human existence' (Lee 2001:142). Sociology up until the 1970s focused on youth as a social category and has particularly focused on social control problems, 'they (youth) were employed merely to illustrate the operation of larger social processes such as deviance' (Shanahan 2007:408).

Children are often classified as non-compliant, defiant and difficult (Greishaber 2004) and it is to problematising diverse childhoods that we now move.

Problematising diverse childhoods

‘The very concept of childhood has become problematic’ (James and Prout 1997b:1). In contemporary studies of childhood, sociologists have been concerned to problematise the idea of the child rather than treat it as a pre-stated being with a relatively determined trajectory (Jenks 2004). Gillies *et al.* note that young people have long been positioned as problems when they fail to follow this pre-determined course (2001). Additionally, Western societies have expressed a growing consciousness over child abuse, especially sexual abuse which has challenged traditional beliefs about childhood. The media coverage has made public the private lives of those children who have no access to the mythical walled garden of a happy, safe protected childhood (Walkerdine 2004). Looked after children are amongst those whose life has not been safe or protected, and have been subject to public scrutiny. Thus the ideal and the real are often far apart with the ideal having to be re-assessed in the public domain. It has become clear for a range of reasons that a new paradigm for the study of childhood has emerged in which childhood is a social construction; an interpretive frame for the understanding of the early years of human life.

In the newest sociology of childhoods there is a recognition of diverse childhoods, with local cultures and social divisions such as class, gender and ethnicity affecting how children experience everyday life. Childhood in Western society is defined in terms of economic dependency on adults, whereas this is not the case for the majority of the world’s children. Across the world, child labour is in fact the norm, for example, children working for Nike in the Third World paradoxically contribute to the accumulation of wealth in the West that allows children here not to work (Walkerdine 2004). Thus we can see that childhood and the construction of the notion of childhood varies widely across countries and cultures. Gender too impacts on our notions of childhood, as childhood is not androgynous (Shanahan 2007) and can also be seen as problematic. Walkerdine (2004) would argue that the girl is never unproblematically a girl because of the potential for erotic associations and

notes that 'it is her production as an object of an erotic gaze that renders her always potentially a woman' (Walkerdine 2004:104).

Girls then have to grapple with wanting to look attractive whilst not making themselves overtly sexual, as this is formally frowned upon, whilst being implicitly encouraged. Thus we can note some examples of the many contradictions inherent in childhood and in the socialisation of children.

Sociology of the family

Children have been oddly absent from studies seeking primarily to understand the dynamics of the family (Shanahan 2007). The term 'family' is itself a contested term in sociological discourse. Williams (2004) prefers to refer to 'families' as a way of acknowledging the diversity of current living arrangements and how they work. Morgan (1996) suggests the term 'family practices', as he sees families as a series of changing interactions rather than a static concept. Smart (2007:3) goes further, arguing for the conceptual field of 'personal life' rather than a sociology of the family or sociology of kinship, 'in order to incorporate the kinds of emotional and relational dimensions that are meaningful in everyday life'. Smart (2007:7) argues that the term family does not incorporate the full range of meaningful connections as:

We know that people relate meaningfully and significantly to one another across distances, in different places and also when there is no pre-given or genetic or even legal bond.

The sociological question therefore is very much who falls within the family boundary and who does not. Cheal (2002) argues that the inclusion of some people in family events and the exclusion of others demonstrates the concept of 'family boundaries' and barriers. This is of particular interest to research in foster care families, where family boundaries are regularly breached by outsiders. We are likely to become more keenly aware of the significance of family boundaries when an outsider enters the frame. Greater family complexity and broader definitions of what a family is, have helped to focus more attention on what families actually do (Silva

and Smart 1997:7). In a late modern context of fluid and changing definitions of families, a basic core remains which refers to the sharing of resources, caring, responsibilities and obligations (Cheal 2002). What a family is, appears to be intrinsically related to what it does. Thus functions have become more important than family structures. Family functions are activities that fulfil certain of the members' needs. Functional definitions of families define a family as a group of people who assume responsibility for some of the following:

- physical maintenance and care of group members
- addition of new members through procreation/adoption
- socialisation of children
- social control over members
- production, distribution and consumption of goods and services
- maintenance of motivation and morale through love

(Cheal 2002: 53)

In the foster family there are continuing adjustments to the family through the serial presence of different foster children, and some have argued that this frequent addition of foster children makes it a unique feature of this type of family (Erera 2002). The production of fostering services may become indistinct and diffuse given that care and nurturing of children is part of the means of production. Of course love is not necessarily inevitable or appropriate within the fostering relationship. The difficulty of a functional definition of family is that it can become a dysfunctional relationship. Standard sociological theory has often emphasised the positive sides of families rather than the dysfunctional aspects of violence and abuse, as experienced by many foster children. Traditional functionalism is an approach which stresses the adaptive aspect of family life which responds creatively to difficulties and unmet needs (Cheal 2002). The foster child according to a functionalist view therefore enters the family unit and places stressors on the unit, which in turn has to adapt. However in recognition of the fact that families can become dysfunctional, the focus in sociology has tended to move away from pure functions towards the study of interactions and transactions, often known as 'family practices' (Morgan 1996).

Family practices comprise the details of what a family does and how it interacts. This is very much the focus of the thesis.

One of the main things families do is talk and by communicating the meanings that they give to their experiences, family members construct a shared knowledge. The shared knowledge of each others' needs and desires is the basis for practical exchanges of goods and services in transactions within and between families. Families are connected to other groups because they depend on them for their survival; they cannot meet all of their own needs unaided and must look to other groups for support and resources. Contemporary social life is highly individualised but we all need help and support, as recognised in the earlier reference to the ethic of care. Almost all of us have a strong need for intimate human contact (Cheal 2002). Most of us have a personal network that is made up of a mixture of family members, friends and acquaintances (Smart 2007). Nevertheless, family members often lie at or near the centre of our personal networks and in some families there will be a clear ethos that 'family comes first' (see Finch 1989). Thus we can see within definitions of family there is a connectedness and a moral dimension. Having considered family boundaries and connections, it is to a contrasting and opposing individualisation debate that we move next.

Individualisation

The general diagnosis is that people's lives are becoming more mobile, more porous and of course more fragile. In the place of the pre-given and often compulsory types of relationship is appearing 'until the next thing' principle a kind of refusal of lifelong plans, permanent ties, immutable identities....instead of fixed forms, more individual choices, more beginnings and more farewells. (Beck-Gernsheim 2002 :41)

The theme of individualisation is becoming pervasive in an attempt to capture what is unique about close personal relationships in post-industrial societies, and has become the core metaphor through which sociological analysis of the family is now

undertaken. Kinship has become an affinity through the transformative workings of choice (Smart and Shipman 2004).

Bauman (2003) too sees the availability of choice as the undoing of fixed relationships; but also the new task master of late modernity. Choice according to Bauman is not to be confused with something positive, rather it is the undoing of commitment. Children who are fostered may be the by-product of their parents' choices and fluid relationships, but the carers that take them in also have free choice and choose to offer a commitment of care and respect to these young people. Bauman (2003, 2007) predicts a situation where there is almost frenetic emotional mobility and only fleeting serial relationships:

Interhuman bonds, once woven into a security net worthy of a large and continuous investment of time and effort, and worth the sacrifice of immediate individual interests, become increasingly frail and admitted to be temporary. (Bauman 2007: 2)

The individualisation thesis starts from the perspective of people meeting their own needs and presents a very monochrome picture (Smart and Shipman 2004:494). It excludes an understanding of different forms of relationships and intimacies that are to be found in diverse and complex societies. It has also been criticised for not being rooted in empirical evidence (Smart 2007). Nonetheless, Smart notes that in the theoretical leaps of the 'grand theorists' we are encouraged to re-think and challenge our fixed notions of families and relationships. It is this diversity and re-formulation of family structures (Erera 2002; Williams 2004; Smart 2007) that have very much come to the fore in this thesis. Individualisation theorists marginalise and minimise differences. However, as Smart and Shipman (2004:507) note:

By being attentive to complexity, content and culture we can perhaps resist some of the more sweeping generalities associated with contemporary theorists about individualisation and family life .

Within modernisation theory (Smart 2007), the focus shifts towards individuals in the family and away from collectivity. Individualisation suggests that family members become their own persons, while the child is no longer the servant of the family but an individual who is serviced by the family. In contemporary Western society, children's contribution to a family is economically minimal but emotionally priceless (Kehily 2004). Here we see the reciprocity that children offer. Children's value in the West lies in their ability to give meaning and fulfilment to their parents' lives.

Children today are trained for independence, with privacy and self expression being encouraged (Jensen and McKee 2003). This contrasts with the ethic of care debate which sees relationships offering continued interdependence, reciprocity and a shared moral identity within personal relationships. We might argue that fostering is an interdependent, collective activity; indeed it could be termed a 'family business'. The negative image of child labour have made the notion of children being involved in work an alien one, however children have long engaged simultaneously in production, consumption and distribution (Zelizer 2002). The birth children of foster carers are explicitly involved in fostering and help to produce the service that lies behind, the often unproblematised term, 'placement'.

Feminism has long noted the way in which women make an unequal contribution to the public and private spheres. By extension there are problems within the individualisation debate with regard to the unequal gender distribution of women's resources, labour and responsibility, particularly with their role in bringing about the individualisation and autonomy of children and young people. According to Walkerdine (1997) mothers as regulators of their children create an illusion in the imaginations of their children that children are free, self-determining individuals, although many mothers have often not yet achieved that status. This paradox is more acute for working class women, whose marginal resources render their performance of the illusion less convincingly. Twigg and Swan (2007) in their meta-analysis of fostering came to similar findings, in that female birth children often recognized the limitations of their mother's employment status. Having

outlined the idea of individualisation, I will now move on to contrasting themes of care and mothering.

Child care and care giving

The care that family members provide for one another is one of the most important activities carried out within families. Care giving consists of a whole set of tasks that involve one person helping another person to meet their needs for daily living. Most care is done by someone in the household in the form of *intrahousehold* transactions. People give care unequally depending on the distribution of tasks allotted within the family. Men generally are thought to spend more time on paid work. General attitudes to housework are developed early in life and they are later reinforced by adult experiences. Employers expect men and women to devote themselves to their work and because of the stereotypes about caring, men expect that women will take the primary responsibility for housework when difficult choices have to be made (Cheal 2002). Young and Wilmott (1973) predicted that there would be a trend towards more symmetrical families with less role segregation. However, women who today work outside the home are also expected to be the main responsible care givers and are seen essentially as still responsible for the housework. The biggest factor in 'time stress' for many mothers is the responsibility for children, yet there are significant variations in the time stress between different types of families. Thus one could hypothesise that making a decision to devote oneself solely to being a care giver to one's own children and then to foster other children, might for some be an attempt to alleviate this type of divided activity and related stress.

Care, mothering and foster families

For many carers, many of whom are female, a decision has been made to undertake foster care work, as well as caring for their own children. This can lead to a broadening and a blurring of the caring role of the mother. Mothering is a gendered identity; it is a social identity which incorporates far more than bearing and raising a child. Mothering is a benign relationship of nurturing and caring for a child, so that it will flourish and grow. Mothers who are foster carers provide care for children who are not their own and could be said to have evolved a form of *commodification*

of caring (Compton 1997). Foster carers offer what would normally be ideologically constructed as their private lives, their homes and their intimates, as a public service for the care of children who are not usually their blood relations (Nutt 2006). Children are placed in foster families to benefit from both a 'home' and a 'family life'. Fostering is thus considered an extension of the mothering role, requiring those 'natural', female virtues; a domestic vocation. Thus there is some incongruity between the role of foster carer based on natural motherhood and the notion of the professionalised carer. Although there are male carers, in most foster families caring is a female led practice (Nutt 2006). Domestic caring would appear to be primarily defined by private ways of being, even when we might expect other orientations to be apparent. Mothering involves the use of emotion; it includes intimacy in the detail of caring. Family life is ideologically constructed as the primary site for emotion; this emotional investment can cause difficulties and pain for carers when placements end and children move on, as Nutt (2006:22) observes:

Foster care can be seen to be a contradictory activity in which separation of motherhood from mothering and being motherly inevitably gives rise to emotional and practical problems.

Colton's (1988) comparative study of foster care and residential care found that residential institutions cared '*for*' the child but families cared '*about*' them. Feminist theorists have noted that the essence of care giving is about the attentiveness to detail. Service providers however are typically concerned more with a general set of rules and standards (Smith *et al.* 2004). Here again we see a recurring tension between the emotional constituents of home, privacy and care and attempts to professionalise carers and set rules and standards about family life in fostering. We now turn to aspects of altruism as further exploration of what defines care and why people foster in the first place, giving a brief overview of the 'gift relationship', which combines notions of relationship, care and giving to strangers.

The gift relationship

The 'gift relationship' has often been used to explain foster care as an altruistic act, for which there was no material reward, other than expenses (Nutt 2006). The

notion of the gift relationship espoused by Titmuss (1970) was deployed to demonstrate the pivotal role of altruism in human affairs. However the moral value of altruism would seem to fit poorly with the advanced marketised economies such as the UK. The central thesis of Titmuss was that altruism is both morally sound and economically efficient. Oakley and Ashton (1997: 7) argue likewise and assert that:

a competitive, materialist, acquisitive society based on hierarchies of power and privilege ignores at its peril the life-giving impulse towards altruism, which is needed for welfare in the most fundamental sense.

Titmuss felt that profit contaminated essentially altruistic services, and he argued against paying for altruistic deeds. Titmuss stimulated other scholars to explore themes of giving and ownership and the philosophical and religious origins of the altruistic perspective. Here again we see the recurring thread of the ethic of care and moral positioning. In a world of fast changing and disappearing values, the principle of altruistic giving and a commitment to a service based on reciprocity and social solidarity are for some an absolute necessity (Oakley and Ashton 1997). Self evidently love and payment in foster care could be seen to be contradictory themes (Nutt 1998, 2006). A realistic fee however for round the clock 24 hour care would probably be deemed unaffordable and it may be that carers would prefer to be altruistic volunteers than underpaid and undervalued workers.

Conclusion

This chapter has drawn upon a number of perspectives on childhood and families. It has sought to challenge 'the ways psychology and sociology sometimes serve to partition and objectify the child as a reflex of development, processes, socialisation and acculturation' (Woodhead 2004:x). Instead, there has been an attempt to recognise the multiple ways that both childhood and fostering are constructed in relation to gender, time, place and care.

The research base and statistical evidence explored in the first literature chapter allowed the families and young people in this study to be situated and contextualised within a broad framework. The key concepts from this second

literature chapter that have informed this study are multiple. For example, the notion of Morgan's (1996) *family practices*, that is, focusing on 'what families do' offered me a wider approach to thinking about families and led to specific explorations with foster family members of what they actually do, and this is incorporated in Chapter Five, '*Family practices and parenting style*'. Ungar's work (2008) on resilience stressed the need for a more qualitative approach, to better address the context in which resilience occurs and to avoid the sometimes arbitrary selection of resilience outcome variables. Hence a qualitative approach has been deployed in my study with regard to grasping resilience within the way care is constructed by participants in the family. The review of the resilience literature and the conclusion by Oosterman *et al.* (2007) and others that resilience research might focus more on care giving has also informed the arguments and analysis in Chapter Five.

The notion of the gift relationship (Titmuss 1970) has also been drawn upon and considered with regard to foster care in Chapter Six, '*The Gift Relationship: the long and the short of it*', as a way to interpret some of the anomalies within fostering, particularly the aspect of altruism within short term contractual relationships. Mothering and care has also been considered and is included in Chapter Six.

The emphasis in this study has been on recognising children as effective social actors. The different perspectives outlined here have been recognised insofar as they help give a voice to children and regard children as worthy of study in their own right. Children's participation and children's voice (Woodhead 2003) is central to the sociology of childhood and has informed and guided the approach to the young people in this study. Lastly, the ethic of care, interconnectedness and reciprocity has featured within many of the discussions and has provided a conceptual thread of continuity to the focus of the thesis.

It is to the methods and methodology that we now turn in Chapter Three and which demonstrates in more detail how some of the key conceptual understandings outlined so far have been enacted and synthesised in the study design.

Chapter Three. Research Methodology and methods

Introduction

The aim of this research is to focus on the experiences and interior world of the foster family, to take a 'worm's eye view' (Hakim 1987) in order to understand what made for a successful fostering experience from the views of carers and children. There have been many studies of key participants in foster care services via questionnaires, for example, (Beck 2005; Timms and Thoburn 2006) and via interviews (Thomas 2000; Aldgate and McIntosh 2006; Happer *et al.* 2006). This research aims to offer an in-depth analysis of the workings and dynamics of the foster family itself. In doing so, the aim is to identify the characteristics, aspects of family culture and attributes of foster families that contribute to a successful foster placement. This study has included the active involvement of the children in foster placements, and birth children too. In order to investigate these areas I have employed a mix of qualitative research methods in order to access the rich inner realm of family life that has rarely been captured in UK foster care research.

The perceived reliability of a study and the subsequent findings will depend on the transparency of the methodological approach. In order to present this in a coherent way I have structured this chapter by first summarizing the research design, thereafter the origins of the study are outlined briefly. The chapter then follows the model suggested by Crotty (2003:5) whereby I describe and justify the application and interrelationships of epistemology, theoretical perspectives, methodology and research methods. The chapter then addresses the impact of my own social work background on the research and concludes with the strengths and weaknesses of the research design.

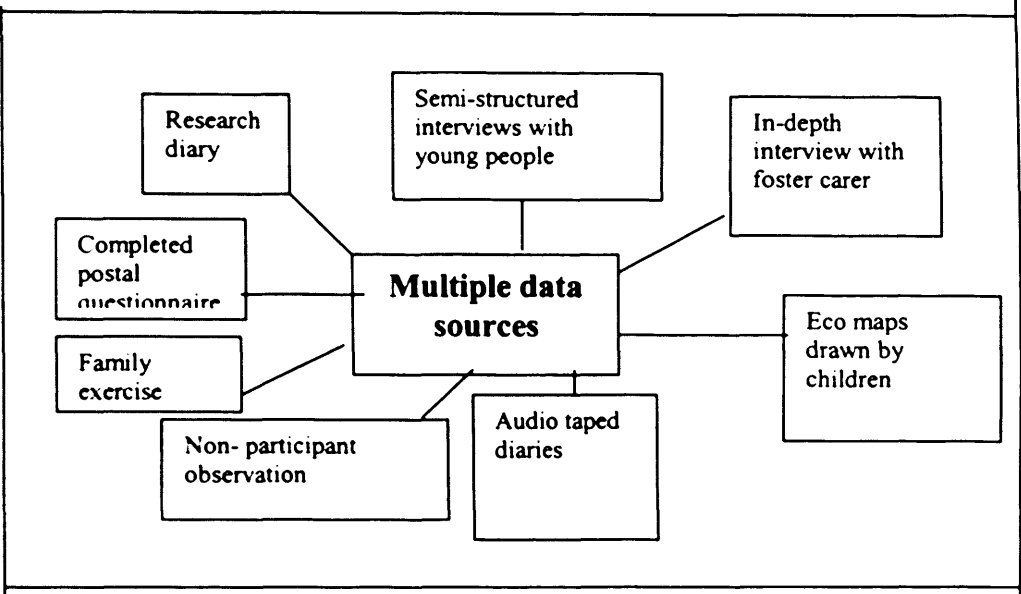
Summary of research design

This research adopts a case study approach (Yin 1994) in regard to foster families supported by three different agency systems. Agency One comprises foster carers linked to a local authority fostering and adoption team; Agency Two includes families supported by a local independent fostering organisation and Agency Three includes local authority carers who are receiving additional support from an

independent project. These three sources have been chosen as each offers differing types of support to foster carers, reflecting to some extent the diverse nature of the foster care task and also the varied systems of organization in a mixed welfare market. Across the three agencies the same research methods have been deployed with families and children as follows:

- (i) A survey of carers was carried out by postal questionnaire prior to interviews to gain demographic data in order to construct a profile of the families. Within the questionnaire a Likert scale was included to scope carer attitudes, drawing on the work of Buehler *et al.* (2003).
- (ii) In-depth, semi-structured interviews were then undertaken with carers which also included a challenging behaviour questionnaire developed from work done by Quereshi and Alborz (1992). Appendix 1
- (iii) Semi-structured interviews were undertaken with the birth children of the carers and the young people in the foster placement. Appendices 2 & 3.
- (iv) Birth children and children in foster families were asked to draw/construct eco maps of the people closest to them.
- (v) A family exercise was also attempted with carers, birth children and children in placement, in which participants engaged with vignettes (developed from the work of Padbury and Frost 2002) and from which the group had to seek an agreed solution to the issues raised in the exercise.
- (vi) Carers and young people were asked to audio-tape their reflections about day to day life in a foster home over a period of seven days.

Figure 3:1 Case study data sources



By using the above mixed methods design I sought to gain some ‘purchase on the shifting realities’ that this case study captured (Edwards and Talbot 1999:188). The primary data sources were ten foster families. The participants in these families and the types of data gathered from them are outlined in Table 3.1.

Table 3:1 Participants and data map

	Postal Quest- ionaire	In-depth interview with carer:s	Interview with children in placement	Interview with birth children	Written feedback from birth child	Interview with adopted child	Taped diaries	E mail diary	Written diary	Eco- map	Three wishes
Family 1	1	2 (M&F)	1	1 (H)		1	4 (C, Ad, F&B)			3 (Ad,B & F)	F
Family 2	1	2(M&F)	1					1 F			F
Family 3		1 (F)	1	2 (1H+ 1A)			2 (F& C)			1 (F)	F
Family 4	1	2(M&F)	1		1 (H)		1 (C)		1 (F)	2 (F)	F
Family 5	2	1 (F)	1	1 (H)			4 (C,C,B, F)			1 (F)	F
Family 6	1	2 (M&F)	1	3 (H)						3 (B&B)	F
Family 7		1 (F)	1	2 (1H+ 1A)			1 (C)			1 (F)	
Family 8		1 (F)	1				2 (C& F)			1 (F)	F
Family 9	1	2 (M&F)									
Family 10		1 (F)	1							1(F)	F
Totals	7	15	9	9	1	1	14	1	1	11	8

Family 1-3 = Agency One (Local authority).

Family 4-8 = Agency Two (Independent fostering agency)

Family 9-10 = Agency Three (Local authority with support from voluntary project)

In-depth interviews with carers M=Male, F=Female

Birth children living at home = H

Birth children living away from home =A

Diaries & Eco maps Ad=adopted child, B=birth child, C=carer and F=Foster child

Notwithstanding the small sample size, the volume and richness of the sources was sizeable and in total 77 units of mixed-method data were collected.

The origins of the research

My involvement in an earlier commissioned evaluation of foster care outcomes provided me with a valuable insight into some of the methodological challenges in understanding the fostering experience. This was not a pilot study as such (see Yin 1994) but afforded me the opportunity to formatively develop new themes and topics and assisted in the conceptual clarification of the research design for this doctoral thesis. The earlier study also helped me to become aware of the logistics of field inquiry. Indeed I returned to one of the agencies for the PhD study as it provided convenient access to known gatekeepers who were receptive to the ambitions of the investigator. However it should be noted that the research for this thesis has generated original data gathered from a much wider and different range of respondents than in the earlier evaluation enquiry.

Theoretical Perspective

A research method and design is not some neutral activity existing in a vacuum but is informed by the researcher's epistemological and ontological perspective. Thus as D'Cruz and Jones (2004:57) helpfully note:

The selection of design, methodology, data generation and analysis does not consist of random or ad hoc decisions (or neutral methods or techniques), but in assumptions about reality (ontology) and how this may be known or understood (epistemology).

A central issue in research is whether the social world can and should be studied according to the same principles and procedures as the natural sciences. The position that affirms the importance of imitating the natural sciences is inevitably associated with an epistemological position known as positivism (Bryman 2001). I am not taking a positivist approach in that I am not trying to establish patterns of association nor conduct an experimental study into 'what works'. Rather, I am

looking for nuance, influence and interplay - the more subtle elements of family life which defy quantitative research and which qualitative research can more readily address (Holliday 2002).

The qualitative researcher is expected to demonstrate epistemological integrity in the sense that there is a defensible line of reasoning. For findings to be credible the research process must reveal a research question that is consistent with the epistemological standpoint and an interpretation of data sources and interpretive strategies that follow logically from the question. Questions of ontology are concerned with the nature of social entities. The central point is whether entities can be considered objective entities that have a reality external to social actors, or whether they can or should be considered social constructions built up from the perceptions and actions of social actors (Bryman 2001). In this study I have taken a social constructionist position, believing that social phenomena and their meanings are continually being accomplished by social actors. Questions of ontology cannot be divorced from issues concerning the conduct of social research. People therefore need to be engaged with and listened to, in order to enable them to share their understanding of their social world. As Denzin and Lincoln (1994:2) note:

Qualitative researchers study things in their natural setting, attempting to make sense of, or interpret, phenomena in terms of the meaning people bring to them.

The qualitative research strategy emphasises the generation of theory through an epistemological approach that is essentially interpretivist, informed by and with insights from symbolic interactionism (Gomm 2004). Symbolic interactionism focuses on people's practices and lived realities. Individuals interact with the world and go through a process of making their own inter-subjective meanings. The social setting is not fixed but dependent on the meaning of the world and how it is modified through interaction. It has been very much my goal to understand the lived experience from the point of view of those who live it. The kind of research methodologies that are associated with symbolic interactionism are the case study and grounded theory (Gray 2004), and these have been used in this study. Following

Crotty's (2003:5) model I have drawn up the following table to demonstrate the theoretical perspective that has been adopted:

Table 3:2 Theoretical perspective

Epistemology	Theoretical perspective	Methodology	Data Generation & methods
Constructivism	Symbolic interaction	Case study and grounded theory	Interviewing and diaries

A case study approach

I have chosen a case study approach as this has specific advantages for research with social groups. A case study approach allows the voice of the participants to be heard (Edwards and Talbot 1996). Case studies are the preferred strategy when 'how' or 'why' questions are being posed and 'when the focus is on a contemporary phenomenon with some real life context' (Yin 1994:1). For this study the how questions are 'how foster carers help children to fit in and feel accepted and how they manage their families'. A case study allows an investigation to explore the holistic and meaningful characteristics of real life events. Case studies are however far from being only an exploratory strategy. Many case studies have been both descriptive and explanatory (Yin 1994). What distinguishes a case study is that the researcher is usually concerned to elucidate the unique features of the case (Bryman 2001). In this research I am hoping to elucidate the unique dynamics of foster families that help facilitate successful fostering.

Case studies should be used as a method when one wants to immerse the research in contextual conditions, believing them to be highly pertinent to the study. The case study's unique strength is its ability to deal with a variety of evidence; interviews, observations, questionnaires and documents. Case studies are probably the most flexible of all research designs (Hakim 1987). A case study allows for triangulation of multiple data gathering approaches that I have chosen to employ (Edwards and Talbot 1996). A good case study will use as many sources as possible (Yin 1994). Using a variety of data collection techniques and methods allows a more rounded,

holistic study than any other design (Hakim 1987). Triangulation as conceptualised by Webb *et al.* (1966 cited in Bryman 2001) argue that it is helpful for more than one method of enquiry to be employed to cross-check the data analysis 'resulting in greater confidence in the findings' (Bryman 2001: 274). There are strong arguments for using multiple researchers as well as a variety of data collection techniques, but the former is clearly not possible in doctoral research.

Within this study it is foster families that are the unit of analysis not their different agency contexts. Multiple case designs with sub-units have both advantages and disadvantages (Yin 1994). Multiple case studies can offer more compelling evidence and are sometimes viewed as more robust: each individual case within a multiple case study may be holistic or embedded (Stake 2005). Whilst I am engaging with families linked to different agencies, my unit of analysis will be primarily the individual family and not their agency affiliation. On occasion however, some comparative observations are made about wider organisational aspects of fostering and other differences and similarities between the families. I will be following a replication, not a sampling logic, in that I will be repeating the same data gathering formats across the units in the study (Yin 1994). Such a case study is of course difficult to replicate in totality because of the specific nature of the sites and families involved and is therefore difficult to externally validate. This is one of the drawbacks of the design. Also it can be argued that a well trained and experienced investigator is needed to conduct a robust case study because of the continuous interaction between the theoretical issues being studied and the data being collected. Thus a criticism that could be leveled at this case study is that a non- participant researcher will fail to observe or take full account of all of the relevant factors (Bryman 2001). However it is not feasible nor perhaps ever possible to become fully a participant observer in a family, nor is it really possible for an adult to become a participant observer amongst children in their everyday world.

Selective case studies are particularly useful once a body of research evidence has accumulated on a topic (as with aspects of foster care), case studies can focus on specific themes or issues to refine the body of knowledge (Hakim 1987). Thus this study seeks to build on what is already known about foster care but focus more

closely on the family dynamics within the foster home. There are of course other approaches that I could have taken, for example a quantitative research approach using only postal questionnaires involving a far larger sample, but this would not have been able to explain with the rich detail and complexity how families function, as will be demonstrated in later chapters (Darlington and Scott 2002:6).

This research whilst not an ethnography is informed by an ethnographic approach. These principles are particularly relevant to the interviewing of children (Christensen 2004). Ethnography is an interpretive act of 'thick' description (Atkinson *et al.* 2001). Data are really the researcher's construction of how other people construct everyday meanings that make sense of their particular world. This interpretive understanding evolves slowly through immersion in the lives we seek to understand. This is the way in which through a phenomenological approach we are not only able to consider others as humans like ourselves but also to acquire an understanding of the experiences 'behind' their perceptible expressions (Atkinson *et al.* 2001). The value of the ethnographic interview lies in its focus on culture through the participant's perspective and through a first hand encounter. It is particularly useful for eliciting a participant's meanings about events and behaviours and for generating a typology that categorises and interconnects cultural domains and assumptions (Marshall and Rossman 1999).

Access

Gaining access to Agency One

Access to the local authority and their carers involved lengthy negotiations. After various false starts with mid-range officers, I wrote directly to the Director of Children's Services sending a copy of my research proposal. An affirmative reply came some three weeks later. I duly contacted the relevant team manager who did not initially respond to my calls. By the time I managed to speak to her I was informed that the Director of Children's services was no longer in post and I would need to again seek access from a new Director who would not be available to be contacted for at least another week. Feeling frustrated and thwarted I did as Bryman (2001) suggests, and sought an alternative champion to gain entry which proved effective.

Gaining access to Agency Two

Access was straightforward in that it is a small independent organisation with few management tiers to negotiate. A copy of the research proposal was sent to the Deputy Director, a meeting took place and we came to a working agreement with respect to the research. This gatekeeper wanted foster families selected that represented a range of geographical locations covered by the agency so that findings might reveal useful insights into how fostering was perceived across a widely dispersed sample of carers. This request was accommodated as it did not detract from the original research proposal.

Gaining access to Agency Three

Access to these local authority carers (who were also receiving additional support from an independent project) was unproblematic as I had built up a good relationship with this gatekeeper as a result of earlier commissioned work with the agency. It is not sufficient just to get in, one must also get on with the research participants (Darlington and Scott 2002) and this includes social workers who that can facilitate the process.

Sampling

A non-probability sampling technique was utilized whereby an opportunistic sample across the three agencies was developed (Bryman 2001). The three different agencies were chosen, because they reflected the wide and diverse nature of contemporary fostering. Agency One carers were working with an urban local authority fostering and adoption team. Carers in the second agency were working with an independent fostering and adoption agency that covered all areas in Wales. Foster carers who work for independent agencies are thought to receive higher levels of support and therefore display higher levels of satisfaction, although this study did not compare agency with agency, but family with family. Foster carers in the third agency worked with a semi-rural local authority fostering and adoption service and were receiving additional support from an independent project, as there has been an identified risk of a placement suffering a disruption. This was the site for the original commissioned evaluation.

The initial aim was to purposively sample five families from each agency. The intention had been to ask social workers to select cases that they deemed successful and to explore the notion of success. It soon became clear that this could entertain too much bias as well as potentially cause controversy between carers. The day to day world of local foster care is one in which carers often know each other and indeed from my earlier study it was evident that many foster carers were related. Thus if carers were selected by social workers for me as being 'successful', others might soon hear about it and perhaps feel less valued if not aggrieved. A decision was therefore made to write to all carers involved with each of the three agencies. This involved writing to 150 carers in Agency One; 55 carers in Agency Two and 12 carers in Agency Three. An outline of the proposed research was sent to the families, making it clear that the aim was to interview not only carers, but where possible the foster children placed with them and their own birth children. I was looking for carers who had been caring for at least a year and who had experienced at least one successful placement. My criteria for 'success' was initially defined by professionally-given criteria around stability over time. This was an initial means of locating a sample which could then be examined to see what success meant from the viewpoint of the carers and children who might not, as indeed was the case, view events in the same way.

Table 3:3 Volunteers from each agency

N=10 families	Letters sent out	Volunteers	Number of Families interviewed
Agency One	150	1	3
Agency Two	55	4	5
Agency Three	12	4	2

I had not anticipated that there would be a major difficulty in recruiting volunteers as my earlier study had revealed a keen level of interest and goodwill from carers, who wanted to help improve the knowledge base of foster care. Many carers had

stated that they were not often listened to and saw research as an opportunity to remedy this deficit. To my surprise only one volunteer emerged from Agency One where 150 letters had been sent out. I then attended a foster care support group but this did not generate any further volunteers. I thus asked the manager of the fostering and adoption team, to identify which foster carers:

- Had been carers for at least one year.
- Had experienced at least one successful placement
- Were deemed by the agency to be successful foster families

The manager then made direct contact with those families, who in his view fitted the criteria, and I was eventually able to interview three families from Agency One. The social work manager gave me a brief overview of each family, including the family that had volunteered. There were more volunteers available from Agency Two, the independent fostering agency. One can only speculate why there was a better response here and it may have been that carers were better disposed to the agency request. I initially met with a group of five foster carers and discussed the research proposal; four of the carers agreed to become involved in the research and I disseminated the postal questionnaires and made appointments to come and visit them. During one of these interviews, a carer alerted me to another carer who might be interested in taking part, and who was of particular interest to me as he was a male, primary carer and he met the initial selection criteria. I thus contacted him via the fostering agency and he agreed to take part in the research. In Agency Three, 12 letters were hand delivered by staff in the independent project that supported local authority carers and four volunteers emerged. Only two families were in fact interviewed from Agency Three. The reason for this was that by the time this cluster was approached I had already amassed a large and complex volume of data and consequently was only able to recruit two more families. After consultation with my supervisors I decided that I had sufficient data from the ten families already interviewed to commence my analysis.

Collection of demographic data

In preparing for the in-depth interview with foster carers, I utilised a postal

questionnaire to collect quantitative data in order to draw up a profile of the carers. This instrument sought demographic information such as: the length of time as carers, age, and educational background. This gave carers an opportunity to focus on the fostering experience and consolidate their thinking prior to the interview. Within the questionnaire I also included Likert-style scaling, drawing on the work of Buehler *et al.* (2003) that sought to ascertain levels of support, motivation to foster and a range of other information.

I piloted the postal questionnaire (Bryman 2001) with a foster carer, who established that it took her 22 minutes to complete and that it was not in her view unduly lengthy. She also found that the questionnaire was interesting and stimulated her thinking about her motivation and beliefs surrounding foster care. In fact only seven out of the ten carers interviewed, completed the form, the others found it 'daunting' or perceived it as too time consuming.

Audio diaries

I chose to utilise audio diaries, which the carers, birth children and young people had to operate and manage. The aim of the audio-diary was to get closer to the notion of the participant observer (listener) within the family and indeed the child. I gave participants the option of undertaking a taped diary, emailing a diary or providing a hand written diary. I deliberately utilised technology that children would be familiar with and might therefore be more comfortable about participating in the research. The drawback of the email diary or written diary is that it relies on the literacy skills of the child. One child in placement chose to provide a written diary, another chose to email a diary to me; the rest of the carers and young people who wished to provide a diary chose to use an audio machine. The BBC also included audio diaries of foster carers and children in placement on their web site for their 'Taking Care' series focusing on the experience of young people who have lived in the care of the local authority (BBC 24-27 Feb 2004). The participants commenced their diaries on the day after they had been interviewed, and completed the diaries for a period of seven days. The participants were asked to record a summary at the end of each day with any salient events being noted. I received 16 diaries in total. The diaries proved to be a very rich source of data, which the young people and

carers appeared to enjoy creating. Carers and young people felt able to be frank and revealing in their diaries. These were then typed up, transcribed and analysed in the same way as the interview data.

Interviews

Qualitative research involves the studied use and collection of a variety of empirical material that describe routine and problematic moments and meanings in individuals' lives. The multiple methods of qualitative research may be viewed as a bricolage and the researcher a bricoleur (Pithouse and Atkinson 1988). A bricoleur collects and collates a wide variety of data, and the bricolage is pieced together as a close knit set of practices that provide understandings of a situation. The process however is one of an emergent construction (Denzin and Lincoln 1994). Interviewing is one of the most common and most powerful methods to assist in this construction of how others understand their worlds. In-depth interviewing is particularly well suited to exploring questions in the human services, which relate to the meaning of service users' experience and to deciphering the complexity of human behaviour. In-depth interviewing with foster carers involved the establishment of human-to-human relations with the respondent and a desire to understand rather than to explain (Fontana and Frey 1999). Understanding the significance of past or current experience lends itself to methods such as in-depth interviewing in which 'trust and rapport are essential if an individual is to share thoughts and feelings' (Darlington and Scott 2002:3).

The in-depth interview takes seriously the notion that people are experts in their own experience and so are best able to report how they experienced a particular event or phenomenon. This fits in well with the strengths based perspective adopted in this study. An in-depth interview can also be seen as a conversation with a purpose (Marshall and Rossman 1999). Interviewing may be an overall strategy or one of several methods employed as in this study. There are no pre-determined response categories; the researcher explores general topics to uncover participants' views but otherwise respects how the participant frames and structures responses (Darlington and Scott 2002). Immediate clarification and follow up are however usually possible. The in-depth interview allows for greater breadth than other types

of interviewing and for a more natural and conversational encounter where respondents can be put more at their ease. It allows people to talk about events that have happened in the past and those that are yet to happen. These retrospective and anticipatory elements open up a world of experience that is not accessible via methods such as observation (Darlington and Scott 2002). Researchers conducting in-depth interviews should have good listening skills and also be skilled at personal interaction (Marshall and Rossman 1999). Audio taped interviews with carers went well and on occasion the interviews became extended (up to three and a half hours). There was certainly no difficulty in gaining an in-depth response and it was the large volume of data collected from these carer interviews that led me to limit the number of participating families in the study to ten.

Researching with children

Social scientists have come to view children as research participants in their own right, seeing children as competent interpreters of their own social world. In seeking the authentic voice of children this study necessarily had to locate children in their foster homes. The home is an important research site, precisely because it does not lend itself easily to the more fluid ethnographic techniques of participant observation, especially in Western urban contexts where the 'black box' of the family remains a largely privatised social space (Atkinson *et al.* 2001). Strangers enter by adult invitation only. Those interested to research children's lives at home are faced with difficulty of gaining access to a protected sphere and also the fact that children do not usually occupy positions of power in the domestic arena. This is particularly true of foster children whose position can often be a precarious one within the family. I thus had to request access via the foster carers in the first instance and then send a follow up leaflet to the children once the carers, as gatekeepers, had allowed access to the family unit. I did not assume that the home was necessarily the preferred location by the children participating in this study, but it was a pragmatic decision which allowed me to observe the families in action.

Research has moved from doing research on children to researching with children. This reflects a move forward for researchers and for children's rights as outlined in the Children Act (1989). Dunn and Deater-Deckard (2001) in their study of children

facing family transition concluded that it is of vital importance to listen to the children themselves and to glean their views and perspectives. Children participate and share in a cultural space, termed childhood. Children can help constitute that space in culturally and historically distinctive forms. Dunn (1985) (cited in Dunn and Deater-Deckard 2001) combined observational and interview methods to produce an ethnographic account of young children's involvement in family life and their interaction with parents and siblings. She provides a ground-breaking account of their emotional and inter-personal relationships. Dunn suggests the use of a more naturalistic method of interviews combined with detailed and close observation of children. Woodhead (1997) posits that there has been a failure in traditional developmental psychology to acknowledge the cultural diversity in childhood. He suggests that children do not grow up in a vacuum, but are more embedded in a dynamic social context of relationships, systems and cultural values. It is this context of relationships and family systems that I am attempting to study. Ethnography has shown how children contribute to the shape and form which their childhood takes, often referred to as 'agency' in sociological terms (Shanahan 2007). Thus the young people will affect the dynamics between themselves and their foster carers.

Full participant observation techniques would allow for a contextualised understanding of foster families, but this was virtually impossible as I could not become either a family member or a child. Nevertheless, through semi-structured interviews and by frequent observation of the young people negotiating with their foster carer/ parents, and by spending some time in the family home, I have been able to deepen and also revise my grasp of family dynamics. I have been a non-participant observer of the family. I visited the families numerous times, initially to introduce myself, I returned to interview the carers, again to interview the birth children and again to interview the children in foster care. I further visited the home to undertake the vignette exercises and finally to collect the audio diaries and recording equipment back from the families. Thus there were many opportunities to observe the families and their relationships.

O'Kane (2000) shows how participative techniques permit children to articulate

their concern and encourage children to be reflexive. Research with children is beginning to embrace, as part of its method, different kinds of research techniques to reveal their thoughts and ideas about a particular research question. Punch (2002) has argued that it is somewhat paradoxical that within the new sociology of childhood many of those who call for innovative or adapted research techniques for children, also emphasis the competence of children. If they are competent one may query the need to implement special child-friendly interviewing methods. Some suggest that it is the responsibility of the adult researcher not to draw attention to any adult-child distinction by treating them as mature, competent people. However, such an approach may mean that the power imbalance between adult researcher and the child subject is not always adequately addressed (Morrow 1999). A way to address the power imbalance whilst still treating young people as capable and mature is to recognise them as being similar to adults whilst possessing different competencies. Thus there has developed a range of methods which are linked to children's skills such as the use of pictures, diaries, sentence completion and writing (see 'Voices from Care' in Holland 2004). Techniques such as 'quick thinks', ranking exercises and visual prompts can be used to engage children with questions (Kellett and Ding 2004). Pictorial faces have been used to show different expressions (Gorin 1997) and help stimulate discussions about feelings. It has been common for researchers to consider children below the age of seven or eight years of age as not viable interviewees (Kellett and Ding 2004). However this idea has been challenged (Alderson 1995) by those who maintain that poor data are not a product of the young age of the child but of poor interviewing techniques. A study by Thomas and O'Kane (1998) used a variety of participatory techniques to facilitate children's views about decision-making processes and how these affected them, including a 'pots and beans' exercise that helps children to express the strength of their feelings about a particular topic.

The children and young people in this study were aged between the ages of nine and twenty and so it was important to be flexible in approach and not to use techniques too advanced nor those which might seem condescending. 'Child friendly' methods should not be unquestioningly assumed to be more appropriate for use with children and young people, for example, children may be familiar with

drawing and writing as a result of their school experiences but for some children those experiences may also be negative and associated with failure. As Thomas (2001:106) notes 'communicating with children is too often seen as a specialized skill when it should be part of the basic repertoire' of everyone involved with children .

It is important to retain a balance and choice of different techniques. Adults must strive to abandon the commonly held assumption that their knowledge is superior to that of children. The challenge in fact is how best to enable children to express their views to an adult researcher and how to maximise the children's ability to express themselves at the point of data gathering, 'enhancing their willingness to communicate and the richness of their findings' (Hill 1997: 180).

Some researchers (Punch 2002) have concluded that an effective way of carrying out research with children is to combine traditional research methods used with adults with those techniques considered to be more suitable for children. By using traditional 'adult' research methods such as interviews, children can be treated in the same way as adults and display their competence. Thus they are not being patronised by using only 'child-friendly' techniques. I have adopted this view and have tried to use a traditional approach whilst incorporating some techniques that may appeal more to children and young people. Semi-structured interviews with an aspect of activity based work may facilitate the engagement of young people. I therefore included the option of drawing an eco map (DoH 1988; Brannen 2000), a technique often used by social workers (and a similar four field map has also previously been used by researchers working with children and young people, Dunn and Deater-Deckard 2001). The eco-map helped young people galvanise their thinking about their family and close relationships. The use of drawing gave them time to think about what they wished to portray, images could be added to and changed which gave more control over their forms of expression, unlike the taped interview. Finally, the drawings themselves are rich visual illustrations, which directly show how children see their world. Some young people however were not confident in their drawing abilities and perhaps were self conscious. To allow for these individual differences, I offered them a range of techniques from which to

depict their family structure (drawings, diagrams and plasticine), or if they preferred they could just verbally describe their close relationships. Of the children willing to provide a representation of their close relationships, all chose to either draw pictures or complete an eco-map. In all, thirteen children provided an eco map or picture and the content of these is analysed in Chapter Ten, where aspects of intimacy and birth families are discussed.

Semi-structured interviews with children

I chose to use a semi-structured interview format for interviewing the children and young people. I interviewed sixteen children in total, nine foster children, six birth children (plus three adult birth children) and one adopted child. The semi-structured interview allows children the possibility to control the ebb and flow of conversational work. Alderson (1995) confirms the empowering role of the semi-structured interview in offering children a voice. Interviewing the young people (both foster children and birth children) in their homes was done with the young people alone, so they would feel more free to air their opinions. Interviewing in the home was also essential, because I was able to observe some of the interaction between the young people and their carers or parents and the vignette exercise (see below) was undertaken together with the carers.

When interviewing children, different roles are possible, one can be a supervisor, a leader, an observer or a friend. Many researchers have found that seeking the role of friend is often the most fruitful, allowing the researcher to interact with children in a more trusted way, without any explicit authority role (Marshall and Rossman 1999). The age and power differentials between adult and children however are always salient. One of the main advantages of using visual, written and audio methods is that these may lessen the problems of unequal power relationships, where the child may feel under pressure to respond relatively quickly in the 'correct' manner.

The interviews with children generally went well. I was pleased that I had a range of flexible options available to me. In three of the interviews with children they lost interest very quickly and so we moved on to more general discussions and drawing at an earlier stage. Some young people were clearly very articulate and able to

engage in lengthy semi-structured interviews and I allowed those interviews to develop accordingly (and some of these lasted for up to 2 hours). Three out of the nine birth children interviewed were in fact adults, which I had not anticipated in my original research design. I thus needed to adapt the range of questions accordingly. A copy of the semi-structured interview format for children and young people is included. (Appendices Two and Three)

Vignettes

Within the interviews I used vignettes as a part of an exercise to enable me to observe family dynamics, particularly ways of negotiating within families. There are relatively few methodological papers that examine the use of vignettes within social research. Carter and Renold (2000) in their study of violence in children's homes found that vignettes allowed young people more control over when to introduce personal experience, particularly where they felt too uncomfortable to do so in direct discussion. The available literature demonstrates the ability of this technique to capture meanings, beliefs, judgements and actions as situationally positioned. Vignettes are stories that provide concrete examples of people and their behaviours on which participants can offer comment or opinion. The researcher can then facilitate a discussion around this. Studies typically employ vignettes within a qualitative paradigm, as either a self contained method or following a questionnaire (Brannen *et al.* 2000). Wade (1999) used vignettes following individual interviews in her study of children's perceptions of the family and she selected stories on topics that had not been covered in her interview.

It is important when working with younger children that vignettes are easily followed and understood. I asked the carers and young people to work together on the vignettes, to demonstrate family problem solving. In the event I did not find the use of vignettes worked as well as I had hoped as the scenarios themselves were found to be overly complicated by participants. I had not piloted the scenarios and this was a significant omission. Given that the families were very busy and I had visited once to interview the carers and again on several occasions to interview the children, then asking to visit a further time to complete the family exercise proved onerous. I completed the family exercise with four families in total but it was not as

fruitful as I had hoped.

Social work experience and commonalities with the role of researcher

As I am a qualified social worker with 22 years experience of working with both adults and young people, I believe this facilitated the research process. However it can potentially cause role confusion for both the researcher and the participants. Indeed I did not disclose my social work background in child care but framed my professional identity as university researcher and tutor. As a researcher I sought to be aware that I held understandings and assumptions, which in turn shaped the ways in which the research was conceived and carried out (McLeod 2001). My gender may also have had an impact on those I was interviewing. There are differences in interview responses according to the gender of the interviewer: women researchers are sometimes seen as more sympathetic and can prompt greater depth of response from informants (Scourfield 2002). Also interviewing is a routine method utilised by all social workers. As a social worker, I am skilled at interviewing people in their homes and can quickly build a rapport with previously unknown individuals and families. I have good listening skills and this includes observing and being able to assimilate large amounts of new information (Yin 1984). One must be able to hear what is said and the exact words being used and also grasp implicit and tacit meanings. The effective researcher also needs to be able to offer feedback and ask for clarification from the research participant.

Research mirrors social work practice in several respects, indeed social work assessments in particular can be regarded as a form of social research (Holland 2004). Both the social worker and the researcher go out to investigate a phenomenon/problem, they build up evidence about the situation, balancing a variety of factors and make an informed decision based on that evidence. There are two aspects of symmetry between social work practice and social research: the interview process and the analysis of interview data (Scourfield 2002). Both disciplines use research that has previously been undertaken on the subject area to inform their work. Without a firm grasp of the issues in both research and social work, one could miss vital information about the fostering experience. The development of trust between researcher and participant was an essential part of this

research process. Participation in a research project such as this, where personal and perhaps traumatic experiences are discussed, requires a great deal of trust that the researcher will listen, treat participants fairly and respect their limits about what they want to say, and will also in constructing data and analysis represent what they say fairly.

While my task was not 'solution focused' (Braye and Preston-Shoot 2000) I occasionally felt very tempted within my role of researcher to try and suggest solutions, to mediate, to advocate or indeed on occasions to go and seek out further information and resources to assist. I was able to resist the temptation to revert to a therapeutic or welfare role. Such a relationship would be inappropriate and would develop an expectation of support with the research participants, who might feel let down and abandoned once the research interviews had taken place. It would also leave the participants with some confusion as to the purpose of the research. Furthermore, had the research participants known that I was a qualified social worker this in turn might have skewed their responses (McLeod 2001). One other key distinction between the two roles of social worker and researcher is the interviewer's orientation towards their data. Social workers may have to make an evaluative and explicitly moral assessment about a client's circumstances. Researchers on the other hand may be seeking to understand rather than adjudicate upon a set of behaviours and attitudes. I sought a more moderated role of friendly neutral, albeit always conscious of power imbalances in the research relationship (Darlington and Scott 2002).

Ethical issues

The research met all the ethical requirements outlined by the British Sociological Association (2002). The BSA framework includes the need to safeguard the interests of those involved in or affected by the research, and to report on findings accurately and truthfully. Research participants were made aware of why the research was undertaken and how it would be published and utilised. All interview data were anonymised and pseudonyms employed. Confidentiality was guaranteed unless any child protection concerns arose, this was made clear to all the participants. Ethical research does not just seek to avoid any harm but also seeks to

avoid infringing people's rights (Murphy and Dingwall 2001).

As with all research with children and young people, it was important to place ethics at the forefront of the research process (Greig and Taylor 2004). It was essential therefore to gain informed consent from the children participating in the research, as well as requesting consent from their birth parents, carers and the local authority. No children were involved or interviewed who did not want to take part and no pressure was exerted on any of the participants. Thus not all birth children and foster children chose to take part, but most did. Once a foster carer indicated their interest in participating in the research I sent a child friendly leaflet to the children in their family to provide them with information about the study and what would be required of them if they chose to participate. All recruits had to choose therefore to be active participants (Alderson 2004). The children needed to know that I would be audio recording the interviews with them and they needed to give informed consent for this, which they did. In obtaining full consent, the purpose and procedure for using recording equipment was fully explained to the child (Wilson and Powell 2001). It was important, where possible, to interview the children by themselves in a one to one situation, initially to gain personal and sensitive information, such as exploring their experiences of being in foster care (O'Kane 2000). It was made clear to the children that their views were confidential and would not be reported back to their parents, carers or social services. In order to ensure confidentiality and make certain that young people and carers could not be identified from their particular family groupings, I have changed some minor details or avoided using some data when presenting my findings. However, participants may still remain identifiable to themselves (Murphy and Dingwall 2001). It was however difficult to ensure the diary tapes of the children were confidential from their carers or parents. In one family the carer listened to the tape of the child in placement and then passed it to me. I consequently made visits to make clear to carers and parents in the presence of the young people that they should not listen to the tapes without the agreement of the young people. Young people then took responsibility for keeping the diary tapes until I was able to collect them.

The research needed to be conducted in a careful manner given the sensitive and

personal nature of the enquiry. Research participants, particularly fostered children, could have experienced stress, anxiety, guilt or damage to self-esteem during interviews. An ethnographic approach could potentially cause indirect harm. For example, a study of the family may focus on unequal relationships which could arouse dissatisfaction for young people and their carers. This may of course be positive or negative in that it may prove to be a vehicle for discussion, reflection and indeed change. In this sense it is not the interview per se, but the perception of it that is important. The reaction to the interview is rarely directly controlled by the researcher. It is also incumbent upon researchers to make themselves visible in the text and to present the evidence upon which they base their interpretations.

Validity

There are of course challenges in validating social research where there is an evident impact of research and researcher on the setting - the so called 'Hawthorne effect', (a term first coined by Lansberger in 1955 cited in Bryman 2001). In an attempt to address this issue, audio and email diaries were deployed to triangulate and limit researcher bias. The audio diaries proved a rich source of naturalistic data, in that they revealed much of the ebb and flow of daily life; they also illuminated some very different perceptions held by family members about the same event as will be revealed in the findings chapters.

It is of course misguided to conceive that any interview 'respondent' is 'truthful' in some absolute sense. Truth has its meaning in perception at a moment in time; truth and meaning are constantly changing. Similarly, with regard to the use of vignettes, truth was not about trying to ascertain what the participants would actually do or did in each situation, but what they felt ought to be done. That is the moral workings out of family life (Williams 2004).

The transparency of the research approach should be such that it allows for replication, however full replication is an unlikely goal for an in-depth qualitative case study. Although Yin (1994) suggests that if the methods are clearly explained another researcher should be able to repeat the same study and come up with similar results, however a reflexive recognition of the individual nature of the qualitative

research process would suggest that it is impossible to exactly replicate research. The confidence in the robustness of the research findings increases with the number of sites in which data are collected (Hakim 1987). Furthermore the utilisation of multiple data collection methods will allow for some triangulation, as a means to promote validity (Silverman 2001). I therefore chose a range of data gathering techniques for this purpose. I am aware that even if data from different sources appeared consistent, it is still possible that interpretations are invalid (Hammersley and Atkinson 1995). However through cross referencing data and analytic categories within and across interviews, through diaries, vignettes and observations, I was able to challenge and revise my evolving grasp of how life in foster homes is accomplished as a set of meanings and complex relationships. It is towards the analysis that we now turn.

Transcription and analysis

All interviews, taped diaries and hand written diaries were transcribed in full. This was time-consuming, but vital in order to record in full detail what a person had said. Some of the interviews with foster carers lasted for up to three and a half hours. Given that an hour of interview takes an average of three hours to transcribe (Darlington and Scott 2002:143) the transcription time of interviews such as these took up to ten and a half hours. Having transcribed an interview or diary I began preliminary analysis thereafter and this allowed me to refine my research design further and develop new questions with regard to the themes that were emerging, in some senses therefore my data collection and analysis were intertwined (Burgess and Bryman 2001). However, I soon realized how difficult it is to navigate a path through densely rich data, as Bryman (2001: 388) notes:

One of the main difficulties with qualitative research is that it rapidly generates a large, cumbersome database because of its reliance on prose in the form of such media as field notes, interview transcripts, or documents.

As the interviews stemmed from semi-structured formats and produced the bulk of the data, it was necessary to employ techniques that could make sense of this raw material (May 2001). Unlike the analysis of quantitative data, there are few well

established and widely accepted rules for the analysis of qualitative data (Bryman 2001) and grounded theory was selected as probably the most prominent of the general approaches to qualitative data analysis (Edwards and Talbot 1999). 'Coding represents a key step in the process.....as such coding provides the link between the data and the conceptualisation' (Bryman and Burgess 2001:217). Computer software packages have been developed to assist this process (Richards 2001). Generally the term grounded theory is used to denote an approach to data analysis in which themes and categories emerge from the data. I thus decided to utilise a computer assisted qualitative data analysis software package to help me code and sort the data; I chose to use the NVivo programme. One of the benefits of such a programme is that it:

invites the analyst to think about codes that are developed in 'trees' of inter-related ideas. This can be a useful idea in that it urges the analyst to consider possible connections between codes. (Bryman 2001:408)

Over a period of five months I coded the data and did so within the NVivo programme, using the node browser. The nodes are the process by which the coding is undertaken. I then used tree nodes to structure the data. I also chose to structure the data once coded within data sets which allowed me to compare, for example, family with family with regard to a particular issue, or to compare, for example, children's perspectives with carers' perspectives. I think on balance this was the best way to approach the data, as it helped me both familiarize myself with the data and allowed for easy retrieval of all of the data relating to each theme. There were some drawbacks to this process of coding and retrieval, as only relatively small parts of a transcript are coded and then regurgitated by the computer, and the smaller quotations often felt disembodied and hard to contextualize within the larger body of rich in-depth interview material (although I could always go back to the original quotation). I am confident that I have been able to retrieve a complete data set of all the comments made by each participant with regard to each of the identified emergent themes. I have also been able to devise and analyse sets of data for each family and for each Agency and for each sub-set of respondents as follows: all carers, all birth children, all foster children, all children and all participants.

Conclusion

I have generally been pleased with the methods chosen and the data that they have yielded. The in-depth interviews were the appropriate medium for gaining information from the carers who seemed to enjoy the process of the interviews as one female carer comments in her audio taped diary:

It's my first tape diary Friday. Well, we had Alyson over; it was really interesting, comfortable and we all felt free that we could talk freely, openly to her; it was lovely that Philip (male foster carer) joined in with us. Afterwards Stu (foster child) was comfortable and had enjoyed meeting Alyson (sorry it's my dog barking in the background if you can hear it on the tape). After she left Philip did state that he thought that it was really good that he was able to listen and hear various views and ideas or feelings of mine that perhaps I don't always say everyday openly, well you don't really do you in a day to day situation, so that was good. We ought to create more situations like that.

(Audio diary extract, Josie, foster carer, family four)

The semi-structured interviews conducted with the children were also successful particularly with those who were more articulate and able to engage with the process. For the few an interview did not suit, I used alternative methods, such as drawing and modeling with plasticine but these rarely proved as fruitful as the one to one interview. The use of the vignettes exercises was not as successful as I had hoped, not least because I had not piloted them, but also because the families had already used precious time engaging with me in a range of other ways.

The audio taped diary was a rich vein of data as Alaszewski (2006:37) recognizes with regard to diaries generally:

Diaries can be used to access those facets of social life which members of social groups take for granted and are therefore not easily articulated or accessed through research methods such as interviews.

They gave a real sense of what goes on in the life of a foster family. The greatest insight of this was the different and revealing interpretations that members of the family gave about same event. Carers seemed to enjoy it too, as Josie notes at the end of a week of completing the taped diaries:

I've missed Rhiannon, my social worker, as she has been on holiday because I usually speak to her once or twice a week at least. So I have missed her, so perhaps this tape has made up for it a bit..... I shall miss doing this diary.
(Audio diary extract, Josie, foster carer, family four)

This chapter has described a range of qualitative methods of data collection deployed to gain an understanding of the inner experience and world of the foster family. Data from all of the key members inside the family has been sought to glean a more holistic and rounded picture. The type of study outlined in this chapter has rarely been undertaken before, particularly with regard to interviewing both foster children and birth children, (and adult birth children who no longer live at home). Whilst the study is in some ways a focused dissection of the foster family, the breadth of methods undertaken have allowed for some magnification of these components that facilitate a successful fostering experience. We now move on to present the findings about life in a foster family and what makes for a positive experience, first we introduce in some detail the participating families.

Chapter Four

An introduction to the families: welcomed and accepted

Introduction

The aim in this the first of the findings chapter is to introduce and give an overview of the families within this study and then to situate their key characteristics in relevant research to establish the similarity and differences of the sample with other UK foster carers. The families are varied in their make up and individual in their parenting practices, although there are predictably commonalities in the way that these very remarkable, nurturing and flexible families function.

The chapter starts by introducing the families with regard to basic demographic data. Also employed is the commonly utilised diagrammatic social work tool of the genogram (Department of Health 1988; Parker and Bradley 2003), to aid description of the families and as a visual aid for the reader (Appendix 5). A brief pen picture is offered with biographical material about each family. The chapter then discusses gender and the division of labour within households. The chapter concludes with some preliminary reflection about how these families display and enact family life.

Hereafter, the findings chapters will refer to each family by their number as documented in the Table 4.1 (overleaf). When referring to adults and children pseudonyms will be used to preserve anonymity; some minor adjustments have also been made to the details of the families in the following snapshots for the same purpose.

Table 4:1 Family composition

	Male Carer & age	Female Carer	Birth children	Foster children	Birth children not living at home
Family One S1	55	51	F13 (+F 9 adopted)	F13	0
Family Two S1	41	39	0	F15,M14, F12,M 9	0
Family Three S1	50	47	F16, M17	M11, F10, F9	M23,M22
Family Four S2	47	52	M21 (step-child)	M18	M33, M23 (step- children)
Family Five S2	48	47	F 20	M13	0
Family Six S2	48	49	F16,M15,M13	M11	0
Family Seven S2		53	M30	F14	F33
Family Eight S2	61	56	0	M 16, M 15	F35,F34,M32 F28
Family Nine S3	54	50	M23	0	M24
Family Ten S3		55	F20	F16, F12	F23, F35

The ten families were involved with three different agencies, as follows:

Agency One = (Local authority A, urban). **Family 1-3**

Agency Two = (Independent fostering organisation, pan Wales) **Family 4-8**

Agency Three =(Local authority B with support from voluntary project, semi-rural) **Family 9-10**

Snapshots of the families

Family One

Liz and Greg have one birth child, Helena and an adopted child, Carla. They have one foster child placed with them, Melonie. They have been carers for 11 years. Liz used to be an administrator but looked for work which would fit around childcare. Greg is unable to work for health reasons. They both felt that they did not want an only child, but were unable to have more children; fostering and adoption was their solution. They are a relaxed yet organised family. Both parents work as a team, sharing equally the household chores. They live in an ex-local authority home adjacent to parkland. Many children play in the street and in their large front garden. There is a friendly dog in the home, which is referred to in most of the discussions and in the children's eco maps. It gives the impression of being a sunny household, with 'Welcome' on the door mat.

Family Two

Dawn and Ian have no children, and are fostering four children. They have chosen not to have children, as they wished to dedicate themselves to fostering and working with less advantaged children. They live in a large private detached house, backing on to open countryside. Dawn works as a solicitor, whilst Ian takes the lead with the fostering. Ian used to work in social care, but gave this up to dedicate himself to fostering. They have been carers for seven years. The house is largely given over to children, with books, games and sports equipment being situated in the lounge and kitchen. Both are active people and have lots of hobbies and relish taking on new challenges, particularly the interests brought by the foster children. The household appears organised, without being regimented. The couple have dogs, cats and a reptile which are very much part of the family.

Family Three

Sally and Chris have been foster carers for six years. They also offer day care to children excluded from school. The couple have four children of their own, two of whom have left home. Until recently they had an elderly relative living with them, but s/he passed away. They are also grandparents, with their oldest child having

two children. They are fostering three children. Chris is unable to work for health reasons, but had worked in heavy industry; he currently sits on an education advisory panel in a voluntary capacity. Sally has worked previously in other areas of social care. They live in a local authority home on a large housing estate. The family are well integrated into the local community. They have a dog and a cat. The children have all helped to choose the décor for the lounge which has been recently decorated a flamboyant pink colour. It appears to be an open home with frequent young callers to the front door, asking if the children can come out and play.

Family Four

Josie and Philip live in a rural farm. They became a couple later in life; Josie has one son who is a probation officer and lives in Scotland. Philip works for the fisheries, looking after the local lakes. Philip has two sons, one of whom still lives at home. They foster one child at present, Stuart. They have been fostering for two years. Josie used to work in the catering industry but has also worked for a youth employment agency in the past. They felt that fostering would allow Josie more time at home to look after the family, whilst doing something for other people as well. The house is homely, with the kitchen at the centre of events. There are various animals in the household - cats, dogs, rabbits and ferrets. Philip is a keen horse rider and enters competitions and the children go to these events to support him.

Family Five

Rachael and Mark live on a farm in a small rural hamlet. They have been fostering for six years. They have one child but were not able to have any more. Rachael a former countryside warden, now dedicates herself full time to fostering and child care, as she also looks after her nephews. Mark works as a technician for an electronics company in a nearby small town. They have regular contact with Mark's mother and Rachael's siblings. They have one child placed with them, Chris. Both are interested in the countryside and in outward bound activities. Their birth child still lives with them and is training to become a social care professional.

Family Six

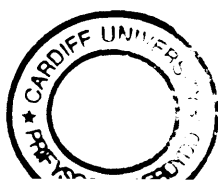
Steve and Sue have been fostering for 19 years. They initially thought they could not have children of their own and started fostering because they very much wanted to be parents. They now have three birth children and one foster child placed with them, Carl. They fostered throughout the time that their birth children were babies. They live in a semi-detached home on the edge of a village. Sue works as an administrator for the local hospital; Steve was a carpenter but now dedicates himself fully to fostering. Some of Steve's family live locally and a sister plays a large supporting role. Sport features widely as an interest for the family and all of the children pursue sporting interests.

Family Seven

Judith is a single foster carer. She has been a carer for some 16 years, since her husband died. She initially started caring jointly with her daughter. Judith lives in a local authority housing estate. The house is well maintained and ordered. Her daughter works in social work. Judith's son lives at home for part of the week and supports his mother with fostering. Judith looks after her daughter's dog each day while she goes to work. Judith is a strong advocate for the children in her care. She has one foster child placed with her, Suxie. The local children all play out in the street and the foster child is well integrated into the community. Judith presents as a strong character with a sense of humour.

Family Eight

Hazel and Josh live in a rural setting in a terraced house where they have lived for thirty years and are integrated into the local community. They have fostered for four years. Josh works in a machine plant and Hazel used to work in social care. She found the hours long and anti-social and so fostered in order to better meet the needs of her own family. They have four birth children, all of whom have left home. Hazel is a childminder for her granddaughter as well as other local children. She has two foster children placed with her. They have regular contact with all of their birth children. They are about to become grand parents and are excited at the prospect. Hazel sees education as important and has strongly encouraged Callum, one of the foster children, to pursue his studies. Family life is very important for Josh and



Hazel. Sport is a major interest for the males in the family and both male foster children are also interested in a range of sporting activities. The two foster children also regularly socialise together.

Family Nine

Kerry and Mervyn have fostered for four years. They live in a local authority home on a large housing estate. Kerry also works part-time, in a local adult residential facility. Mervyn is unable to work, after an accident in heavy industry. The couple have two sons, one of whom is living at home. The couple also do much of the child care for their grand daughter. Two foster children had just moved out of the placement so they had no child placed with them at the point of interview. Mervyn is very interested in DIY and gardening. The couple have a small excitable dog. Many of the foster children that they have looked after previously return to visit on a regular, sometimes daily basis and in this sense they have an open door approach to fostering.

Family Ten

Julie is a single carer. She has been fostering for 17 years and she was fostering when her own children were young. She lives in local authority housing, on the outskirts of a small town. Julie has three birth children, one of whom still lives at home. Julie gets up at 5am every day to get her daughter up in time to go off to work. Julie also works as a 'dinner lady' in the local school. Julie has two foster children placed with her Lily and Jade. Julie is well integrated in to the local community and has lived in the same house for 20 years. She has two cats. Julie looks after her grandchildren regularly and was looking after a small baby on the day of the interview. A friend and neighbour had suggested to Julie that she take up fostering. Julie cannot afford to go on holiday or undertake many social pursuits and trips. Walking to town is one of the main activities for the family.

Sample characteristics

Whilst this small qualitative exploration of ten families claims no representative status, it is nevertheless important to identify where there may be fruitful comparison and continuity with other studies, in order to suggest some typicality of

features and functions for the sample. This may then allow the data and analysis some additional validity and authority.

Age of carers

The average age of the carers was relatively old as can be seen from the following table:

Table 4:2 Age of carers

Gender	Average age of carers
Female carers	49.9
Male carers	50.5
Overall average age of carers	50.2

Given that these carers, whose average age is 50, are deemed by their foster care agencies to be successful, then this finding seems to resonate with the work of Kelly (1995) who found that most foster mothers of failed placements tended to be younger (mostly under 40 years of age). Similarly, the earlier findings of Berridge and Cleaver (1987) found a connection between age of the carer and stability of placement. By contrast, Sinclair *et al.* (2005a) found that the older the carer the more likely the placement was to disrupt albeit this was because older carers tended to have older often challenging children placed with them and when age of children was taken into account, the association disappeared (2005a:181). Sinclair *et al* also found that 'lone carers were somewhat more likely to experience a disruption but not significantly so' (2005a:182).

Age of children/presence of birth children

The youngest birth child in the families is aged 13, although Family One has an adopted child of nine years of age, who came to them via fostering. The birth children in this study are generally all older than the fostered children by between two and five years, with the exception of Family One where both the birth and the foster child are the same age and the adopted child is younger than the foster child by four years. The presence of birth children near to the age of the foster children

has been cast as a factor increasing the likelihood of placement breakdown (Parker 1966; Berridge and Cleaver 1987; Quinton *et al.* 1998). Sinclair *et al.* (2005a) found that overall where there were birth children, the placement was more likely to disrupt. Sinclair *et al.* also found that on average the children in placement were two years younger than the birth children in the family. It may well be that it is easier for birth children to adapt to a younger foster child than one older, and whose behaviour the families have not had experience of dealing with. It is possible that foster carers feel that there is less likelihood of foster children having a detrimental influence on an older birth child, although this was not explicitly said during interview. Interestingly, in Sinclair *et al.* (2005a) the more children living in a family the less likely a placement was to break down, suggesting that children could be mutually supportive and beneficial for each other. In this study, foster children who were living with other foster children were generally close in age. It has been argued that this promotes resilience of children in foster care; the ability of a young person to build and sustain relationships with their peers is a useful barometer of emotional health (Schaffer 1996). While the average age of the young people in placement was 13 years; there was an 18 year old, two 16 year olds and two 15 year olds. It has been found that the older the children are at placement the more likely it is to fail (Berridge and Cleaver 1987; Sinclair *et al.* 2005a) possibly because the children may have experienced more disruption and numerous separations and failed 'reunions' with their birth families. In this study it was the longevity and 'indefinite' nature of most of the placements that demonstrated their success and will be examined more closely in Chapter Nine.

Ethnicity

It is interesting that whilst all of the adult carers were white English-speaking (as were the birth children), six of the foster children were black, minority ethnic children. This was not commented on by any of the foster carers, birth children or foster children. A study of twenty birth children by Spears and Cross (2003) noted that only once was ethnicity mentioned by respondents. There is a general assumption that children should be placed with foster families of the same ethnic origin (Small 1991). A survey of Welsh local authorities (Perez-del-Aguila *et al.* 2003) noted that several areas in Wales with small minority ethnic communities

were unable to offer suitable matching for children from such communities. This was considered particularly evident in a small number of Welsh authorities where there had been an unanticipated demand in respect of children who were unaccompanied asylum seekers. Perez-del-Aguila *et al.* (2003) also noted that several authorities reported difficulties in recruiting Welsh speaking carers. Thoburn *et al.* (2000) found that disruption rates did not differ for non white children placed with white carers, but nevertheless concluded that children should be placed with carers who can meet their needs and who are of a similar cultural and ethnic background. The need to ensure that social workers and other members of the social care workforce receive support and training in order to better cater for the needs of foster children from black and minority backgrounds, in terms of language and culture is clearly articulated in government policy (DfES 2007:7.23).

Class

Class has long been a sociological preoccupation but less so in social work. Recent approaches to the topic rely on a more nuanced perspective of social class as dynamic, symbolic and culturally produced (Gillies 2007:25). Whilst this study sought to avoid the diversions of a 'classing gaze' (Finch 1993), and while class was not discussed with or referred to by any of the families, it nevertheless seemed from observations that six of the families in this study could be broadly described as 'working class' by dint of housing, locality and educational background. Only three of the ten families had a member in skilled employment outside of the home. According to the postal questionnaires they completed only two carers had professional qualifications, the highest qualification thereafter were GCSE/O-level followed by an NVQ. Research in Wales by Collis and Butler (2003) found that 34% of foster carers had no qualifications, 30% had GCSEs, those with A-levels was 21% and degrees 9%. They concluded that the educational profile of newly qualified foster carers had not changed significantly over the past 20 years.

Research has shown that cultural continuity is an aim of fostering services (Thoburn 2000 *et al.*) and that matching with regard to culture and class may add another layer of 'glue' to the harmonization and success of a foster placement.

Contact with the birth parents may be easier and less threatening for both parties if they have similar cultural backgrounds. Thus, for example, one carer in this study when discussing relationships with birth parents stated that she did not feel uncomfortable or intimidated by their behaviour because she came from a similar place:

We always manage to do that (get on with birth parents) , but there was one (birth parent) who threatened me over a school playground, a real nice boy (foster child), and they, the terminology is she 'kicked off' and I 'kicked off', she wasn't nice.....You know I've been brought up here on this (council) estate in Trebarron, I've always been able to fend for myself and so can the children, so when she faced me up and I faced her, I had no qualms at all and I said to her there and then, because she raised her hand to me, you lay one finger on me, I said to her, if that hand lands, you forget about that (this placement) and she didn't and there was never a problem after that.
(Sally, foster carer, family three)

If there is some matching of cultural background as well as agreement around approaches to child rearing, especially as the bringing up of children can be seen as deeply class driven (Gillies 2007), this may well help promote stability. It was not possible in this study to assess whether there had been any cultural matching, as relevant social workers were not interviewed. However given the pressure on resources and the limited foster placements available and particularly in Wales where recent estimates of shortfall are 750 placements (National Fostering Network 2007), it is unlikely that cultural matching would be high on the placement planning agenda.

Length of time as foster carers

All of the carers had been foster carers for at least one year and had at least one successful foster placement (i.e. a placement that did not disrupt or break down). The social workers, carers, birth children and the young people in placement all described the current arrangements as successful (this is similar to the criteria used by Sinclair *et al.* 2005). The average length of time as a carer was nine and a half

years. This was less than the national average of 20 years (Wilson *et al.* 2007). This may perhaps be accounted for by the fact that foster carers from the independent fostering agency made up 50% of my sample. Independent agencies would appear to be more active and more successful recruiters of new foster carers than local authorities (Sellick 2002), because of the range of financial and support inducements that they are able to offer. Levels of support available to foster carers will be discussed later in this chapter.

Family structure and diversity

‘The white, nuclear ideal is increasingly irreconcilable with observable evidence of diversity; this has led to the questioning of orthodox representations of family life’ (Chambers 2001:60). Erera (2002) too, contests the hegemony of the traditional nuclear family and highlights the diversity in family structures today. In general, large scale studies have suggested that foster families are more ‘conventional’ than other families in the general population; foster families are more likely to have two parents, relationships tend to be of lengthy duration averaging 20 years together and the average number of children in a foster care household is three, which is a little above the average for the UK (Wilson *et al.* 2007). In this thesis however we focus on each family as a distinct unit and do not seek to conceptualise them as variants of contemporary family life.

It can be seen from Table 4:1 that the families in this study are configured in diverse ways, including reconstituted families (Family One with an adopted child, and Family Four with step children). Family Two have no biological birth children, whilst Family Seven and Family Ten are single parent families. Nevertheless all are described under the broad and ever expanding heading of ‘*families*’. Clearly what constitutes a family cannot be assumed or taken for granted. There are many new configurations within living arrangements (Williams 2004) but a new vocabulary is not yet emerging to address these new relationships and the term ‘family’ is being used to cover all (Featherstone 2004).

Erera highlights a strengths perspective in understanding family diversity and considers ‘diverse families from a strengths perspective, acknowledging their

capacities, competence and resilience' (2002:17). Thus within Family Four, the female carer noted how coming into a reconstituted family, where her partner and his two sons already resided, allowed her to better understand the needs of an outsider within the family. She felt better placed to help foster children to assimilate, as she too had been through a similar process.

It is the setting of the family household that is one of the major influences upon the developing child, albeit that the temporal assumptions (Sinclair *et al.* 2005a) may be very different for a foster child to that of the birth child in a household:

The most important and probably the most influential setting for childhood during school age years is the home environment, whether that child is with the child's natural or adoptive parent(s), reconstituted families, carers, extended family members, foster parents, or within the supervision of the state. (Fisher and DeBell 2007: 59)

Thus the site of the family continues to be promoted as the optimal environment in which a child can develop and grow. The aim of this research is to look at what it is about families that promotes and facilitates the development of the foster children placed with them. Morgan's (1996) observation that family (however it may be constituted) can be understood as something people 'do', rather than something people are, enables us to take a broad and dynamic understanding of family processes. Similarly Smart and Silva (1999) argue that what a family 'is' appears to be intrinsically related to what a family 'does'. Thus it is pertinent to ask what it is that these families *do* that makes them work functionally to benefit the foster child. It is the practices of fostering that are explored in detail in subsequent chapters. First, however, we continue to examine the characteristics of the families in regard to gender and employment.

Gender and Employment

'Men and women's experience in families differ considerably' (Erera 2002:16). Chapman (2004:32) in focusing on what families 'do' neatly presents a delineation of family activities outlining details of such activities as laundry, cooking gardening

etc as a 'discrete snapshot of contemporary practices'. Chapman exposes our gendered ideological assumptions that underpin conventional notions of what constitutes a bread winner and homemaker and how these definitions are closely linked to perceptions of femininity and masculinity within families (2004:20). He succinctly observes that domestic practices are subject to constant renegotiation by women and men as society changes and are therefore fluid. Whilst social institutions impact on domestic practices, the reverse is also the case as men and women make new demands on each other and on society. This reflects a sociological shift, as identified by Chapman, that views the home as a key social institution which both responds to and produces social change. The foster families within this study reflect these recent social changes and Table 4:3 indicates the employment (paid) status of the carers.

Table 4:3 Employment status of carers

	Male working outside the home	Female working outside the home	All available carers at home
Family One			X
Family Two		X	
Family Three			X
Family Four	X		
Family Five	X		
Family Six		X	
Family Seven *			X
Family Eight	X		
Family Nine		X	
Family Ten *		X	

* single carer- female

Table 4:3 shows that there are five families where the male carer does not have paid work outside of the home; four of the families where the female carer does work outside the home and in three of those the male carer takes primary responsibility for fostering (in Family Ten the single female carer works for two hours per day

during the school term). This does not conform wholly to the 'conventional notions of what constitutes a bread winner and homemaker and how these definitions are closely linked to perceptions of femininity and masculinity' as referred to by Chapman (2004: 20). This was interesting given that the image of foster care is one of a 'traditional' family (Wilson *et al.* 2007) where the female stays at home enacting the caring role and the male goes out to work. Twelve per cent of male carers in Wilson *et al.*'s study were full time carers; whilst five of the eight male carers in this study were full time carers. In Wilson *et al.*'s study, contact with officialdom however tended to be the preserve of female partners and in many of the homes women assumed responsibility for contact with the child's social worker. Briefly men gave responsibility for negotiation with regard to matters of fostering to their partners but this was not evident within this study.

In relation to household chores, Wilson *et al.* (2007) describe a clear, traditional gendered division of labour. In terms of direct involvement with children, however, 20 out of 31 tasks were judged as equally shared and the men did much of the activity and sports aligned tasks. Their study evidences the way the male role is central to fostering. In this study, where there were male and female carers and neither worked outside the home then the fostering/parenting tasks appeared to be shared equally. Many of the respondents talked about the male carers doing the cooking and cleaning. The male carer in Family One appeared to do most of the cooking, for example. However where one of the carers was working outside of the home, the other carer took on the responsibility for the majority of the caring/parenting, and this was the case regardless of gender. When the carers working outside of the home returned, they helped out with caring and household tasks in order to assist and reduce the demands on their partners. The following brief extract from an interview with Kerry and Mervyn exemplifies this point. Kerry works away from home and stays away overnight for two days a week:

When I'm in work Mervyn will cook for the boys, he'll wash up the dishes, he'll peg washing out on the line and bring them in and he'll fold them and put them in the washing basket and he takes the boys where they got to go.
(Kerry, foster carer, family nine)

Contact and activity with the foster children was undertaken by both partners in all of the families. In Families Four, Five and Eight, where the male partners were working outside the home, when they returned they generally took on a role of being with or undertaking an activity with the foster children in the evening. Each of these families remarked upon this without being prompted, referring to dog walking, horse racing and sports as examples of shared activities between the male foster carers and the foster children. Notably, this was predominantly where there were only male young people in placement. In Family Seven, Kevin the birth child, who only lived at the home part of the week, describes himself as having more of a role with male foster children than female children:

I try and step back a bit now more than anything because I'm not there (all week). Cos I found when I'm there with the boys they'll want me to go here, there and everywhere I did at the beginning, not so much playing football, having a chat with them, now my mother always has girls, I don't know why. (Kevin, birth child, family seven).

Kevin sees his current role as more of a 'big brother, fixing the play station and that'. It would seem that even when the male is working full time, he still plays an important role in the fostering process as noted elsewhere (Gilligan 2000; Newstone 2000; Wilson *et al.* 2007). The male role in fostering will be discussed further in Chapter Five. Having considered some of the demographic data and key family characteristics, the chapter now concludes with some further conceptual framing of the families by way of contextual preparation for the chapters that follow, and which will address the inner dynamics in much more detail than in this scene setting discussion.

Displaying families

We can see from the above that families can no longer be easily defined by boundaries as 'there is a chain of relationships with different families across households' (Finch 2007:69). Finch (2007) drawing on the work of Morgan (1996) comments that family is a facet of social life, not an institution, it represents a

quality not a thing. Practices are fragments of daily life, which are part of the normal taken for granted existence of families. Their significance derives from their location in wider systems of meaning (Morgan 1996: 190). For the foster child the normal, taken for granted fragments have to be learnt and adhered to.

Finch (2007) argues that families display meanings through their actions. Display is the process by which individuals convey to each other and to a range of audiences that certain of their activities constitute 'doing' family things. The fluidity of family life means that what we consider to be our family will change in the course of our life time (Williams 2004). Thus there is a need to display what it is now. This is certainly true for foster families which are constantly mutating and are essentially temporary arrangements. For large sections of the population, 'household' cannot adequately define family. Family shape and character needs to be described specifically, rather than by default. The household in which one lives is of course not synonymous with 'my' family (Smart 2007). This was evident for foster children from their drawings of their individual networks or eco-maps (Department of Health 1988; Parker and Bradley 2003), which are discussed in Chapter Ten. Family entails active demonstration, it is not simply a matter of who belongs and who does not. The emphasis on families as constituted by practice, identities and relationships means that the fluidity of the family is not only about shifting membership but about the continually evolving character of relationships. Thus this research can only ever reflect a snap-shot in time. The question should not be asked 'who is my family', but 'which of my relationships has the character of a family relationship'. This more revealing notion allows us to understand more readily the life of the foster family. There will be times when the need to display 'family' will be greater and 'being a foster family', may be one of those times.

Where there are unrelated people in households this may broaden or complicate the definition of family. Yet Williams (2004) suggests that rather than driving families apart, social change has made people work harder to sustain the commitments that were important to them. For activities to be understood as family practices they need to be linked to wider systems of meaning. Display in this sense is different from

performance (as in Goffman 1959), as in display the actor is both the actor and the audience.

There are many tools of display, for example, photographs on walls and keepsakes which are all physical symbols of relationships. Narratives too help us to communicate the character of 'our' family. Stories about families are told and re-told to refresh and re-inforce shared understanding. This often occurred in the process of interviewing the family. For example, in interviewing Family Five, much time was spent discussing a child that had been previously fostered and who had become part of the family narrative:

He just made you laugh. He was such a ray of sunshine although very violent. We still miss him..... (Sara, birth child)

In this family, the young man in question had taken on an almost mythical status in the family history, demonstrating to me the outsider, the trials and tribulations of the fostering experience. Many of the carers showed me photographs of children who had previously been placed with them, pointing out all manner of attributes. The very process of interviewing the families allowed and indeed required them to display themselves to the researcher, and in turn they are displayed to the reader, as such, in this double hermeneutic process. Displaying 'family' refers not only to verbal but to visual phenomena and shared activities such as the communal partaking of food, as discussed in Chapter Seven. Family meals and eating out allow family to display itself to a public audience. Of course not everything is up for display, much takes place behind closed doors, for example, going to bed. Interestingly even this type of activity was partially revealed through the audio taped diaries:

I went back downstairs and watched a bit more of telly. My Dad called me up and I jumped into bed. Now I am saying goodnight to my Mum and Dad. (Mum comes in and says goodnight, this can be heard on tape). (Carla, adopted child, family one)

Thus Finch (2007) concludes that family, like justice, has to be seen to be done. Displaying family confirms the qualitative character of a given relationship; the message conveyed is that the relationship 'works'. Another example of this is the way in which the majority of families in this study go on holiday with the foster children and how clothes are bought specifically for this purpose. On holiday in particular, outsiders are viewing the 'display' of families and thus clothing and presentation will be a vital aspect of this:

She has had £550 and odd pounds (of clothing) from the Keto catalogue. Until it does come she won't believe it. It's clothes for our trip abroad.
(Katie, adult birth child, family seven)

In the families in this study many of the foster relationships were perceived to 'work' by respondents, for example, one carer took great pride in her claim that outside of the family no-one could identify which were the foster children, as they were actively displayed as her own:

People outside, right, who know that we foster but don't know how many I got or who I got..... they say, 'Oh you fostered' because we haven't seen them for ten years, (and I reply) 'Oh that's right' (and they say) 'Oh how many have you got', ' well we got three', 'Oh any of them with you' and we say, 'yeah' and that is what I find and down the caravan those who don't know, lots of them think its Mike (birth child) who's seventeen and do you know what, that's Mike, he wears a hoody up over his head with a baseball cap on and walks like this, and people think it's him and they think it's Serena (grand-daughter) quite often, or think it's the two boys they never ever get it right. People who don't know us very well but know we foster, never ever once have got it right. (Sally, foster carer, family three)

Not only are the foster children well assimilated but seemingly indiscernible, as are the household as a foster family, in this sense they enact and display 'family' well. Sally went on to comment that one young child visiting the household only knew that she was fostering because of the presence of a computer:

One of our friend's little boy, he's nine, and they've fostered him and he had to have one of these computers, and they had the computer, I mean we see each other every day, (and the little boy asked) why have we got a computer because you don't foster. (Sally, foster carer, family three)

Sally continues later in the interview to say that she does not readily encourage the foster children to disclose that they are fostered; she feels that this is personal information and they should not share this unless they know people well. She talks about one of the foster children utilising her status as fostered to elicit sympathy and interest in her from people she has only recently met:

On Friday when I went to dance, the mother was there, ..so she came up to me, she said, 'Oh I didn't realise you fostered'. Right, now I try to encourage the children not to discuss outside the house, in private people's, in people's houses that they're fostered and (about) their private life, because it's not for everyone else to (know); that's private, you know, that's for them. If they choose to get the reaction, Candice at times can use the fostering, her being fostered as a sort of (unclear) thing, because she would quite like, enjoys somebody to feel sorry for her, she loves to be the centre of attention.

Conclusion

We conclude this chapter with Sally's comments above on privacy and the family as flexible, permeable and with clear displays of membership, but with identity more carefully managed. Such an approach to family was by no means uniform across the sample and Sally's household is noted here to make the broader point that behind the demographic features of carers, children, types of placements and outcomes, exists the more embodied and emotional world of people and relationships in some testing circumstances. The foster family has to incorporate newcomers, demonstrate unity and absorb difference. This calls forth styles of parenting that enact a meaningful sense of family group, while recognizing the partial and often needful membership of the foster child whose status and tenure are inevitably equivocal.

The chapter that follows explores these and other parenting and family challenges in more detail.

Chapter Five

Family Practices and Parenting Style: warmth and reciprocity

Introduction

This chapter will consider the family practices and style of parenting that the carers in this study adopted. The chapter starts with a brief reprise of key literature on parenting. Thereafter the chapter looks at issues of loss for the foster children, stabilisation of children and at integration into the foster families. The chapter considers the notion of rules within families and how these are produced and mediated by members. The chapter stresses the point that fostering is not an asymmetrical demonstration of intimate care by a single party (Gabb 2008). Lipscombe *et al.* (2004) highlight this point, as they found that whilst parenting skills were important, these were based on two-way interactions, known as bi-directionality; the carers influenced the foster child and vice versa. The chapter concludes by looking at the support networks available to these families, taking a systems perspective.

There are often populist and stereotypical views of foster carers and their parenting capacities, and several of the carers in this study commented on this (Erera 2002: 31). Thus it may be that foster care training and parental advice are areas that are not given enough attention within the fostering dynamic. Much has been written on parenting and we draw selectively on this research in order to explore foster care practices and consider if these share similarity or reflect a style that is distinctive in the fostering role.

Fisher and DeBell (2007), drawing on Baumrind (1973) identified styles of parenting, deriving from parental behaviours along four dimensions:

- warmth and responsiveness or nurturance, often reflected in the emotional tone of the family
- parental expectations of a child
- clarity and consistency of rules
- style and level of communication between parent and child.

Using these four dimensions they describe three specific combinations of these features and referred to them as parenting styles:

- the permissive style, which is high in nurturance, but low in parental expectation, control and communication
- the authoritarian style characterised as high in control and parental expectation, but low in nurturance and communication
- the authoritative role which is high in all four dimensions.

These dimensions are similar to typologies of parenting used by Brannen *et al.* (1994) in their study of family relations and by Flynn *et al* (2004) in their study of resilience. Where children have experienced trauma, they may need high levels of nurturance and understanding. Foster carers need to be able to facilitate the development of resilience within the children placed with them, they also need to be resilient themselves. Carers often have allegations made about them by children in placement (Sinclair *et al.* 2004) and they need to be able to cope with such allegations and not let it impede their parenting in the future. Hill *et al.* (2007:11) , in their meta-analysis of research in parenting and resilience note that warmth and responsiveness, providing adequate and consistent role models, harmony between parents, spending time with children, promoting constructive use of leisure, offering consistent guidance, structure and rules during adolescence, were parental strategies that helped promote resilience in children and families. Successful foster carers need to have effective parenting skills. Some of the dimensions, outlined by Fisher and DeBell, were quickly detected in the data in this study, specifically those relating to: warmth and responsiveness, rules, consistency and styles of communication. One carer gave an example of a situation where they had to be consistent, but not overly harsh in their parenting:

I'm always very careful what to say. Like the young kids they're all having these bikes today, you know, they know they're having them right, and I went out last night and they played up (for Chris) when I wasn't there, so it's bed tonight at seven o'clock and there's no television, okay, you play up, there's

no television. So they said this morning 'we are not having our bikes' I said dad said be in bed at seven and there's no television tonight.....so where does bikes come into it, where have you got that idea about the bikes? Well I said did your dad say that you can't have a bike, no? So you can still have a bike but you can't have television and in your bed at seven...to say there will be no bikes tomorrow and that's harsh, that's a hard punch. You know, okay, although they played up, that's harsh, so you have to be very careful about how you say it. (Sally, foster carer, family three)

Sally ensures that she is consistent with her partner Chris and asserts the same rules without punishing harshly or dashing hopes and expectations.

Lipscombe *et al.* (2004) noted from a longitudinal study of 68 adolescents in foster care, that whilst parenting approach is important, parenting skills develop within the context of two-way interactions between carers and young people. They highlight the necessity of some acceptable level of reciprocity between carers and young people. The point at which a young person's behaviour becomes intolerable varies for different families (Hodges and Tizard 1989 cited in O'Connor and Scott 2007), and is dependent on a variety of factors, including any negative impact on the birth children. O'Connor and Scott (2007:25) in their meta-analysis of parenting styles noted that:

Empirical data suggest that foster families.....do experience significant parent-child relationship difficulties. Research groups in the UK have found that foster parent-child relationships are at risk in terms of increased conflict and lower levels of positive engagement.

Cameron and Maginn (2007) built on the work of Baumrind (1991) to argue that parenting needs to include both warmth and control strategies. They observe that children in the care system have often experienced rejection and these authors have developed a 'Parental Acceptance Theory', which holds that all children need a specific form of positive response, that is, parental acceptance which involves 'the warmth, affection, care, comfort etc. that children can experience from their parents

and other care givers’(2007:6). It is this aspect of warmth and acceptance that seems to be one of the pivotal factors in fostering and was often remarked upon in interviews with carers. Cameron and Maginn (2007:8) conclude that it is important to work with foster carers and parents in two ways:

- helping parents and other caregivers to communicate parental acceptance to children
- helping parents to find culturally acceptable ways to communicate warmth and affection and to avoid behaviours that indicate parental coldness and a lack of affection.

Authoritative parents manage the balance between appropriate control, responsiveness and care. While socially responsive and mature behaviour is expected and encouraged, authoritative parents are also warm and supportive. Cameron and Maginn (2008) also suggest that foster carers are likely to need above average, highly skilled parenting capacities. O’Connor and Scott (2007) in their meta-analyses conclude similarly with a key finding being that ‘certain dimensions of the parent-child relationship appear important to children of almost any age, notably warmth and support’ (2007:29).

Cameron and McGinn (2007) usefully provide a framework for parenting which they refer to as the ‘Seven Pillars of Parenting’ and they include examples of suggested good practice by foster carers, for each of these domains. This framework is reproduced in Table 5.1 and will be deployed in this chapter as a tool to help identify features of fostering practice that may help delineate those elements of parenting and care that are likely to promote a successful placement in terms of affect and stability.

Table 5:1 Seven pillars of parenting (Cameron and Maginn 2007:12)

Primary care and protection	Secure attachment	Positive self perception	Emotional competence	Self-management skills	Resilience	A sense of belonging

Cameron and Maginn include examples cited by carers when asked how they would respond to these themes. The suggested examples from carers, although too

numerous to include, pertain closely to some of the findings in this study, for example, personalised bedroom space, physical comfort and hugging, appearance and resilience as we discuss in later chapters. We now move on to a much more detailed examination of parenting from the carers' perspective.

Empathy

The promotion of an empathetic understanding in children was mentioned by most carers and has been considered within the literature (Cairns 2004). Many carers talked about inculcating feelings of empathy in foster children and the respondent in Family Five gave a vivid account of how she had tried unsuccessfully to develop this capacity in a former fostered young person, and how she has been more successful with the young person currently with the family:

*He did attempt to kill a boy at school. He pulled his head back and was pulling his face down towards the floor.... And the school rang me in quite a state because the little boy had been taken in an ambulance from school; and when he came home from school he was quite sort of shaken but not, not sorry at all about what he'd done and I said, 'well what if the little boy is, is dead', I said, 'you know, he won't ever come back, just because you thought that was a good thing to do at the time'. 'At least he'll be dead', he said. There was nothing, no remorse, no nothing and it's really awful to see and even the next morning there was nothing...
(Rachael, foster carer, family five).*

This placement had eventually broken down. Rachael went on to describe how she tried to inculcate empathy in Chris, the child now placed with her:

Chris (foster child) knows he's not allowed to play ball in the back garden, now while my flowers are out. He knows he's not allowed to play ball in the garden because of my flowers. I mean, if I don't have something to keep me sane, I mean, my flowers will keep me sane. so anyway he was out there playing ball. Now he knows he's not allowed to. He saw me looking through the window and he still didn't stop.....So when he came in, I said, 'can I

have the ball a minute Chris please'. He's got some sunflowers he's growing in a pot. So I gave Mark (husband) the ball and I said, 'Mark will you take this ball outside and hit it as hard as you can on his sunflowers please' and Mark said, 'what? I'm not going to do that', 'but why won't you do it', I said, 'it really needs doing'. 'No' he said, 'they are Chris' sunflowers and I would never do anything as mean as that'. It's as if we'd rehearsed it you know, because he didn't know, 'what on earth are you playing at' he (Mark) said to me...

The carer felt that this dialogue conveyed the appropriate message to the young person and got him to consider how it might feel if it happened to him. Likewise, the carer in Family One discussed empathy at length, in terms of a child that they had initially fostered and later adopted, who was able to empathise with the newer foster children who came into the family. This was a lengthy process but was seen as a benchmark for success once the adopted child could empathise with others. Inculcating feelings of empathy is particularly challenging with young people who have experienced much disruption and loss in their lives. The seven pillars of parenting model was published after much of the analysis in this thesis had been completed; yet it echoes and re-iterates many similar findings. We will now move on to aspects of loss, as this was a significant challenge for parenting in foster care.

Loss

Children in the care system will have experienced many losses (temporary and permanent), including some of the following: the loss of their birth parents and extended family, the loss of siblings, the repeated loss of foster carers, the loss of a happy childhood and of an unbroken education. Cameron and Maginn (2007) outline a phased recovery model for those experiencing major disrupted life transitions and post traumatic stress comprising: shock and numbness, guilt, anger, resentment and fear, disengagement, apathy, the beginning of hope and a gradual move towards new directions. This framework is similar to traditional bereavement models. Thus it is important to consider how foster families assist children to move through a sense of loss and type of 'grieving' process that often accompanies going into care. Carers could support this grieving process and cognitive reconstruction by

providing positive experiences, which broaden and build a child's coping strategies and by highlighting any successes that help enhance the child's perception of him/herself. This may be done in many practical ways, for example, finding the strengths and interests of the child and channelling these through activities (this is elaborated and developed further in Chapter Ten). One carer comments on her approach to this, both now and in previous social care employment:

I found whatever teenager I had, doesn't matter what their home problem was, whatever their problem...every single teenager had something, a brilliant artist, a brilliant dancer or maybe a fantastic cook. Or they were fantastic doing their make up or whatever... Everybody had something good and I found that within them. It doesn't matter how rotten all the rest of it was, they always had something and it was magical to me and I tried to find it in all of them and once I found what it was, we worked on it.
(Josie, foster carer, family four)

It is vital that foster carers are able to view disruptive and problematic behaviour within a bigger picture of the child in their care, responding to the difficult situations they previously experienced. Hill-Tout *et al.* (2001) and Pithouse *et al.* (2002) in their study on the training of foster carers in challenging behaviour, concluded similarly that the techniques applied did not necessarily have a huge impact on the behaviour of the child in foster care. However, carers felt better able to manage the behaviour because they were able to better understand it in context of the previous life events for the child.

Caim's model (2002:122) of trauma, bereavement and loss is also helpful in grasping the emotional context in fostering. She suggests that after major life disruptions, young people tend to follow the three stage process of stabilisation-integration-adaptation. Thus helping the child to settle in a regular routine, and helping a child to understand and accept the past should in turn allow the child to establish a connectedness with the current family and support the child's attempts to adapt to their new environment. This can assist the child to begin attaching

themselves to the foster family; this process was recognised by several carers and Rachael makes the point thus:

He'll sit and stare at you and he'll come and he'll want a cuddle but it's a normal sort of cuddle. (He) sits like (unclear) because he's not, never been used to having any but he is starting to attach but we've had him for a year now. (Rachael foster carer, family five)

Understanding the process of trauma and stress is essential for carers, and it may be essential knowledge too for birth children in families who may be faced with a variety of potentially hurtful rebuffs to their well intentioned behaviour. Thus Cameron and Maginn (2007:17) insist that:

To tackle the twin challenges of providing authentic warmth in their encounters with difficult and rejecting children and also enabling a child to move through the bereavement and loss process, residential and foster carers require a combination of personal skills and informed professional expertise.

All the carers had experience of the emotional turmoil of young people and recognised the challenges of loss and stabilisation. Sally, a carer in family three makes the point in some detail:

When she came she had massive, huge bags under eyes, sunk, her eyes just sunk and there was no flicker of emotion what-so-ever. There was no love. We'd had her about ten weeks, there'd been no tears but no laughter, there been nothing, absolutely nothing and she's out the back playing and she tripped over a brush handle that was down, she didn't hurt herself, she did just graze her knee, a fall she had, and she grazed and she cried. So I sort of went close to her and was very careful and all of a sudden she cried buckets, buckets and buckets for ages and ages, all over the scratch on her knee that really, really hurt and from that day on things started to, things started to improve, it got better and better and laughter joined crying and now its laughing more than crying. (Sally, foster carer, family three)

We can see how Sally allowed the young person to begin to demonstrate emotion. The same carer describes a similar situation with another child who came to her and how they managed the initial distress and challenging behaviour:

She would scream, high pitch scream or run up and down the stairs..... because that's all she would do and she would do really silly, daft things, like punch the boys and they weren't used to it and I said she'll have some reactions and people were shocked. I said to the children carry on with what we're doing, don't give her a reaction and like I said, it was six weeks on a trot this went on (before the child became more settled).

Sally went on to describe an event in a shop when other people were watching the child's behaviour and possibly making judgements about it. Carers and their families need to be patient and informed in their understanding of life transitions and traumatic stress, and adept in their interactions with young people. The carers needed to be very resilient themselves to deal with such challenging circumstances. In a similar vein, another carer, Hazel talked about a situation where Callum absconded from the placement, as he had done in all previous placements, until eventually he settled:

He absconded twice I said 'it doesn't matter to me if you don't want to come back, but our door is open to you. It is your choice. We would like you to stay but if you feel you can't.... (Hazel, foster carer, family eight)

The carers had to be patient and reassuring in their dealings with the young people until the children could begin to come to terms with the change and loss in their lives. There are recent training resources for foster carers designed to help them work in contexts of post traumatic stress (Cairns and Fursland 2007). What is needed most of all, according to Cameron and Maginn, are well-trained and adaptive foster carers:

In a nutshell, the challenge for social work is to provide the quality of care and support that is found not just in the average family home, but also in the most functional of families. (2007:18)

The carers in this study had quite sophisticated understandings of the loss that the foster children had experienced and were able to be patient and accept difficult behaviour as a means of expression of the loss, rather than taking it personally. Much of this came from their experience of working in social care for many years, but was further enhanced by training received whilst foster caring.

Emotional impact on carers

The emotional impact of fostering on carers can sometimes be significant. Ironside (2004), a child psychotherapist, notes that it can sometimes seem like living in a provisional existence when carers are locked into an unhealthy relationship with a child, particularly where the child projects feelings and anger on to the carer. She notes that the caring task is a complex one, the carer needs to be close enough to the child to feel emotionally involved and yet distant enough not to be overwhelmed by the child's presentation. The carers need space and support to understand the nature of projection and find a way forward (2004:40). The carers in this study all spoke of how they managed the children's anger and how they sought ways to navigate a route through this by offering consistent ongoing warmth and acceptance, without being weighed down by the child's behaviour. Hazel, for example, spoke about how she responded to Callum after he had run away:

He returned (after running away) and he hadn't washed or anything; he had been up the mountains with his friends. I said 'did you have a good time?' I think he was expecting more than he got (i.e. some punishment). I said 'have a hot shower, look after yourself and go to bed because it looks as if you haven't slept for days'. (Hazel, foster carer, family eight)

It is difficult not to see these foster families as exceptional and functional, able to repeatedly offer authentic warmth, communicate acceptance, and be authoritative but also flexible in response to the needs of the child in placement. Female and male carers and birth children need to be able to function in this way in order to facilitate

stabilisation, integration and adaptation (Cairns 2002). One foster child in interview immediately pointed out this aspect of emotional warmth and discipline when asked what her foster carers were like:

(They are) Loving, close. There is like a bond between us all. But there is some discipline (unclear....) They enjoy being together. We all sit and talk things through...(Nadia, foster child, family two)

Nadia is able to pinpoint the balance of warmth and discipline within the home. This sense of positive affect permeated virtually all the interviews with carers and children. When asked how the foster family made her feel at home one young person said :

They comforted me like....they made me up like, like Greg and Liz's daughter. Yeah. I felt like their daughter. (Melonie, foster child, family one)

The emotional work of being a carer has its formulations in what, for some, was families straightforward moral code of giving acceptance. One carer when discussing the most important qualities that a foster carer should possess noted:

Plenty of love, being a normal person and putting those children's needs before anybody else's. (Judith, foster carer, family seven)

Such qualities were rarely discussed outside a common sense notion of relationships and affect that young people perceive gradually as they 'learn' the family and its intimacies over time. For example, Callum, in Family Eight talks about this enactment of love and warmth in which he now participates:

It's hard to explain. You can just feel when two people love each other. When people love each other you can feel that there is love around, the attitude and atmosphere is nice, mellow and calm. There is no friction. That is how I can tell there is a lot of love in the family. It is often shown at

Christmas time and birthdays and stuff, there is a lot of love shown, especially by Hazel and Josh (foster carers) to their grandchildren. They never miss a grandchild's birthday, not one child misses out. It is fantastic.

Data suggested that emotional warmth was demonstrated repeatedly and reference to it reverberated throughout the interviews with carers and young people. Emotional well-being and resilience are strengthened by the experience of being loved, and feeling loveable.

Having outlined the centrality of parenting skills and capacities particularly in relation to children who have experienced loss and distress the chapter now continues its exposition of parenting styles likely to help illuminate what works well in fostering. We return again to the model of an authoritative style of parenting as outlined by Fisher and DeBell (2007) and consider the aspect of rules.

Rules

The structures and routines of domestic life were sometimes formalised by carers thereby revealing something of the public world of fostering encroaching on the private sphere. For example, carers with independent agencies were directed to post the 'house rules' on the wall of the home; this was not however required of the local authority carers. Such explicit prescription is not usual within a family home. By contrast, Nutt (2006:59) observes that for foster families: 'their lives are circumscribed by rules, regulations and rights'. Family rules generally tend to be much more implicit and often only become realised or articulated when a newcomer enters the family and has to learn about the practices and expectations of that particular group. Foster families would seem to need much more explicit understandings around role, function and expectation than might be the case in many other families, as Nadia a foster child noted during interview:

Everyone, every week takes turn to set the table and clear away, like say if it was my turn I'd be doing it just before dinner and someone dries and someone washes up... Every Tuesday we have to empty our rooms.....Ian is really fussy about us being clean.. Carl goes in the bath first, then Mary gets

in, then I gets in; they are really strict about that.

(Nadia, foster child, family two)

Foster carers in their training are required to demonstrate the use of formal rules as a means of promoting clarity around conduct and responsibilities:

I did the rules for my NVQ but I also needed them with more children coming in. Level 3 require that you have rules and you put them up. The boys have them in the bedroom Steve is on his 3rd grounding now; he keeps playing truant (she hands me a copy of the rules).

(Hazel, foster carer, family eight)

This 'bureaucratisation' of the home did not appear to provoke any negative responses from carers. In circumstances where strangers are regularly coming in to the home explicit rules that can be easily learnt and adhered to, were viewed as helpful. Carers who talked about the rules being posted on the wall did not feel that this system was unhelpful. Indeed if authoritative caring is deemed a desirable style this may be a positive method of being clear and precise. None of the children interviewed in those families where rules were posted spoke negatively about their presence. When asked, carers said it was vital that the rules were operated consistently and by both carers. Sally describes the rules within her household:

They have to keep their own bedrooms tidy. They have to pick their washing up from the floor and put it in the laundry basket. If they go swimming on Saturday, they are told what time they have to be in. If they don't come in by that time, they don't go the following Saturday and they don't, no matter what they do in the week, no matter..., they do not go and I say to them, don't do that, so when we say it. (Sally, foster carer, family three)

Young people were typically well aware of the rules, even in households where they were not posted on the walls. One young person recollected rules as a prominent part of the information she received before moving in:

Like they had rules and that they have dinner and eat at certain times and that you had to go to bed (at a certain time) I can't remember them all...

She then went on to talk about the rules as she understands them now, having been in the family for some two years:

They got bedroom rules, bathroom rules, they got kitchen rules, table rules, furniture rules- don't jump on the furniture....Timing rules, time you have to go to bed, time you have to come in from playing out. If it gets dark about seven o'clock, in the summer it is later, if it's raining we don't get out at all. (Melonie, foster child, family one)

Interestingly, this young person was not recounting the above in some negative tone, but rather in a pleased way of being able to understand and interpret the range of operant rules of the household. Melonie thinks the rules are 'about right'. Notably the carer in this household cannot recount the household rules:

*When a kid comes into placement, **then** I'll be able to think about rules. Melonie is in our family environment, she is aware of the rules, and for the life of me, I know, (she can't remember) I mean I got them, I do have them, there are boundaries perhaps, not rules but boundaries. They know how far they can go. (Liz, foster carer, family one)*

Liz was unable to delineate the rules in the same way as the foster child who has recently had to learn and interpret the rules. For the carer, the rules are part of a more implicit background, invoked if required. The formalisation of rules suggests that young people in foster care are uniquely placed to access quickly the routine expectations of the foster family (Holland 2007), especially as some will have prior experience of foster family settings and rules. For example, Melonie (above) commented on other families she had lived in, and where she thought the rules had been too lax or have been too strict noting that some carers 'let children walk all over them'. Similarly, another young person was clear about the family rules but described how he had difficulty in complying with one particular rule:

Well there is a rule that Hazel has got with me, it's towels in the bathroom, when you have used them you are supposed to hang them straight back up on the hooks. I never hang them up, they are always on the floor and every day you'll hear Hazel ask me at least once a day 'Why aren't the towels on the hooks?' I'm starting to get better at it but I do let it slip and she is always on my back about it. (Callum, foster child, family nine)

In an authoritative parenting model the way in which the rules are regulated is also important. Warmth is an emotional factor, and one recognized by the foster children:

She's really nice and she'll never shout at you. Like other people, if you do something wrong they shout at you, but Julie (foster carer) never does. She is really kind as well. (Lilly, foster child, family ten)

Consistency of rules and their enforcement with warmth and care are more likely to produce compliance. In this regard the young people were observant about whether all in the household had to follow the same set of rules and whether they were applied consistently regardless of age and gender. One foster carer noted this very point in describing how a young person had questioned if an adult birth child would be subject to the same rules as herself :

She likes to see somebody else having a row which is great so like Friday, me and Suxie went to bed and Kevin's trainers were by there, she clocked it and said I hope he is having a row, cos if my trainers were under there, there would be a row here. So when he came down he had a row. You could see her face all lighting up, she has landed. She is really into family life. She is watching like any normal kid, they watch one another. (Judith, foster carer, family seven)

Not only do rules as formal requirements appear more pronounced in foster homes there are additionally particular assumptions made about these in foster care. For

example, some carers spoke about how they would insist that the young people in foster care take on more responsibility for self care and preparation for independent living (more so than their own children were expected to do at the same age). This was because they were keenly aware that the foster children would have to cope alone at a much earlier stage than their own children. Sally revealed something of this in interview, particularly the differences in expectation and how this created some discomfort:

but I found that very difficult because the children see, I haven't done it with my own, they never did their own washing, nothing....they didn't do their own ironing, I did it, all their ironing, they didn't do their own cooking. When I cook for everybody and we all eat it but they (foster children) do the dishes other times. (We have) a dishwasher, they do have to put their dishes in the sink and I mean, the children know that I never made them (now adult birth children) do it and it is very, very difficult..... I've been on a course for the last few days on preparing young people for independent living. (Sally, foster carer, family three)

The rules relating to prepare the children for an early exit and independence at a young age, tests the notion of a shared expectation for all of the children living in a household. Another carer, (Josie, family four) reflected on issues of consistency. She has a young person in placement who has been a young offender, and for various reasons now have a new rule that none of the young people in the household should give out their address and telephone number without the permission of the foster carer. Josie's comments suggest that the rule is contingent and time-limited. Josie indeed describes the need for a flexible approach whereby rules do not always endure and that the household will recognise the merit of the rule in question. She is clear that there cannot be too many rules as this would make them meaningless and the home alienating. Other carers reiterate this point:

If you put too many rules and regulations down and all that, you just scare them and you (push them) against a wall, you put that wall there. (Mervyn, foster carer, family nine)

The effective foster family must find ways to strike a balance to ensure that rules are not abundant or superfluous, that they are clear, not oppressive but are flexibly tailored to the needs of the foster children, and acceptable to the birth children. To also enforce these rules with warmth and consistency is a demanding and complex task. Moving away from the internal world of rules and compliance and drawing upon the notion of parental resilience, the chapter now considers the support networks that cradle and enable families to be resilient. As Hill *et al.* (2007: 38) note 'much family resilience work has tended to be adult-orientated and there is a need to consider children's contributions to parental resilience as well as vice versa'.

Networks of family support

Data from interviews, observation and diaries reinforced a clear and durable sense of collectivity, of a strong group identity within the family. Significantly, all of the families considered that fostering was not just the remit of adults but that fostering was a family undertaking, a 'family business' in which the contribution of birth children was paramount. Moreover, all the families were supported by their extended kinship and friendship networks. For example, one carer noted how her adult daughter is vital in supporting her:

Dee (daughter) is my back up if I need anything. She plays a big part. They are all police checked as back up. She got involved in it because I look after her children here and she knows what she needs to know. He (Callum, foster child) confides in her with regard to girl problems and he can talk to her because she is younger. (Hazel, foster carer, family eight)

Another carer refers to the importance of support received from a brother and sister:

I get support from my brother you know. They like the fact that you are fostering. Well it is more my sister than my brother. My sister is here. She doesn't think of the children as being in care; it's just normal. It's just like another kid in the family. (Judith, foster carer, family seven)

A foster child also comments on the value and emotional impact of being accepted by the wider family and how important it is for him:

I mean it would be one thing being accepted by the foster parents, but another thing to be accepted by the whole family. The whole family changed the way they did things to suit me when I came here, and to work around me and stuff. (Callum, foster child, family eight)

Another carer comments similarly about her adult birth children and how significant they are to the young people in placement in regard to their sense of membership and self-esteem:

She (foster child) came home and she said have you phoned Katie (adult birth child)? I said why, she said 'tell her I joined sea cadets'. I said she might be in bed. 'Well phone Paul (carers brother) now', I said perhaps he is in bed she said 'well phone them first thing in the morning and phone Kevin (adult birth child). Tell them my news'. (Judith, foster carer, family seven)

Whilst the people in the fostering household are of course key participants in the way the family functions, it became apparent that the wider caring responsibilities and commitments of kin, formed a web of mutual support extending far beyond the people identified in any one household and created a network far greater than the sum of the individual parts. In order to conceptualise this world of kin and family it proved useful to turn to Quinton (2004) who describes three types of parenting support - formal, informal and semi-formal. Informal is that offered by friends and family and neighbours, semi-formal is offered by voluntary, charity or faith based organisations; formal is that provided by the state, health, social care and education. He suggests that there is typically little co-ordination between the three categories of support. In attempts to summarise the perceived support mechanisms of the families I have also drawn on the idea of an ecologically nested framework derived from the work of Bronfenbrenner (1986), which places the extended family in a set of

permeable boundaries connected to the local community and the wider society. These nested levels have informed Table 5:2 (overleaf), which charts key factors of support. For example, carers in families Five, Eight, Nine and Ten were responsible for providing day care for their grandchildren, nieces and nephews. Support networks usually require some mutually beneficial and reciprocal activities. We can see from the data that families and friends had morally worked out how they could both help and be helped, evidencing a caring ethos that underwrote family and friendship networks. These networks are reinforced by community and wider societal sources that were identified in interview and survey sources and are outlined in Table 5:2.

Table 5:2 Sources of family support: three level analysis

Level one The extended family	Level Two The local community	Level Three Wider society/institutions
The Micro system	The Meso sytem	The Exo system
Birth children living in the family. Families 1,3,4,5,6,7,9,10	Church. Families 3,5	Independent fostering agency offering counselling and therapy for the child. Families 4,5,6, 7,8
Birth children (living outside of home). Families 3,7,8,9,10	Use of leisure facilities. Families 2,3,5,6,8	Respite care. Families 4,5
Uncles/Aunts. Families 1,2,3,5,6	The schools, police and health. Families 1, 2,4,8	Foster carer support groups. Families 1, 4,5,6,7,8
Extended family holidays. Families 3, 7	Neighbours. Families 1,5,6,10	Foster care training. Families 1,2,3,4,5,6,7,8,9,10
Grandparents. Families 2,3,5	Involvement in rural events and community . Families 4,8	Support from social workers. Families 4,5,6,7,8 Additional social work support from voluntary agency. Families 9,10

Micro system

Table 5:2 demonstrates how all of the foster families in the study received support from the micro system, from their immediate and extended family networks; this included aunts, uncles and grandparents all of whom made a significant contribution to the fostering relationship. The foster children noted the value of these relationships and this is discussed in more detail in Chapter Ten. Happer *et al.* (2006) also highlighted the importance of these significant relationships for foster children. Of particular importance in this study was the role of birth children who no longer live at home but who nevertheless continued to offer regular support to their parents and to the foster children. Family celebrations are likely to evidence who is 'family' and can join in such festivities (Ashley *et al.* 2004). This is discussed further in Chapter Seven but we can note here how one carer describes how foster children join the family celebrations and are treated like other family members:

Like Christmas when we buy for everybody else's, ours (foster children) are included (by every one else), you know they are ours...they all have what mine (birth children) have.. They've embraced them really, the whole family have managed to do that. (Sally, foster carer, family three)

We can see that supportive networks assist foster children to feel accepted and part of the wider community and also support carers in their role of fostering. This sense of collectivity was contingent upon the group accepting the foster children and members of the group not being placed at risk by them or to them. In this sense the support network is not without potential boundaries around expectations of acceptable behaviour:

My brothers weren't happy to put their children at risk any more, neither were we obviously, and when I have taken him out for days, I ended up me and him with the rest of the family going off and just me with him. (Rachael, foster carer, family five)

Thus risk has to be monitored and the safety of all of the young people needs to be considered.

Meso system

Neighbours and local communities may also take part in managing risks as well. The carers in Family Five describe how neighbours will take the foster child in to their home if the taxi arrives home early or unexpectedly from school. Family Six talked about neighbours knowing about the family fostering and providing open offers of support. Carers repeatedly talked about how integrated the foster children were within these wider networks. Thus it was not only warm acceptance by the host family but foster children were accepted and welcomed by key elements in the wider systems that support families in communities. One carer described the extended family going on holiday and how the children played together and the evident benefits of this for all. Another carer describes an evening spent at the beach with families who attend the same chapel:

So we went off to the beach this evening, a load of us from chapel were going together cos then the kids can all play together and the Mums can all chat and the Dads can fly kites or whatever else they feel like doing.

(Audio diary extract, Rachael , foster carer, family five)

Only two of the families talked about their involvement with religious organisations; other researchers however have found that religion was a significant factor in carers' support and motivation to foster (Buehler *et al.* 2003). Callum a foster child in Family Nine, talks about feeling accepted by the local community village setting:

Another milestone was when I saw how much of a community this little village was. Every year they have a carnival and a barbecue and fireworks displays and stuff where the whole (emphasises) village gathers together in the playing fields. And there are tents and things and face painting and music. Floats and stuff just for the village and the next village. It is such a good community and a close community for so many people to be in. I found

that really, really great. Most of the people know me. I say hi to everybody but a lot of the people I do know. There is the occasional person who will say hi and I don't know them, but I know they know me through Hazel and Josh. Because Hazel and Josh have lived here for 36 or 37 years so and everybody knows them and so they have a lot of friends.

(Callum, foster child, family eight)

Exo system

Formal respite care was used regularly by two families, while others felt that it would be preferable for any 'respite' care to be undertaken by friends and family, as would be the case with their own birth children. All of the foster children placed with carers working with the independent fostering agency received counselling and therapy support services. Children placed in Family Nine and Family Ten also had access to a therapeutic service via the voluntary project. Children placed with the local authority carers had difficulty accessing counselling and mental health services. All of the carers working with the independent agency (Families 4,5,6,7,8) valued the social work support offered, as did the two local authority carers involved with the voluntary project (Families 9 and 10). The carers working solely for the local authority however did not see social work support as always helpful or consistent (Families 1,2,3). The carers across the ten families were receiving regular fostering training, ranging from three to eight sessions of training per year, which was well received by all the carers. As Puddy and Jackson (2003: 990) note, this is of vital importance as:

Specifically, well-trained foster homes are associated with more stability in placements, improved parenting attitudes and skills, reduced problem behaviour in foster children, better relationships between foster parents and child welfare agencies, and decreased attrition among foster parents.

Thus we can see above something of the breadth of support underpinning families in their fostering role.

Conclusion

The key themes emerging from this chapter address care within aspects of effective parenting defined by acceptance and warmth and blended with an authoritative style. Care was also mediated within a context of rules that were seen as reasonable, not oppressive and were tailored to the needs of the foster child. In some homes, particularly those fostering for the independent agency, or those where the carers were undertaking NVQ qualifications, they were required to have the rules formalised and posted on the walls. It appears to be the accessibility of the rules and the ability of the child to understand, digest and interpret the rules that allows the child to settle happily in to the home. The inclusion and acceptance by a wider network of the extended family and local community further facilitates the fostering process. The extended family would seem to have a proximal and active presence within these families. A sense of the collective can be discerned whereby foster caring is not undertaken in isolation by carers but is nested in a wider framework of mutual support and responsibility, a bidirectionality of care (Lipscombe *et al.* 2004). Involved in this is the understanding that care is a moral activity (Brannen and Moss 2003) and aspects of the inculcation of empathy with others are vital in the foster care process. This chapter sought to demonstrate that 'care is about creating and maintaining committed and co-operative relations with others' (Brannen and Moss 2003:207). It is the giving and valuing of care that we next explore in greater detail in the chapter that follows, in which we examine the notion of the 'gift relationship' and its relevance to fostering.

Chapter Six

The gift relationship: the long and the short of it.

Introduction

Drawing on the concept of the gift relationship introduced in Chapter Two, this chapter considers the families from a cognate perspective, that of their motivation to foster, their values that inform fostering, their cultural and biographical histories and the central importance of both the foster mother and the foster father. The chapter concludes by re-examining the notion of stability and how achievable this is in a system designed to offer short term solutions.

The ‘gift relationship’ has often been used to explain foster care as an altruistic act, for which there was no material reward, other than expenses (Nutt 2006). As Titmuss now famously observed with regard to the gift relationship:

It is therefore concerned with the values we accord to people for what they give to strangers; not what they get out of society. (Titmuss 1970: 60)

The gift relationship is a useful concept to sensitise us to the fostering role and its many features. We do not suggest that carers see fostering this way but it affords a useful conceptual backcloth from which to situate the fostering project. The data however will help indicate the salience of the ‘gift relationship’ and whether other sentiments held by carers will better typify the essential character of family care. The motivation to foster for the carers in this study appeared to be rarely financial but informed by the desire to do something meaningful and ‘put something back in to society’ by caring for others. Many of the carers referred to assumptions whereby current arrangements and family histories were framed by the family unit as the primary means to help and assist others. These families all viewed childhood as something worthy of being treasured and children of value in their own right. Family members had often been working in an allied occupation and through this or other connections with social care had some understanding of the caring ethos underpinning the fostering role (as also found by Triseliotis *et al.* 2000).

Against what was a strong value disposition towards childhood and caring can be contrasted the temporal and physical contexts for foster caring which reveal in many ways familiar issues around long and short term fostering, related questions of permanence and as ever the frequent spectre of the threat and challenge of disruptions. This chapter will offer some insight in to the way that carers grasp the fostering contract and the often open-ended and uncertain nature of this. To this extent the conceptual difficulties are highlighted in apportioning a wholly contractual and mechanistic approach to what is essentially for many carers something of a 'gift relationship'. The chapter now explores some of the characteristics of what is described here as the 'gift' of carers and their expectations of reciprocity and recognition from a range of stake-holders.

Motivation to foster

Individualisation has become the core metaphor through which sociological analyses of the family are now undertaken (Bauman 2003). There are varying views and interpretations. Smart and Shipman (2004) and Smart (2007) view individualisation positively as opening up new freedoms and possibilities for citizens (see Chapter Two). By contrast Bauman (2003) sees the availability of choice brought about by individualisation as the undoing of fixed relationships and takes a more pessimistic view of social relations. Giddens (1992 cited in Smart and Shipman 2004) argues that people are now reflexive authors of their own biographies rather than followers of predetermined pathways. It is suggested that everyday family relationships today are more characterised by selective relationships (Ribbens- McCarthy *et al.* 2003) which are founded much less on notions of long term and absolute commitment but will continue for as long as they give partners satisfaction. The relationships with children however continue to be understood as a long term obligation (Beck-Gernsheim 2002) and children may need to be protected from the full effects of increasing choice in adult relationships. Ribbens-McCarthy *et al.* note that 'putting family first and foregoing individual self interest still has a strong hold' (2003:7).

Jamieson (1998) argues that notions of democratisation and individualisation are necessary but not sufficient to depict the current state of family relationships. Indeed

in this study it is clear that carers held very different values to those contained within individualisation theories. Whilst there may be some emotional mobility and fleeting serial relationships by the very nature of the fostering process nonetheless these are seen as purposeful and meaningful interactions. The foster carers in this study live lives that are far from highly individualised, but rather they are enmeshed with others in a complex, reciprocal and recursive way, as suggested by their support networks described in Chapter Five. We now examine in some detail their sense of commitment to children and fostering, to give care to strangers. This 'gift' as we might describe fostering, has its practical expression in a desire to care for others. The motivation to do this caring now comes to the fore and is introduced with conceptual support from Schofield *et al.* (2000:98) who describes three broad motives for fostering:

- wanting a 'second family',
- wanting to be a 'family builder'
- wanting a career in the caring professions as an 'occupational role'.

The data collected in relation to motivation to foster was generated from the postal questionnaires, the interview schedule (appendix 1) and from the genogrammes of the families (appendix 5). Thus it was possible to triangulate the three different sources of information. Some families, for example, acknowledged wanting to be family builders, whilst also wanting to contribute and do something meaningful:

It was something that I felt I could do, something I could contribute and I mean, there was a fair chance that Helena might be on her own, an only child, and I didn't want that, I didn't want us to be a separate unit.
(Liz, foster carer, family one)

Having analysed the three sets of data, it would appear that the motivation to foster for the carers in this study would fit broadly into Schofield's (2000) conceptual framework as follows, although all of the carers also had a notion of a gift, altruism or of giving something back to society:

Table 6:1 Motivation to foster

Family	Motivation to foster
Family One	Family builder
Family Two	Family builder
Family Three	Second family
Family Four	Occupational role
Family Five	Occupational role/family builder
Family Six	Occupational role/family builder
Family Seven	Second family/occupational role
Family Eight	Second family
Family Nine	Second family
Family Ten	Second family

From the data in this study and particularly from the interviews, the gift relationship would also appear to be a strong motivator for the majority of the carers, regardless of the agency for which they worked. Families One and Five only had one birth child and were unable to have more, so saw themselves partly as family builders. Family Two had no birth children by choice but wanted to create a family through the giving of their care. Family Six had believed that they were unable to have children and so had started fostering. Thus there were a variety of motivations to foster from gift giving to financial.

Financial motivation

The difficult and much debated question in fostering, is whether carers are paid for their labour, or merely reimbursed in order to cover their costs. This ongoing debate is elucidated by Robert Tapsfield, Fostering Network's Chief Executive (2007a:1):

Foster carers are increasingly required to work full time and take on complex duties and responsibilities but often they are treated as volunteers when it comes to pay. Foster carers do not and should not foster because of the money but neither should society expect them to do it for love alone.

Eichler states that in traditional economic terms, all activities that generate money are considered 'work' and are hence 'productive' (1997:17). Chapman (2004) asserts that the home is essentially a primary unit of consumption rather than production, in that income is usually gained from outside the home or at least the source of economic gain is monetary, even if householders work at home. This would be broadly true for foster care where the work mainly goes on within the home but where one could 'loosely' say that an income as such is derived from it. It would seem that carers working for an independent agency could be seen to draw a wage, as they receive on average three to four times that of a local authority carer; whereas local authority carers are more likely to be considered as being reimbursed for their costs of looking after a young person. For example, Families Four to Six tended to discuss fostering by reference to a more occupational role in which monetary reward held some importance and interestingly these were carers working for the independent fostering agency and one might anticipate that they would be likely to see fostering more as an occupational role:

When they (local authority) said how much money they were paying, I said there's no way I would be available twenty four hours a day for seventy pounds a week, you know. They were asking an awful lot for what they were paying. (Mark, foster carer, family five)

A study of 1064 carers in Wales found that most foster families struggle on a low income as most are unpaid, or receive only token payments. The study found that :

- 47% of foster carers receive no payment at all (on top of expenses)
- 81% are paid less than the minimum wage
- 87% do not have a full time job outside of the home and rely on the fostering fee to meet living costs.

It can also be noted that even if carers are remunerated, they still live with financial insecurity when children move in and out of their care. As a result, only a third of carers are paid for 52 weeks per year (Fostering Network 2007a).

Certainly some of the motivation to foster in this study came from the financial circumstances of families. There is pressure on parent couples to be dual earners to meet the consumption requirements of the modern Western family; while such dual earning families might be work-rich and relatively affluent, there is a tendency for families to be time poor, as they have to work longer and harder to maintain their family lifestyle (Chapman 2004). This has to some extent influenced the decision to foster. Notably, some carers felt that it was financial considerations that also stopped them from offering the children long term care, via a Residence Order, as they would no longer be remunerated:

If we could afford it, we're not in that situation, but if we could afford it we would have a Residence Order on all three of them we couldn't afford to do it because we couldn't afford to bring three more up, ...and we just couldn't afford to do it and that is the only thing stops us from doing it.
(Sally, foster carer, family two)

Several carers spoke of deciding that one of the partners needed to work within the home to allow them more time to manage the needs of their own family, and fostering seemed to fit with domestic arrangements providing it also enhanced family income:

So we were looking for a job with transferable skills. and we were just trying to find something to fill the financial slot in other words because.... we had to have two incomes coming in ...we heard about fostering So I just thought, well no if I'm going to be looking after children with problems, then I want to, want to be (adequately) paid for it.
(Mark, foster carer, family five, talking about his partner taking on foster care role)

The birth daughter in this family also comments on the decision to foster and the impact on the family of having her mother at home more often, although perhaps not always as 'available' to her.:

I didn't see a lot of her (mum) before. Yeah she was working and she was out all hours. I do have more of her now . Yeah, although that sounds quite strange (laughs) but yeah I have.....Mum is home (now) that is a good thing. (Sara birth child, family five)

Liz, foster carer, Family One, talks about their own child needing to recognise that fostering paid for some of the family comforts and to acknowledge that there was a financial benefit from fostering:

Well for us now, Helen is growing up (and) when she hasn't got on with Melonie (foster child), the financial advantage, because we are a low income family. And I mean you do get paid, it's a financial reward at the end of it, and although I've never mentioned it to Helen before, I do try to get her to understand that we, besides what we do for the children who live with us, she has benefits you know. We go away in the caravan a lot. We wouldn't have been able to afford what we do without fostering. I think Helen is at an age to understand that she does get a benefit from it, even when it's not going all her way. (Liz, foster carer, family one)

Whilst financial considerations were a factor for some carers, altruism also played a significant role.

Foster care-the roots of altruism and 'giving'

In interview carers conveyed that they wanted to offer care in order to contribute and 'put something back into society'. They talked about their decisions to foster in the following ways:

I just thought, one of the reasons was, I thought in society it was good to give, you know I think in society so many people want to, they want to take

and people don't care and I could see that this was a good way of contributing. (Liz, foster carer, family one)

It was, it was something that I'd been mulling over in my mind. We both had previous relationships, unfortunately both fell by the wayside and we both met each other, I think life has turned out quite nicely for us both and so I just thought well, seeing as life has done for us, wouldn't it be nice to perhaps try to put something back into life, society and help somebody else if we can... (Philip, foster carer, family four)

We've brought up one family and now we're bringing up another, we will hopefully bring up seven children who all go on to do something, whatever, how little or how much you might be, it doesn't matter as long as they go out and live independently and get on as best they can .
(Sally, foster carer, family three)

We can see all of these carers wanting to do something meaningful through their role of providing foster care. The motivation was less financial but more of feeling that they and their families had something to offer children who were less fortunate, or in some cases as unfortunate as they themselves had once been. There is almost an element of social reparation and offering a selfless 'gift' in these extracts. We now examine in more depth the roots of those sentiments which carers invoke to account for their motives and actions. First we turn to the unique personal experiences of carers.

Two male carers, both primary carers, drew on their own histories of being in the care system as children, and both felt keenly that they wanted to try and ameliorate the negative experiences that the young people had been exposed to. As a consequence, one of these carers described being uniquely sensitised and positioned to offer an insight and an understanding to children that others could not. For example, Ian (foster carer, Family Two) noted how his own loss of parents at an early age made him sensitive to the very terms of use of 'mother' and 'father':

But like I remember one foster carer saying (things) like 'my mother' or 'my father' which made you feel very different. Not big things but certain things that some people might not even see.

Ian continues to draw on his own background when observing that:

Ian: I think taking someone up the field and playing football, giving something back to the children, giving them something that someone hasn't done.

Dawn: I try to stop them feeling grateful because it is what they deserve ; these children are at the other end of the spectrum they are not used to having things or time spent with them.

(Ian and Dawn, foster carers, family two)

Cultural family history

Many of the respondents had family or working experiences of caring prior to being a foster carer themselves. Thus caring was seen as a valuable and important aspect of life. Whilst some may devalue care (Tronto 1994) as dependency or failure these families see it as a moral imperative and of intrinsic value. Eight of the families had a connection with other types of caring roles previously. Triseliotis *et al.* (2000) also found in their study that two-fifths of female carers were recruited mainly from the caring professions. The following describes some of the ways that some of the families entered fostering. The carer in Family Eight had been a birth child in a foster family when she was a child and as a result of fostering has an adopted sister. Her sister had also been a foster carer for 20 years. This carer, Hazel had worked for many years as a nursing assistant with the elderly, and it had seemed a natural transition to take on the foster care role herself. She was also a child minder during the day and very much enjoyed taking care of others, including her own grandchildren:

I have always had kids around me, I love kids. I felt I had something to offer children that had missed out.... If I can help someone I will. I haven't got two pennies to rub together.... (Hazel, foster carer, family eight)

In Family Three, both carers offered day care and holidays to children who had been excluded from school. The female carer had also worked in a care setting previously as well as cared for an elderly relative who lived with the family until he passed away. They saw it as a natural extension to move into foster care. In Family Two both carers had decided they would prefer not to have children of their own but would foster parent instead. Both had worked in the field of learning disabilities in the past, one in a voluntary capacity. They had also in the past offered remand care:

*I'd always said I wanted to foster. I used to say to my Mum I'm not having my own kids I'm going to look after all the little poor kids, (I was sat) in front of the telly crying- I'm going to look after them. She said you'll change your mind, there is nothing like having your own kids. I don't need to bear my own....Well we'd always been very children orientated. Ian had worked with young people and adults before. As a support worker. I suppose I had always had an interest with Ian's work as well..... We were always that way inclined. And then there was this ad in the newspaper 'if you have a spare room' and we thought we'll have a go. It was a pilot scheme which they now run properly. At 16 (years of age) we were thinking we wish we had them (foster children) earlier...In an idealistic way, but maybe having the opportunity to help them more. I've always wanted to do this....
(Dawn, foster carer, family two)*

Both carers in Family Six talked similarly about their early decision to foster:

It was my decision really, well it was a joint decision but it was my idea, but I've always wanted to , always....Because I come from a broken home and I love children and Sue and I were together for 13 years, engaged for 13 years and we never had any children basically....Well It's like I said all those years ago, we wanted children, so we could eat jelly and ice cream and go to the park. We like learning from children, taking up new interests because of the children. Plus when we met, the first couple of weeks of meeting, we said

we always wanted to foster, the both of us, separate like...(Steve, foster carer, family six)

This couple started fostering before having children of their own and continued fostering whilst bringing up their three birth children.

An adult birth child in Family Seven, talked about her desire to foster children when she was a child. She recalled a friend who was fostered and she was much impressed with the impact of the care provided by the foster family. She persuaded her mother to start fostering and she took this on as a joint responsibility when she reached eighteen years of age:

But I always wanted to help people, but my father didn't want us to do it. Then my father passed away. Jenny (fostered friend) moved on. She set up home and had children young. We lost contact but I kept in contact with her foster family. I was really close to them. I had a big bond and I'm really close to them today. (Katie, adult birth child, family seven)

Notably one set of carers who stood apart in that they were highly motivated by religion and described a duty to care that stemmed from their beliefs rather than a more instinctive or inner sense of desire to give and share something of themselves. They did not refer to any prior connections with caring as a formal or informal role. Nor did they refer to the sorts of narratives about past experiences and sentiments of loss and need that were evident in the accounts of other respondents about why they think children should be cared for:

*I firmly believe ..that if you tackle it as a job and isolate some emotions, I think you can do your job better but... you cannot isolate (all) your emotions because crumbs you know you'd be totally heartless. You wouldn't feel anything...There's got to be some sort of emotion there, some sort of, something inside of you that wants to help this child.
(Mark foster carer, family five)*

This family seemed more inclined to see fostering as an important job and one which also fitted with their sense of moral responsibility to children in need. More than other respondents they reported high levels of frustration and stress. The birth child too seemed to struggle more than others with the experience. Nonetheless the family remained firmly committed referring to their religious persuasion as an abiding source of support, as the following interview extract suggests:

Mark: Like my faith, I suppose because my expectations are lower as a Christian than they would be....

Researcher: Your expectations are lower?

Mark: Yeah.

Researcher: For your own life?

Mark: For my own life, yeah because as a Christian your life is hidden in Christ, which might be a bit, sound a bit strange but.

Mark went on to describe the meaning of this for foster care, in that he was willing to put up with more stresses and strains as he saw the religious purpose within the work. Mark goes on to talk about how he feels about Chris, and a relationship that had not yet 'clicked':

Like Chris, although I don't, I'm not particularly fond of Chris, his circumstances break my heart, because I'm positive that the majority of Chris' problem is nurture, not nature, and I think anyone who does this, (no-one) is beyond repair, so no I don't think you have to like a child to do your job properly. (Mark, foster care, family five)

Mark was suggesting that he was able to be emotionally detached from Chris, and that he did not feel that he had to like a child in order to help. The above comment does raise the point whether people can be paid or made to care, perhaps we can only pay people to 'care for', but not 'care about' a foster child. The distinction goes to the heart of the fostering relationship but allows no easy measurement of motive or outcome. Thus, while Mark did not claim affection for the child, he did care and act for the child's welfare and a high level of physical and professional care was evident. What then distinguishes foster care - is it to be conceptualised within an

ethic of care, a gift of love and acceptance, or should it also be understood within an ethic of justice (Held 2006), emphasising rights, tasks and roles that have become increasingly rule based and professionalized? We now turn to this issue.

Professional foster care: independent agency support

Five of the families in this study worked for an independent fostering agency and five were local authority carers. There has been a large increase in independent foster carer agencies, and their role has often been met with hostility by local authority social work managers, concerned at the migration of foster carers to the independent sector (Sellick and Connolly 2002). In this study the noticeable differences between the two groupings were around the level of support offered to the independent agency foster carers and to the young people. All of the carers in the independent agency expressed the view that they were well supported by their agency's social work staff and in the training carers received. Notably, the role of the therapist employed by the independent agency was seen as particularly helpful by carers and the young people. The carers described how they share concerns over aspects of conduct with the therapist. One young fostered person (Callum Family Eight) offered a specific example of therapeutic intervention:

I had therapy at first, therapy from Hilary from the foster care agency. She came and I had eight or nine visits, once a week, and she was breaking through, and making me understand things. And then I did a disappearing act, as I am prone to do and I came back and that wiped off everything she'd done and eventually she got through to me and between her and myself I suppose, and er, I realised that I didn't want what was happening and what had happened.....She helped me break through...mainly it was, she helped me find myself if that makes sense. Because I was running away, we discovered that every time I had a problem I was running away from it. Because I tried to kill myself, well I tried to harm myself and she said in a way that is a form of running away from your problems and every time you get too big or too bad a problem, you don't face it head on, you run straight away from it. And you can't run away from problems all your life, basically that is what we worked out. It doesn't sound like that much.

Carers too described how they had acquired skills from sessions with the therapist:

If I hadn't had done as much therapy with the other one that I had because I had to go in with him for every session, so the therapist was teaching me the whole time how to be the therapist for this boy because when we took him in there he would climb up the walls, literally up the shelves, smash the room up, pull the curtains off, beat up the psychiatrist.

(Rachael, foster carer, family five)

The importance of a therapist who outside of the family could work with the young person to help him or her process events that had happened in the past was highly valued and was also available to Families Nine and Ten which had access to a counsellor for the young people in placement, provided by the voluntary agency. Their experience contrasts markedly with the carers for the local authority who were without such support and found it difficult to access therapeutic interventions from the local children's mental health services. The extent of mental health difficulties within the looked after population in Wales is a matter of pressing concern. Meltzer et al. (2004) found that the prevalence of 'mental disorders' for children and young people aged 5-17 years who were looked after by local authorities in Wales was 49%. Because child mental health services are hard to access so it is that a child's distress or behaviour has to be quite severe which in turn makes it something of a stigmatised service for 'ill' children. By contrast the therapist's role as described by carers in this study seemed to be low key often taking place within the family home, as an individualised and personalised service. This was not available for young people cared for by local authority carers who would have to access a more rationed and bureaucratised service.

Additionally, the local authority carers tended to remark less favourably about the availability of social work support that they received, albeit that this hinged largely on financial issues and resource difficulties. Interestingly, those carers who completed the postal questionnaire, revealed no obvious difference in the number of training courses that foster carers had attended over the previous three years. All had attended a wide range of training.

It was noticeable that foster carers working for the independent agency demonstrated more of the use of the formal language of care, they invoked more in terms of social work conceptualisations of their approaches to the needs of young people. For example, Sara, an adult birth child, Family Five, compares the independent agency favourably with the family experience of previous local authority support:

Yeah I think it would be really good. It was so beneficial I think, that I went on a 'children who are sexual abusers' course. It was only with the change of agency that I went. This agency wants you to go. It's not compulsory but you can go if you want to. You need to be aware of the reality of what you are living with. The courses can be quite horrific..... I'd like to do more of the training courses as they are really interesting and helpful. I liked the one with the American psychologist - it was more of a seminar kind of thing. Different strategies. No other birth children attended.
(Sara, adult birth child, family five)

She went on to talk about how she manages her own feelings in the fostering process and how social workers have taught her to manage these:

You have to keep your own emotional barrier. One social worker told me to build a wall and you only let in what you want to. That doesn't mean that you are not nice or that you are not friendly but you keep your own emotions safe.....It's important not to hold anything back and if anything happens to include it on the diary sheet. I tell Mum and she includes it for assessments etc.

Here there is a sense of fostering not being part of family life, but something different and 'other'. This highlights the juxtaposition of policy and procedure versus the relationality and ethic of care (outlined in the second chapter of the literature review). We now move on to the priority that foster children are afforded by foster families.

Positioning the children: a priority

All of the families described how they placed the child and the child's needs as central to the family endeavour. This is exemplified by the empathic claims made by the carer in Family Two when asked to indicate how they position the emotional and practical needs of the fostered children:

Our whole life really. We always said when we went into fostering unless we could give them everything and be prepared to sacrifice everything, which you need to do, then there was no point going into it. We have had kids where I have had to be able to offer that. We have always said that whatever child comes along our focus is around finding out what makes them tick. And you do. You will find something. There will be something. So we throw ourselves into different activities all of the time. Something clicks. Which is rather wonderful for us. It has its stresses and its emotional times but we move on. (Ian, foster carer, family two)

Unprompted and at a later time the foster child in the same family corroborated this claim. As can be seen, she is quite clear that she is the carers' priority and that the carers have made this assumption abundantly clear to her:

Like I'm always worried about finances and I don't like asking for things but they have taught me to be able to ask for anything. I comes first with them.... Yeah, they give us a chance to do anything we are interested in and they say they want us to have good childhood memories. This house has been changed a lot and extended. They are going to get a shed for me to do drumming and that is going to cost two grand... They don't worry about the furniture. But you don't remember a sofa when you are grown up do you? You remember a holiday (a foreign holiday is being planned). (Nadia, foster child, family two)

Another carer talked in similar terms about sacrifices willingly made to give the fostered child the opportunities and experiences they would not otherwise have, she summarises the values that underpin her care as:

Plenty of love, being a normal person and putting those children's needs before anybody else's. (Judith, foster carer, family seven)

This carer and others readily gave examples of prioritising the child above their own interests as a day to day feature of care. Thus it seemed that all sorts of changes were being made in the family practices to accommodate the children; to put their needs first. Ribbens-McCarthy *et al.* (2000: 271) argue strongly 'that there is a non-negotiable moral obligation within families to put children's needs first'. It is notable that this appears to be as pronounced in these families for foster children as it is for birth children. One young person in placement reflected on this in relation to the adult birth children in the family:

I am still a foster child and they are their biological children and I would never, ever try and come between them and I don't feel I have to compete with them anyway, because I get so much attention. They sometimes say to me, 'when we were at home living with Mum, we never got half the things you get'. So I'm treated very, very good. (Callum, foster child, family eight)

The foster children are not somehow tolerated in the majority of these families but instead are given exceptional care and consideration as are birth children. For example a carer spoke about her own child being bruised by a foster child. She described how she needed to be assertive to ensure that her own daughter was protected and treated with the same importance as the foster child by the local authority and the need to demonstrate this to her daughter:

Colin who was here was violent, and I mean, violent. He really bruised Helen badly. And he um over Christmas it was, so no support, I didn't have that support anyway but we, I mean by the time they bruised your child the damage is done, isn't it? So when they (local authority) started back to work I asked, and then insisted on a proper meeting, where my child could go and be supported by whoever was around ...and wanted them there for Helen, for Helen to see that she is important as him, and it did happen. (Liz, foster carer, family one)

The foster children in the families while prioritised and cherished to some extent as part of the family, were rarely seen as sons and daughters, nor were the carers 'parents' in the sense that Finch and Mason (1993) describe. That is the ideal relationship between children and parents retains essential elements of an expectation of love, a duty of care and a long term relationship. By contrast the term foster 'mother' and 'father' or 'foster parent' is no longer the official version within the UK. The term foster carer is now used to denote that the foster carers cannot (and are not intending to) take over the role of motherhood and fatherhood, albeit they are assuming the role of parenting for a time limited period. Nevertheless some of the young people in this study did refer to their foster carers as 'Mum' and 'Dad'. And some of the carers referred to each other as 'Mum' and 'Dad' to the foster children.

You know there are lots of reasons why someone (can't look after their children) but they've tried their best and they just couldn't cope, so there's people like me and Dad around, because they call us Mum and Dad, who can help them and looking after their children but making sure you never forget who your mum is, who your Dad is....(Sally, foster carer, family two)

Whilst the official terminology has changed, linguistic preferences and their tacit and taken for granted meanings are not so easily extinguished. The chapter now moves on to look at the role of the male and female carer (fatherhood and motherhood) within the fostering relationship.

Fatherhood: the male foster carer

Understanding the role that men play in fostering is vital in improving service recruitment, service delivery and retention of foster carers. Rhodes *et al.* (2003) in their US study found that workers often underestimated the involvement of adult male carers in the lives of foster children and noted that most research has focused on foster mothers (2003:958). Gilligan's research into foster fathers (based on focus groups with male carers) highlighted the role they play. The adult males within this research were certainly pivotal to family care and were seen positively by many of

the young people in placement. The following two excerpts from an interview with Callum in Family Eight reflect the sorts of close relations that develop and which denote a sense of attachment that common sensically is seen as 'fathering' or 'father like':

I clicked as soon as Josh came home, through the door from work. There was just something between me and Josh that I realised that he was a very good friend. Before anything else me and Josh were friends. He used to take me down the pub and buy me a shandy, I use to play on the machines and it was just nice to be treated like that. Hazel stayed further back, whereas Josh was coming forward, Hazel stayed further back and waited for me to come to her, and waited for me to make approaches to her and stuff. Which eventually lo and behold I did and we became very close that way and me and Josh we had a real great start.....Now Josh is very fatherly as well, he looks out for me. First he was a very, very good friend and then he became a father figure to me. (Callum, foster child, family eight)

There is a dearth of UK research on fathers, children and welfare in the social care system (Ashley 2006). There has also been a relative lack of attention paid to foster fathers by agencies, social workers and researchers (Wilson *et al* 2007:21). Work by Gilligan (2000) and Newstone (1999) have highlighted the lack of research into the role of foster fathers whilst both note that there have been many who have stressed the importance of the role of the foster father, without a research evidence base. Nutt (2002, 2006) reveals the importance of the role of the foster father. While Sinclair *et al.* (2004) note that foster 'fathers' have remained largely invisible, this in part has been because foster care research often refers to the main carer which in practice is almost always a woman, albeit that this is not the case in this study. Morgan too notes that '...men are not absent from caring work and, indeed, their involvement in such activities may have been underestimated by some previous commentators' (Morgan 1996:101). Hojer's (2004) study in Sweden also suggests that foster fathers have featured more prominently in recent years. In her study looking at the impact on families of foster caring, men were seen to be just as committed and interested when it came to talking about their contributions to foster

care (Hojer 2004:45). Wilson *et al.* (2007) in studying the qualitative and quantitative data on all foster fathers registered with a single independent fostering agency in the South of England (nine of the foster fathers were interviewed) concluded that men generally gave over responsibility for negotiation with the outside, external world (with regard to matters of fostering) to their partners, the female foster carer.

It seems evident that foster carers typically do not come from highly skilled/ highly paid employment categories (see Chapter One). Indeed as Brannen and Nilsen (2006) note, it is the fathers in this higher social grouping that now have less time to spend with their children than their fathers before them. Male carers in Wilson *et al.* (2007) noted that the trainers of foster carers, assumed they were training a female audience and did not adapt materials accordingly. Social workers are used to working predominantly with women who are often held responsible for protecting their children against abusive fathers, rather than holding the perpetrator responsible; it is also assumed that women will be carers for those children once in care (Featherstone 2004). In Wilson *et al.* (2007) there were clear traditional gendered divisions of labour in relation to household work. In terms of direct involvement with children however 20 out of 31 tasks were judged as equally shared; this suggests men's important contribution to fostering. All of the carers in this doctoral study felt that they had a valuable part to play. Foster fathers were, for the most part, eager to embrace both the practical and emotional aspects of foster caring; they were aware that many foster children have a history of difficult relationships with men and believed they could be important role models. A benign male is an important role model for children and this may need to be more consciously and explicitly articulated in planning placements. Hojer (2004:42) noted that in many foster families the number of children in the families, means that children outnumber adults. As a result Hojer asserts that fostering 'draws males to the centre of family life'.

While fathers are now expected to participate in their children's lives by providing more day to day physical and emotional care this shift seems to be entirely at the normative rather than at the behavioural level. For example, there is some

agreement in the literature that fathers continue to do relatively little child care compared to mothers (Eichler 1997:75). Smart (1999) suggests that fatherhood is mediated through the behaviour of the mother and does not operate (in the main) independently with the children. Eichler (1997) also notes this mediating role.

‘Hands on’ fathering was found to be provided more by working class fathers than high earning middle class men, in the Brannen and Nilson study (2006). This was also the case in this study where the ‘hands-on’ fathering was done by men who were either not the main breadwinners and/or were the primary carers themselves, or were not working and were joint carers with their female partners.

In this study there was significant evidence of foster fathers being actively engaged in every family where there was a male carer. In three of the families, older male birth children were also evident in providing support and being a male role model where there was no male carer. There was therefore an overt male presence in all but one of the family homes. One carer outlined the types of activities that her partner undertook with the children. In some ways these are gender specific, but it does reveal a foster father engaged independently of the female carer:

All sorts of things. Chris (foster carer) normally does the things with them, he takes them down to the sea wall and they might make a camp fire, take some sausages and potatoes and they cook or he'll take them up the forest, forestry and they might build things out of logs or you need take them down the caravan for the day because perhaps the boat needs moving or something needs mending on the caravan and he takes them down there for the day and they help him do whatever needs to be done down there and then he brings them back and all sorts, I've never ever had a row with him, never....(Sally, foster carer, family three)

Predictably much of the involvement of male foster carers with children was activity based including sports, horse racing, football, tennis, dog walking and playing pool. Brannen and Nilson (2006) also observe fathering to be typically about ‘doing’. Such activities were a vehicle for communication by males with young people as

many talked while dog walking or playing sports. Activities also allowed young people to develop a range of interests and achieve self esteem through their achievement (this will be discussed further in Chapter Ten). Thus men were playing a key role in providing domestic and activity-based care for foster children.

Motherhood and love

It is assumed that women will become mothers and provide a caring responsibility for their children:

The young girl will be a wife, a grandmother; she will keep house just as her mother did, she will give her children the same care she received when young-she is twelve years old and already her story is written in the heavens. She will discover it day after day without ever making it.
(De Beauvoir 1972:325).

Many agree that care is inextricably linked to femininity as women are assumed to be predisposed to nurture others, 'discourses on femininity and motherhood are closely interlinked with definitions of selflessness, sensitivity, warmth, traits which are seen as constituting a disposition to care' (Ribbens-McCarthy *et al.* 2003:80). Family life is ideologically constructed as the primary site for emotion (Nutt 2006) and mothering inevitably involves the use of emotion. Representations of mothering are founded largely on an amalgamation of 'caring for' and caring about as emotion (Ribbens McCarthy *et al.* 2003:81), it is therefore important to consider how love and emotional care play a role in fostering:

Foster care can be seen to be a contradictory activity in which separation of motherhood from mothering and being motherly inevitably gives rise to emotional and practical problems. (Glenn *et al.* 1994: 104)

It is both the temporal nature of foster care and the presence of birth parents that differentiates foster care from a conventional mothering or fathering role. One young person talks about the difference between her own mother and her foster carer and describes how she loves both of them but for different reasons:

I love my Mum to bits but I'll be honest, Dawn (the foster carer) should be my Mum. I know it sounds horrible because I do love my Mum so much. I love Dawn better.....Because I think she understands me more, and she is more of a Mum.....Like my Mother... She's too soft. I love her but I don't like her ways..... she is like a big kid. She is embarrassing; I hate going out with her. When we are on our own she's fine but when we are on the bus like... she'll say 'Oh my Nadia give me a big kiss' (funny voice). Everyone is having a good nose and I just felt like walking off I love her because of who she is but I'm so embarrassed about being a big family. I'm embarrassed about being well- I don't care about being in care. I'm embarrassed- if she didn't look like a bag lady, she could be attractive. I've never seen her wear make up, she never had hair done in her life or had new shoes.... I always wanted a girly Mum to share make up and clothes, but I can't. Like with Dawn she really likes make up. Yeah. I can talk to my Mum for hours; she swears at me; I swear at her and I can say EF off like and she don't mind. Whereas I don't feel I could say that with Dawn. It's just not her way. Like my Mum is more a friend. A friend or a sister, but Dawn is more like a mother... (Nadia, foster child, family two)

The young person invokes a notion of the normal mother and how her birth mother does not fulfil this role. She has clear expectations of what a mother should be, that is, someone to be proud of, someone who is respectable, responsible and has firm boundaries. Indeed, Nadia claims that the foster carer acts more as her mother. Yet carers do not provide the ties of birth and while it is expected that foster carers should nurture, care for and potentially love a young person in their care, they must also be able and willing to let them go. The majority of the foster carers interviewed described a sense of loss when a placement ended, demonstrating their level of care, emotional commitment and attachment to the foster children:

The only thing is we've had hiccups with here is when you get too attached and children have to go for adoption. Then that is a different aspect of the job altogether then. When you get a little bit too close.....I had two

placements like that which after they go, you tend say I'm not doing this anymore and it takes a good few months down the line. It's like a bereavement then you know, because I have had some darling little kids here and perhaps you have had them 12 months and then you get a phone call and they say we've got an adoptive parent for.. and you can feel yourself going ugh, you know your insides flop and then you think oh it will be a few months before they introduce them and all of a sudden its just a few weeks and bang its gone. You think to yourself you've just given this child over and it's terrible. (Julie, foster carer, family ten)

Social work has long drawn on theories of attachment (Bowlby 1969), yet carers are expected to offer serial intimate relationships and still be immune to the pain of detaching and letting go. Many of the carers interviewed had stopped offering foster care for babies on the basis that it was just too painful to become attached to the babies and then have to give them up:

We had the babies... for about a year and a half and we had to pass them onto another foster carer because we got so attached, (we had a) huge rift between social services. ...Terrible it was. (Sally, foster carer, family three)

In most professional relationships it is not anticipated that we have a major emotional investment in our clients. However with fostering dual expectations of love and care occur, yet within professional parameters. Within the interviews, the notion of 'love' for the foster child was discussed and whether carers felt that they loved the children in their care (Wilson *et al.* 2003). The definition of 'love' used in the interviews was some normative taken for granted idea, as any parent would naturally 'love' their children. There were a variety of responses to this topic, some carers felt that they were attached and cared deeply but that this did not amount to 'love'. Others were clear that they loved the children in their care, as a parent would:

Sally: Slowly she found saying 'love you' and I used to say to her 'and I love you' and 'I love you as well'

Researcher: And do you 'love' her?

Sally: Yeah I love her.

Researcher: And you say, you were saying you love all three now, do you think it's necessary to 'love' a child in foster care?

Sally: Certainly to love I think. I don't think I could have anybody living in this house that I didn't love.

Researcher: And have you ever had that?

Sally: No

(Sally, foster carer, family two)

Sally believed that she loved all of the children in her care and thus it seemed that Sally was able to offer sincere emotional care which was not contrived. Another set of carers discuss their overriding concern for the children in placement but do not describe this as love. Yet as noted earlier in this chapter, the needs of the carer are positioned as secondary to those of the children:

Ian: For them (I feel) worried. For us I wouldn't say we weren't attached; I feel deeply for them but if that is what was going to happen (return to their birth mother), that is what is going to happen

Dawn: And outside you will get on with it. You just have to get over that on the outside but inside they are always there

Ian: You just want the best for them

Researcher: It is a difficult aspect of fostering?

Ian: Of course it is. You need to give yourself time to get over it, to pick yourself up and to go marching on ready for the next. I think I would probably be more fearful for these kids if they were to go home to their mum.

(Dawn and Ian foster carers, family two)

Thus, whilst some carers did not believe that they 'loved' the children their investment of concern and care was seen as overriding. It is the expectation of love or at least a warm, nurturing affect that creates a juxtaposition between fostering as short term and temporal and a setting that can offer continuity, stability and security.

It is difficult to see how these desirable goals can be achieved in the short term hence we now examine issues of stability in the lives of children and foster families.

Stability

Beck and Beck-Gernsheim (1995:73) point to the significance of children and stability more generally:

(The child) promises a tie which is more elemental, profound and durable than any other in society. The more other relationships become interchangeable and revocable, the more the child can become the focus of new hopes – it is the ultimate guarantee of permanence, providing an anchor for one's life.

Beck and Beck-Gernsheim (1995) contrast the permanency of the parent–child relationship with the impermanence and instability of other forms of relationships in late modernity. Yet children in the care system are often moved and often for the best of intentions, this frequent movement has become a matter for much public concern . For example, for babies in the Ward *et al.* study (2003) (there were 42 babies being tracked after being admitted to care before their first birthday) they surprisingly experienced 143 placements and 101 moves whilst being looked after; the majority of which were 'planned transitions'. Children in care often have not experienced or been provided with the 'elemental ties' and the 'ultimate guarantee of permanence' referred to by Beck and Beck-Gernsheim. This has been due not least to deeper tensions within child care practice and policy:

A tension that runs right through the history of child care is between the aim of protecting the children and young people from ill treatment and undesirable influences and the ideal of family preservation and reunification.
(Jackson 2006:16)

There has been for decades an emphasis on short term care in order to work towards returning children to birth families or preparing them for adoption. This overriding aim of re-unification militates against the idea of long term foster care as a

placement of choice (Schofield *et al.* 2002). Recent evidence about the pathways of looked after children provided by Ward *et al.* (2003) in their longitudinal study of 242 children found that in many cases being looked after offered little more stability, although considerably more safety, than remaining with birth parents. The predominant view that return to birth parents should be the first choice of a care plan, has led to delay for many children. Ward *et al.* (2003) found that this was exacerbated by lack of concurrent planning for the child should return to the birth parent prove not possible. They also found that there was some reluctance to consider foster carers as potential adopters. This was partly due to the fear of losing foster carers but also there were concerns that some foster carers would not meet the stringent requirements required of adopters, despite often having looked after the child for many months up until that point. Thus we can see dual standards operating with foster carers being good enough to provide short term care but not good enough to provide long term 'forever' care.

Foster care currently offers 'a time-limited form of permanence' (Sinclair *et al.* 2005b:11). In this study I sought out 'successful' foster carers who provided such time-limited permanence which lasted as long as it needed to, or conversely a placement which did not disrupt. Leathers' (2006) study considered a disruption to be placements which were terminated and followed by another non-permanent placement. All of the children in this study were in placements that had not disrupted and were thereby deemed successful. Yet, most of the young people were in what might be called 'long- term' foster care usually seen by professionals as less desirable. Definitions of long term foster care used in research appear to vary from two years (McAuley 1996) to three years (Rowe *et al.* 1989). In this study it was surprising that out of the nine families who had a child placed with them at the time of interview/involvement with the study, seven of the families were offering long-term foster care. And this care would continue until their childhood ended or until the child ceased to be looked after, (often termed 'objective permanence' Sinclair *et al.* 2005b). Foster care for these children has become more than a temporary refuge but rather a family for life (Fratter *et al.* 2000). Thus, even though the carers were not anticipating offering long term care, this had evolved, and care was lasting as long as was needed. For example, Sally (Family Three) discussed her intention to

continue offering long term care to all three children placed with her, despite having initially gone into fostering to offer short term care. Sally now has three children who have been with her for eight, seven and five years. She states that she has given each of these children some “good experiences of family life”, so at whatever point they leave, they will have had a benchmark or an experience which they may be able to emulate or re-create in their own adult lives.

Thus it seems that each individual child had gelled with the families in this study and were assimilated within it. The fact that all were initially a short term/ bridge placements might well have reduced the pressure on relationship-building and allowed these to evolve more deeply over time (see Schofield *et al.* 2000). Similarly, both Hazel and Julie talked about having children placed with them in the short term, then having to negotiate or fight to ensure the children were allowed to stay with them. Julie (Family Ten) discussed how the local authority had a vested interest in keeping her as a short term carer and therefore they wanted to move the child on to another placement:

I was told that if I was going to take her (foster child- long term) then I wouldn't be having any other placements. I said 'fair enough, if I can get one out the system, carry on'. At least I knew she (foster child) wanted to be here and she was happy with us. She had been here two years and it is a long time in a child's life.

The initial approach by the local authority would seem to have been short-sighted and difficult to justify when acting in the best interest of the individual child; but perhaps the approach could be justified in terms of the wider body of children in local authority care and in terms of the system that they were attempting to operate. Julie was committed to saving children from ‘the system’ and this priority foreshadowed any financial concerns that she might have.

Hazel, Family Eight, also talks about asking for Callum to stay long term, although this was less difficult; this might in some way be related to the fact that he is placed by an independent fostering agency:

At his review we asked if he could stay long term. He said 'I want to stay put' and that is a big part. He just settled and he became human. We treat him as a member of the family..... He is here for good. He will be here until at least 18 and then we will encourage him to go into independency. But there is a home here for him; this is his home..... He is just ours.

(Hazel, foster carer, family eight)

It was choosing, and for the children being chosen, with some degree of mutuality that was vital, allowing both the carers and the young people in placement some agency. This is further discussed in Chapter Ten. Certainly, short term fostering offered a chance to test out the chemistry of the relationship and ultimately young people and carers should be allowed to determine the continued viability of a placement.

Schofield *et al.* (2000: 295-6) discuss the importance of long term foster care:

Long term foster care should not be seen as a last resort, as this could lead to children remaining with maltreating families, waiting too long for adoption, or drifting in short-term care .

Certainly within this study there are children for whom long term care was working and working well. If success is deemed as lasting as long as it was needed and the ability to predict the length of time needed is at best extremely limited, then there can be no real notions of short term and long term care. It would seem that this artificial divide between long and short term care is damaging the prospects for security that these children have. Mervyn and Kerry (Family Nine) noted that this artificial divide, which imposed time limits, caused them significant problems. They described two boys being very settled with them but the social worker insisting that the children could not stay beyond the six month cut-off point and the carers felt that they had to be open with the children about this. However when the move did not happen the carers found themselves unable to retrieve the situation and the placement broke down altogether:

They both were going to go, this was what the local authority do, they say they are only here for so long they (foster children) start to settle down here, we don't know, we can't tell you and the social workers were saying, 'well you're only here for six months' so we told Adrian the day of Christmas Eve he'll be going the first week in January (as the social workers had told us) and it's a time to tell him isn't it and we had it wrong. Then they wanted him to stay longer but it was too late. After that any settling was gone. (Kerry, foster carer, family nine)

Giving children dates for moving on and then those dates not being adhered to, made children feel unsettled and undermines any durability the placement might have had. Long term placements should be valued in their own right. Issues of finance and keeping short term placements available are also determinants in these decisions. I will now go on to consider briefly how financial implications might affect stability and security for the foster child.

Finance and stability

Many of the carers offering long term care felt that they would like to have a Residence Order for the children in order to shore up the permanency of the arrangement, but that this would mean a loss of income, which they were unable to manage without. Similarly in Family One, where the carers had in fact adopted a foster child, they had only been able to do so because continued funding had been allowed. The financial arrangements often prohibited stability and this did not appear to be recognised by social workers. Some carers, particularly local authority carers talked about their frustrations over the prompt payment of often very small amounts of finance. It also seemed that the lack of Residence Orders was not helpful, as Sally noted previously. The more recent introduced Special Guardianship Orders may well bridge this gap but there is little research yet as to the extent these are utilised. Other carers indicated their frustration over young people having to leave care at a premature stage:

If everything goes to our (and) to her satisfaction until she leaves to college. I'd like to keep her after that, but unfortunately after that I can't. She don't know about it yet. In an ideal world it would be a lot later because she is so immature, she really needs more support. (Judith, foster carer, family seven)

Thus it seems that some children could experience even more permanency should funding allow it. There have been some legislative improvements in recent years in that the Children Leaving Care Act (2000) ensures that local authorities maintain financial responsibility for young care leavers until they reach eighteen years of age. However, despite foster children being assimilated in foster families and despite being offered exceptional levels of care and commitment by foster families, there is still a sense that these young people are not full members of the family, because they cannot be kept indefinitely within them, owing often to the time-limited funding. The financial 'contract' in fostering seemingly results in such a paradox.

Conclusion

This chapter has aimed to illuminate the background of these families, their motivation to foster, their underlying value system, their cultural histories and the central role of both the foster mother and the foster father. The chapter considered the idea of the gift relationship versus individualisation and the implications of this for 'caring about children as an emotion' (Ribbens- McCarthy *et al.* 2003:81). What can be seen from the data is that whilst some carers saw fostering as an occupational role, all of the carers were motivated by a sense of altruism, of wanting to give something back to society. Two of the male carers, who had childhood experiences of being looked after, particularly wanted to help ameliorate some of the negative experiences that young people may have had in the care system. There was some differentiation between whether carers had feelings of 'love' or a general sense of strong affect for foster children. Certainly all cared for the children and all of the carers saw children (birth and foster) as their prime priority.

The families in this study greatly valued care and care giving and most had a family history of giving care. Many carers had worked in social care roles in the past and/or had relatives who were either foster carers or social care workers. In this sense they

were all experienced carers. The role of the foster father was seen as particularly significant and men were playing a key role in providing domestic and activity-based care for foster children. The positive male role model was much appreciated by the young people. Stability and finance were however still seen as problematic, given that the financial contract creates a paradox in that it cannot purchase the elusive 'caring about' in the long term, although most of the carers 'cared about', rather than 'cared for' the foster children.

We now move on to the mundane subject of food as an exemplar of how these families care. Food, as we shall see is linked to parenting styles and family membership, and displays all manner of messages and meanings about the relationship between the fostered child and the foster family.

Chapter Seven

Food : An invitation to a good meal

Introduction

This chapter examines food and the family in order to demonstrate the nurturing nature of these flexible families. Care was enacted and manifested through food. It will be seen that the families operationalised many of the principles of good parenting through their approach to food, particularly warmth, responsiveness and consistency:

Food is not regularly discussed within fostering or within sociological literature. Food represents another of those areas which is central to human life but which never quite seems to get the detailed and systematic treatment within sociology that it deserves. (Morgan 1996 :157)

Douglas also notes that ‘the uses of food are not being recognised or studied’ (1998:109). Food has often been ignored by sociologists in the past because it had ‘long belonged to the domestic sphere and formed part of women’s work and thus seemed of lower status’ (Mennell *et al.* 1992:1). Food is seemingly so taken for granted that it does not merit exploration. This too has been the case with regard to food and fostering. As Leith notes, we should not ignore the social significance of food preparation and consumption:

Homo sapiens are the only species to ritually prepare and eat its food. All other species eat it where they find it. The community preparation, cooking and eating as a family or tribe is common for every civilisation in every country in the world, from the dawn of men to the present generation in the developed West. We lose these cooking and eating rituals at our peril.
(Leith 1998: 59)

We start this chapter with a brief reprise of some of the literature pertaining to food.

The symbolic nature of food and ‘doing’ family

Food has a social and symbolic significance, particularly insofar as it involves the relationships of those who partake in the ritual of sharing meals (Douglas 1984). Anthropologists have suggested that the sharing of meals is a ritual process which sets boundaries of inclusion and exclusion, and thus expresses the identity of the group which eats together (Brannen *et al.* 1994 : 143). The Office for Population Censuses and Surveys (OPCS) recognizes that the sharing of a common table, is a significant factor in the definition of ‘household’. Mennell *et al.* (1992:115) note that those who eat together are also tied to one another by friendship and mutual obligation: ‘Sharing food is held to signify togetherness, an equivalence that defines and reaffirms insiders as socially similar’ .

Meal times allow families to enact and display family life (Finch 2007). It was important therefore to explore how foster families typically eat together and the significance of this for belonging and membership. As Ashley *et al.* (2004:128) point out:

Mealtimes are fundamental to the production of families....and practising the family meal becomes a means through which people not only recognize themselves as families, but a particular class of family.

Meal times thus help to structure and demarcate family life. Children also learn to structure their understanding of time through the eating of food. ‘Thus the cycle of breakfast, lunch and supper is the first framework into which they slot their waking experiences’ (Ennew 1994:129).

The sharing of food demarcates households and families but food also has the potential to mark out difference within families and between families, including class differences (Ashley *et al.* 2004). Food and food preparation do not simply create or reinforce unity within family groups, but may also be a site around which differences and divisions can be expressed. Brannen *et al.* (1994:151) noted from their study of negotiations and family life that struggles over food can be a way to resist family mores and that conflicts about eating can be associated with ‘young

people's sense of powerlessness in respect of family events and situations which make them unhappy' (1994:151). Further, they concluded that catering to children's 'faddiness' was seen as part of spoiling and being an indulgent parent. It was evident through interviews and observation that this so called 'spoiling' is part of what works in the foster family. Young people's food preferences were often seen by carers in terms of 'food personae' (Brannen *et al.* 1994:162), that is such habits and preferences which are seen as an intrinsic part of a young person's identity. Food preferences become part of a process of recognition of the young person as an individual, with a particular history of relationships to food. Thus responding to preferences became an indicator of recognition and affirmation, which oiled the wheels of family relations and helped legitimate the foster child's position in the family. Such adaptation might not be appropriate in all family circumstances but seemed to be functional in the foster family. Families seemed to be able to strike a balance between indulgence and providing a tailored response to the needs and desires of the child who in turn adapted to the wider social mores of the family, thereby generating harmony. As Mennell *et al.* (1992:107) succinctly observe, 'feeding children gets caught up in loving and pleasing them, expressed on, among other things, acquiescence to their demands for one food rather than another'.

Gender too is an important factor in the relationship with food. The making of food into a meal has traditionally fallen inequitably on the shoulders of women (Murcott 1980, 1983). Morgan (1996:158) makes the point thus:

Generally speaking, women largely assume responsibility for the preparation of food, including deciding the menus, buying the food and preparing it for the table. They may also bear a large responsibility for clearing up after the completion of a meal.

In Brannen *et al.* 's (1994) study, mothers were most likely to determine the menu for the families, followed by the mother and father in conjunction with the teenager. They placed the families in their study on a continuum from families who eat together and the mother controls the menu agenda, to families where they do not regularly eat together and the adolescent has control over the choice of food. It was

evident in this study that most families ate together with the young people being both heard and contributing to the food agenda. Food then is central in regard to domestic roles and relationships and typically settles around the female carer/mother in households:

This notion is the key to understanding the complex set of relationships which food involves for women: relationships to their husbands and children, to themselves, to their own diet and to their ideas of goodness, health and vitality. (Mennell *et al.* 1992:107)

Ashley *et al.* (2004:123) also recognise the importance of food and its relationship to the power dynamics within households and they note the 'complex negotiations that take place in the private sphere which produce the food which is prepared and the ways it is eaten and identifies the power relations in which these activities take place'. For example, in Greishaber's (2004) study of UK family life and parental conflict, mothers and girls in the study were all expected to undertake the food associated tasks. The long term effect of such discipline was for girls to learn, like their mothers, to prepare, serve and clean up for males. Greishaber saw the implementation of table manners as a socialising and control process in which children become normalised in the family eating regime. Of course attempts to regulate children through the discourse of table manners are not always successful. Similarly, Morgan (1996:162) links this civilising process to the control of appetites and notes that:

Feeding the child is never a single-stranded operation but involves wider issues to do with deferred gratification, order and control, generational differences and parental rights and obligations.

Importantly, from a fostering perspective, is the point made by Brannen *et al.* (1994) who note that eating together is a particularly important way of incorporating new household members and a means of helping to develop a sense of cohesion among reconstituted families. Thus we can see that food is an important medium through

which children can become assimilated and accepted by a family, or perceived as different and possibly rejected. We now move on to food and foster families.

Food and the foster families

Food was one of the most commonly raised themes emerging often unprompted in the interviews and also from the taped diaries in this study. Children especially talked about food, particularly in the taped and written diaries in which they recounted their day. The type and amount of food consumed appeared to help them understand the structure of the day and seemed to have greatly enhanced their enjoyment of the day:

I had a lovely dinner, I had sandwiches and yogurt.

(Audio diary extract, Carla adopted child, family one)

I had a gorgeous dinner when I got home; I had fish and chips.... After dinner we had some chocolate chip ice cream.

(Audio diary extract, Helen, birth child, family one)

Another child recorded her enjoyment of food to which the foster carer had introduced her. She spoke with enthusiasm about trying new foods and developing her food palate:

We had busgetti and salad all mixed up We had coleslaw in a dish and cottage cheese- that was nice 'cos Liz got me on that.

(Audio diary extract, Melonie, foster child, family one)

Other young people in different families also noted this change in their food repertoire, for example, Candice, foster child in Family Two, spoke of past and new foods :

Researcher: So you know how to make spaghetti bolognaise. Is that the kind of food you were used to eating?

Candice : No

Researcher: What were you used to eating?

Candice: chips , food in the deep fat fryer.

Researcher: You had lots of chips?

Candice: Yeah, we used to have chicken nuggets.

Candice had also become involved in food preparation and was beginning to develop an enjoyment and interest in food. In Family Five, the taped diary of Chris consisted of little more than an account of his eating for the day:

Got up yesterday morning, not too bad. Didn't have breakfast. After school went to Pizza Hut and I had ham and pineapple pizza with two dishes of ice cream. (Chris, foster child)

We can see how central the enjoyment of food is to young people and also how partaking (or not) of meals structured their day. Family attitudes and practices towards food can be delineated in a variety of ways, and here we turn to aspects of choice, routine and preparation of food.

Choice

Giving children choice about food was seen as important by carers and children. It was also seen as something that facilitated the process of entry and settlement. The following is an excerpt from an interview with a birth child talking about how she helps make a foster child feel at home:

(When a new child comes to stay) I like to find out what they like doing, what they like to eat. (Megan, birth child, family three)

Likewise another child talks about providing food for a foster child, as a means of displaying acceptance and warmth:

Speak to them... make them drinks, biscuits and that.
(George, birth child, family six)

Birth children appreciated the importance of food and wanted to play their part in ensuring that a foster child was made to feel a sense of membership. Carers were deliberate in their use of choice to signal interest and affect when children first arrived:

When Lilly first came, I said 'What do you like? I know what Jayne (other foster child) likes, I like pizza, but what do you like? So it softens the blow a bit. Food is important to give them what they like. You got to take it, these kids have been uprooted into foster care, just dropping on somebody's doorstep. Imagine if it was kids of mine. You got to give them what they like. (Julie, foster carer, family ten)

By way of contrast we can note Lilly's comments about a previous negative experience in foster care. She recalled unhappiness with a situation where the foster carers did not call her when family meals were ready, but often left her food to get cold, which she would then have to eat alone. It was clear to her that she was being treated differently, as an outsider:

If I was upstairs and food was read y- they wouldn't call me. (Lilly, foster child, family ten)

Lilly now feels very settled with Julie, who allows her considerable choice about the food she eats:

All the time, Julie asks us all what (type of food) we want. (Lilly foster child)

Knowledge of the child's food preference (their food personae) was part of getting to know a child and catering for their needs. It seemed that all the carers in this study were catering for the food preferences of the children in their care and often changing their own eating habits to accommodate them. Mennell *et al.* (1992) note that those who cook 'privilege the choice of family members over their own

(1992:108). Judith (Family Seven) talks about her foster child, Suxie, who reluctantly eats vegetables to the extent that the forthcoming Christmas lunch was to be free of greens as a special treat for Suxie. She laughingly recounted that her friend had been astonished by this adaptation:

Bessie (my friend) says ' there won't be no sprouts at Judith's this Christmas' !!!

Whilst the carer recounted this with humour, it was nonetheless the case that traditional festive norms and expectations had been changed to accommodate the foster child in this home. The carer continued later in the interview and again with humour:

Sometimes I think it's her home, not mine.

What was demonstrated here and in other interviews was the willingness of most carers to seek out and meet food choices of the young people and often to sacrifice their own preferences. These tangible demonstrations of care served a range of intended purposes around warmth and membership but stemmed primarily from the impulse of care and giving that defined the parenting approach of most carers within this study.

Routine and preparation

The significance of food and the routines around food for the child coming to a foster placement was evident. When Candice talked about her first day in placement she recalled she had been asked to take part in the preparation of food and this had been a memorable and important ritual that had continued for some years:

I remember Grandma (foster carer's mother) here, she lived just round the corner and every Thursday she used to make spaghetti round here. She was doing spaghetti for us when (the day) I came.

(Candice, foster child, family three)

Another carer spoke of clear roles and responsibilities with regard to meal times that helped promote a sense of reciprocity and custom:

They (the foster children) take it in turns to lay the table, clear away and put things in the dishwasher. (Dawn, foster carer, family two)

Likewise, Nadia the foster child in the above family remarked upon the routines that occur with regard to food:

Yeah. We've all got our own seats, mine is there, Dawn sits there, Libby there, Mike there etc. You have what you feel like. We say we don't mind; we don't all like vegetables but we do all have soya.

Thus, we can see that individual food personae are being catered for. The same foster child went on to note the sorts of behaviour held as important at mealtimes, she comments:

Manners, respect. Everyone, every week takes turn to set the table and clear away, like say if it was my turn I'd be doing it just before dinner and someone dries and someone washes up....(Nadia, foster child, family two)

Thus as with Greishaber (2004), we can see the importance of understandable and clearly defined rules around food, meal times, preparation and clearing up of the dishes as part of a process of learning; a 'civilising' so to speak, that is, being socialised into roles, identities and membership. For the foster child such processes can help establish a sense of belonging and acceptance.

Regularity of food

The regularity of meal times was an important factor for some young people in structuring the day; it felt like a re-assuring and comforting timetable which made the young people feel safe and cared for. Ashley *et al.* (2004:124) note the importance that is attached to food because it is symbolic of the significance and respect paid to the consumers of the meal, 'home cooked meals are seen as imbued

with warmth, intimacy and personal touch which are seen as markers of the personal sphere'. The warmth dimension of food reinforces a sense of care and responsive parenting. The eating of the food that has been prepared represents appreciation of what has been done for them. Callum, foster child with Hazel describes how Hazel caters for his needs and how his experience of food denotes a significant change in his well-being. He is most appreciative of this:

Dinner –regular 6.30. Almost like clockwork. Food is very important. I do have a very good appetite and that has only happened since I came here. I never used to be able to finish one helping of food and now I can finish about five.... Hazel is a really good cook. I do have a miles better appetite here than I do anywhere. When I go out to a restaurant I can eat but when Hazel puts on Sunday lunch and if there is any left overs, I pile them on my plate. (Callum, foster child, family eight)

Carers too expressed their own self-approval when the young people enjoyed their food and in this sense it seemed to offer a channel for reciprocal appreciation. Carers felt that they were rewarded for their care and labour through a child enjoying their food. One carer compared the foster child favourably with her step-son with regard to this important aspect of being affirmed as a carer through the appreciation of food:

He certainly has a nice appetite; I like Stu's appetite: he enjoys his food and says please and thank you whereas Stuart Thomas (Step-son) tends to just pick and eat what he wants to. He doesn't seem to appreciate the work that has gone in to it, or the thought that has gone behind it. The difference in the two lads! (Josie foster care, family four)

Josie mentions food in several of her taped diary accounts, 'so he was quite happy and he ate a good tea'; 'It was peaceful, quiet, everyone was well fed' (denoting a sense of contentment and stability). Thus the carer's comments invoke the symbolic importance of food as signified through its preparation and consumption. Josie

continues with this notion of food preparation as a demonstration of affect in which foster children can also participate:

(Stu was) very thoughtful, out of the blue he made us all nice sausage sandwiches with brown sauce for dinner, oh that was delightful, and a cup of tea, and it was very, very well received that was.

(Audio diary extract, Josie, family four)

Here she enthuses about the preparation of food by the foster child, and reveals how she too is appreciative of the time, effort and thought gone in to making the meal. Thus food and its preparation is a means to express mutuality and reciprocity. In the foster family it is especially important in demonstrating care, kindness and intimacy to vulnerable children.

Access to food

Access to food was seen as important by most carers. Josie (foster carer, family four), emphasised that she always told foster children to let her know if they depleted some item of food, so that she could quickly replace it. Others described how young people were able to feel free to take biscuits from the cupboard themselves and did not need the carer's permission, thereby giving the young people some control over their own eating. It was notable that for many children food had been a negative issue in their lives in the past, sometimes because the children had not had access to enough food, or too much access to unhealthy food in households where they could not take for granted that there would routinely be a sufficient supply of food-good or bad. This is especially true where a child has experienced neglectful parenting (Hamil 2004). Callum (family eight) talks at length about his own home family life where things were very different:

I used to have to eat very quickly because if I didn't there would be hands in, nicking bits of food because there was so many of us, six of us living in one house. We grew accustomed to each other and so we used to fight for food and stuff because (there was never enough) sausage and chips and stuff. Now I don't have to fight for the food but I still eat very, very quickly. Now

I've never had it so easy, I get twice as much and I don't have to fight for it.

In the same way that inconsistent parenting can cause unhappiness and insecurity for a child (Bowlby 1969), so inconsistent provision of food can generate anxiety for children. It is possible that foster carers could more readily exploit the therapeutic opportunities for intervention that the preparation and consumption of food offers. The provision of regular well cooked and tasty food may help a child to become more trusting and receptive, as Slater (2004) clearly elucidates in his recollections of childhood, told solely through his memories of food. We next consider the partaking of food as a vehicle and locus for communication.

Communication

The 'proper' meal is at a table, it is 'shared and promotes sociability and talk' (Ashley *et al.* 2004:125). Family narrative activity (an activity that focuses on communication) is part of a family eating together, in which meal times become a place and time for positive family conversation and interaction. Many commentators have distinct recollections of meal times and food during their childhoods, both positive (Craik 1989) and sometimes negative (Slater 2004). Thus Craik (1989:48) recalls:

Memories of the kitchen are memories of gatherings around the kitchen table, of smells of cooking, and of the sound of chatter and laughter.

Eating together was a routine but important means of communing and interacting for all families in this study. Aldgate and McIntosh (2006) also found that the majority of families in their study tended to eat with their carers at least once a day. Eating together demonstrates styles of discourse between parent and child (Fisher and DeBell 2007). Parents often show an interest in the day's events at meal times and this allows for children to share the details of their day. Nearly all of the carers and children participating in this study commented on this; they appreciated and looked forward to the opportunity for the sharing of stories and information. In his written diary, one foster child eagerly anticipates the arrival of the meal so that he can discuss recent events:

And now I am waiting for tea to be ready, which is good then we can sit down and talk about the day.

(Written diary extract, Stewart, foster child, family four)

The young people and carers frequently commented on meals as an important opportunity to disclose news, concerns, secrets and problems:

Over dinner we had a little chat because some people in my class is misbehaving. (Audio diary extract, Candice, foster child, family three)

We have a small forum every evening after school, we all sit down with biscuits and coffee. Everyone talks about their day and the difficulties they have had...we also talk every evening over the dinner table.

(Steve, foster carer, family six)

We basically get together and sort it out, in the kitchen over the table whilst having food. (George, birth child, family six)

We sit at the table and we have to spill it all out when we've got a secret.

(Nadia, foster child, family two)

More practically one carer, Hazel (family eight), noted that the dining table offered an ideal opportunity to address matters as those there were 'sitting targets' who wanted their food, and would have little choice but to stay at the table and discuss issues:

Callum attaches a lot of importance to his food. He has a good appetite but I don't think he has beaten me yet. The evening meal is the one time we are all together. The family meal on a Sunday is a good time to talk to the whole family. They are sitting targets then once the food is on the plates, they are not going to leave. (Hazel, foster carer, family eight)

Craik (1989) describes the kitchen as the panopticon of the home, as the control centre of domestic space from which all can be seen. In Family Three, where there were too many people to fit around the table, the meals were taken in shifts, with all of the children eating together, whilst the carers prepared the food for a second sitting for adults. On Sundays however tables were pushed together for everyone to commune as one large family. The carer, as others, noted the importance of the site for communication purposes and when the family had two sittings at meal times, she delegated the role of channelling the communication to her daughter:

So if they (foster children) want to ask something, or if anything comes up where Megan (birth child) thinks we should know about, she will tell us whilst we are at the table (second shift). (Sally, foster carer, family three)

The shared partaking of food is one of the most important sites for family communication, and the most important 'food event' of the week was still, predictably, the Sunday lunch or 'dinner' as it is often termed in Wales.

Sunday lunch: a movable feast

The British Sunday lunch in the 1950s became second only to the Christmas dinner as a symbol of the ideal nuclear family and its intimate domestic rituals (Hill 2007). However this tradition would seem to be more generally on the decline. A survey of adults revealed that just over 6 million people now sit down regularly to Sunday lunch. In 1961 the number was 12.7 million (Hill 2007). Interestingly in this study most of the foster families talked of the significance of Sunday lunch, and the practice of the family gathering for this event:

And most times they call in and have their tea. On Sundays it is like mad house movies here, everyone comes for Sunday dinner...

(Julie, foster carer, family ten)

We always sit at the table for Sunday lunch and everyone gets together.

(Lilly, foster child, family ten)

We have cooked dinner every Sunday. (Candice, foster child, family three)

Many of the children and carers (as above) referred to the 'cooked dinner' as noted by Murcott (1983) in her study of food in South Wales. Murcott found that women put great store by preparing meals for their men and that a proper meal was a 'cooked dinner'. There is a shared view that a proper meal, a Sunday meal, should contain meat, vegetables and gravy (Ashley *et al.* 2004). When asked what happened if the family was away on a Sunday for some reason, both Candice (foster child) and Megan (birth child) were both confident that 'we have the cooked dinner when we get back'. Thus even if the routines changed, the food ritual did not. Similarly, the birth children of Judith both noted that if for any reason they could not come for Sunday lunch it would either be 'plated up' for later in the day, or a visit was made the following day and it was eaten then, but nevertheless it was made and the routine adhered to:

I might pop in on Monday and have it. She always makes Sunday dinner. If I am playing football in the area I'll have it. There is no set rule. There used to be when we all lived together. (Kevin, birth child, family seven)

Thus we can see some flexibility and responsiveness to the individual needs of each family member. Hazel comments in her taped diary about those attending Sunday lunch and she accounts for those who cannot come. The assumption is that family will join for lunch, unless there is a pressing reason not to:

Sunday is a family day. The family comes and goes. Jim (one of her sons) is working, so Larry and Carmel (close family) come up for Sunday dinner. My daughter is down from Llanarth, she comes for the day every Sunday. My son doesn't come this weekend because he is busy getting the nursery ready for the new baby. (Hazel, foster carer, family eight)

In another taped diary, Josie notes the additional significance (and the added burden) of preparing the Sunday meal. Here she notes that it remains a time consuming task despite advancements in cooking technology (see Murcott 1980):

Reflecting back on the day, I'm amazed how long it took to fill up the whole day cooking dinner for everybody. Amazing you can cook the tea on weekdays and it takes 20 minutes, an hour at most. Sunday you spend all blooming day doing it. Anyway we had a nice chicken roast dinner.
(Josie, foster carer, family four)

We can see how important it is for Josie to feel that the time and effort is appreciated. She went on to note that it was a peaceful day as everyone ate well. For Josie it was the preparing, the eating and the communing that contributed to the harmonious atmosphere in the house on that day.

Major events in the family are celebrated with food. This was noted by most of the respondents when discussing birthdays, Christmas and anniversaries. The coming together of the family, the 'doing' of family through celebration was of much significance. Fostering is likely to create difficult and emotive times for children living amongst strangers. The foster child has to learn the mores, rituals and expectations of the family. However despite food having the potential to be a harmonising factor it can also be a site for conflict, as is explored next.

Conflict

Greishaber (2004) looked at the eating routines of a number of families and observed that the eating regimes could be interpreted as disciplinary techniques through which families and individuals within them were normalised. As Greishaber notes, 'the pervasiveness of normalisation processes is exemplified by the way in which these processes, once established, exert such control over the body that persons become self regulating' (2004:123). However, conflict can also be created or maintained around the partaking of food. Mealtimes can provide a site for resistance and generate frustration for all parties concerned. Thus the way in which carers chose to manage the family eating experience was important, for example, some foster children recalled unpleasant experiences in previous foster homes over the consumption of food:

In my old house you had to eat everything, every scrap of food. Here they just say leave it...(Lilly, foster child, family ten)

Her current carer allows her to leave food and this was seen as a helpful strategy by the young person (although clearly food intake will in some cases have to be regulated by carers). Rachael describes trying to find a happy medium between getting the young person, Chris, to eat well but not gorge himself:

Dinner time he ate like a double portion of lunch which isn't something that he does very often, he tends to eat less rather than more. So on the one hand it's a good thing to see him eating well, on the other hand you wonder what is going on when he eats so much. He ate a good lunch..., lots of sweet things and I think he had three chocolate éclairs and then he started on the pizza and I was really nervous that he was going to vomit on the table where we were because he has done that in the past...

(Rachael, foster carer, family five)

Here, Rachael describes finding it difficult to be out with Chris in public because of his eating habits, she is clearly pleased that he is eating well as he usually eats very little, but he vacillates between extremes and struggles to find a balance. Rachael's partner, Mark (Family Five), in his audio diary elaborates on this theme of difficulty over public displays of eating and the lack, as he sees it, of appropriate behaviour:

Yesterday was quite an important date for us and Chris because it's our anniversary. He'd been with us exactly a twelve month yesterday so what we did we went to Llangenith and there is a lovely restaurant in Browns and we used that as an excuse to go shopping in Browns and then we had a lovely meal with him but even there- his behaviour. He didn't seem to have any social skills, like he'd leave the table half way through his meal, then come back and finish off. As I say no social skills at all, so that was quite a revelation, I hadn't seen it that pronounced before. And his eating- I know they haven't been taught or they haven't been taught any social stuff at all, but its amazing that I've noticed with these children the difference between

nature and nurture. If you don't tell your child anything they don't learn and these children haven't been told and so they don't learn. A lot of the social skills we take for granted are what we glean from our parents from the people around us and if you haven't got that in your life you are losing out.

It is particularly evident from this excerpt that Mark's language in the use of 'these children' makes them 'other', and contrasts notably with much of the inclusive language used by other carers. Mark invokes this trip to Browns to theorise about genetic versus social influences on behaviour, again stressing the significance of behaviour at meals as a measure of social competence and identity. This excerpt from Mark's audio diary seems to resonate with Morgan's (1996) account of food and the civilising process. Similarly, Bell and Valentine (1997:63) note: 'The dinner table has been identified as an important site for the socialisation and civilisation of children'. Implicitly or explicitly it is within the remit of fostering to attempt to socialise children with regard to acceptable norms of behaviour around meals and food. Rachael too was struggling to cope with the way in which Chris consumed food, particularly in settings outside the home:

Well its actually bad enough dealing with that at home, but if you've got to try and deal with it in somebody else's house! He did start coughing (which normally precedes vomiting) and I thought here we go...But it didn't come to anything and he was just enjoying himself so that was OK.

(Rachael, foster carer, family five)

Whilst eating out in public is also a means of displaying the family, the fractures and differences are also on show for others to see. The experience of not being fed regularly can create significant emotional responses in children. The warm, satiated sensation of being full and content will not be one that some fostered children associate with food. They may well draw on their negative experiences and anticipate that meal times will be chaotic. They may find it difficult therefore to respond positively to eating and meal conventions until they can be certain that the food will keep coming, and that their needs will be met. Thus a child may seek to disrupt meal times in order to avoid the anticipated disappointment. Thus the

regularity and consistency of providing sufficient, good and appropriate food will be of vital importance for the foster child, even if it is not well received in early weeks and months. Care and preparation of food conveys the message that a child merits special attention and that they may in fact be worthy of love (Hamil 2004). Children may have special desires with regard to food which may to some extent be indulged to reinforce the message of worth. All of the carers in this study appreciated this aspect and would not impose food to which children were in some way averse. This did not entail a free rein for children with regards to food choice but a certain flexibility and responsiveness.

In most of our homes, meals are usually confined to a particular area within the home, the kitchen or the dining room; snack times are more variable in their location. Children are often required to remain in one place to eat so as to enable oversight by parents. Judith comments on Suxie and her eating habits and the tendency to snack rather than wait for a more substantial meal. She has imposed restrictions for Suxie thus:

Today now like she came in from school, she went into the cupboard with crisps, I said 'you are not having them'. (She said) 'Why?' 'Cos you are going to have your tea'. She said 'but I'm not hungry' I said 'that is great then you don't need crisps'. I think she used to eat a lot of rubbish where I won't have it. She could come and eat three bags of crisps, I wouldn't mind as long as she had had her (proper) food.

(Judith, foster carer, family seven)

Suxie is not denied access to food and is allowed to snack once she has eaten her main meal. Eating then was a vehicle for many family-affirming events in this study. Meals provide sustenance, for demonstrating care, for bonding and allegiances, for celebrating, for communing and communicating, for managing conflict, for civilising and indeed as an acceptance and appreciation of the providers by those who consume the meal. Kerry below during her interview talks about a young person who was particularly difficult to care for because of his behaviour outside of the home. She contrasts this behaviour with his propensity for good

conduct in the home which she relates to his capacity to settle down and appreciate a comforting meal:

And yet he's got a lovely side to him, nature, he loves, I mean, he can be naughty all day and he can come in, he's very clean, he's got to have a shower, and then he'll come down in his Harry Potter dressing gown and he has boiled eggs and toast soldiers. (Kerry, foster carer, family nine)

Conclusion

This chapter has sought to demonstrate how the families in this study display their family practices and their parenting styles in relation to food. Caring is demonstrated through the preparation and provision of food. Food is a neglected topic and merits more analytic focus with regard to how best to help a child settle into a foster home and be incorporated within the family network. The child becomes part of the enactment of family by their very doing of a communal activity such as a shared meal. Douglas (1984) argues that a meal can both articulate social relations inside a household and define the boundaries between household members and outsiders. Family meals can therefore define the foster child as an insider. It is clear that the therapeutic function of food could be further explored in relation to family care (Hamil 2004). Food has the potential on many levels to create a warm, physical and satisfying experience, for example Slater (2004), chronicles his entire childhood through his relationship to and memories of food. He is able to reflect upon the loss of his mother through the resulting changes and disruption to his meals and manages to connect emotions and memories to the physical experience of taste. Slater (2004) exemplifies this point in an evocative and sensuous recollection of toast made by his mother:

My mother is scraping a piece of burned toast out of the kitchen window, a crease of annoyance across her forehead. ...My mother burns toast as surely as the sun rises each morning. In fact, I doubt if she has ever made toast in her life that failed to fill the kitchen with plumes of throat-catching smoke. I am nine now and have never seen butter without black bits in it. It is impossible not to love someone who makes toast for you. People's failings,

even major ones, such as when they make you wear short trousers to school, fall into insignificance as your teeth break through the rough, toasted crust and sink into the doughy cushion of white bread underneath. Once the warm, salty butter has hit your tongue, you are smitten. Putty in their hands.

(Slater 2004:1)

This notion of 'putty in their hands' made possible through food that symbolises care, is highly relevant in relation to our thinking about how foster children may be helped to overcome the difficult trials and tribulations that face them. While this chapter has focused upon the social and emotional significance of food it has implicitly invoked eating as a self-evidently important bodily practice (See Bell and Valentine 1997:24). We now need to make bodily practice a more explicit and broader research topic than food consumption. We do this in the next chapter in order to better understand the embodied experience of being fostered and doing fostering. Thus we move from food to aspects of the physical in the foster home: hygiene, washing, touch and privacy- the multiple yet rarely examined day to day intimacies that construct family practice in the foster home and which the foster child, as a stranger, must learn successfully in order to become and remain a welcome and cared for member.

Chapter Eight

Embodying the child in foster care

Introduction-embodiment

In this chapter we examine the domestic world of fostering with particular regard to embodiment and the body, the boundaries around it and related aspects of intimacy in foster home settings. Themes around physical care, nurturing, space and privacy, touch and cleanliness are explored in order to reveal more of the private encounters that construct the embodied world of fostering. The body and embodiment surfaced prominently as a theme in most of the interviews and taped diaries, particularly from the children. The chapter aims to reveal the embodiment of foster care and give a sense of the 'smell of practice' itself (Ferguson 2008). Issues of the body whilst central in a sociology (Shilling 2003) and geography literature (Aitken 2001) have been virtually absent from social work (except for self care - see Cairns 2004:163) and constitute a topic that has almost been avoided. The subject of the body and embodiment is rarely explicated in social work assessment, materials and debates, nor is it directly invoked in social work's professional standards and procedures. The chapter will demonstrate that the body is a subject that requires far more research and consideration when illuminating the lives of 'looked after' children.

For Csordas (1994:12), the term embodiment is 'an indeterminate methodological field defined by perceptual experience and mode of presence and engagement in the world'. Indeed as Watson and Cunningham-Burley (2001:1) argue 'The body from being under-researched and under-theorised, has now become central to the sociological project'. Notions of the body have moved from measuring to meaning; to what the body represents, rather than measuring its size and changes to it. There has been an increased theoretical focus on body matters as relating to children in recent years (James and Prout 1997a; James *et al.* 1998). Sociology is an important site from which to theorise the body particularly those of children as they are often viewed as biologically and socially unfinished (James and Prout 1997a). It is only recently that sociologists have begun to appreciate the importance of embodiment in revealing key ways in which children actively participate in social life (Prout 2000). The emphasis within sociology has been on children as active creators of social life

and childhood itself as full of reversals, transformations and inversions rather than being some progression towards an ever closer copy of adulthood (James and Prout 1997; James *et al.* 1998).

Usually in foster care, the child as a stranger, becomes a family intimate in a relatively short but limited time frame. It is taken for granted that the child stranger can enter a family with relative ease (albeit with some discomfort), without first understanding the nuance and subtle negotiated arena of the new family. Family practices in this sense involve both the physical and emotional practices that have to be learnt by the foster child. At the same time the family has to learn to respond to the child and their needs and demands. It is the recognition of, and careful consideration of the ways of dealing with intimacy and corporeal issues that contribute to successful fostering and foster care relationships. These aspects of intimacy, of emotional work, rarely surface within empirical sources nor within much of the procedural and administrative discourse of welfare, which tends to offer more general statements with regard to standards and safeguards. In contrast to social work, there has in fact been an upsurge of interest elsewhere in the human body within social sciences (Williams and Bendelow 1998:9). However, despite these new developments it can be argued that there is still relatively little systematic focus on the family and family issues within the sociology of the body. To some extent this absence is curious. Family practices are, to a very large extent, bodily practices. Family themes and 'family concerns revolve around issues of birth, death and sexuality and the connections and relationships that are made and unmade through these' (Morgan 1996:113).

Within fostering, families are profoundly influenced by caring for a stranger and as a result do not necessarily conform to some notion of a highly insulated nuclear model. As we shall see, families that foster function in a much more loose and networked system of relations with extended family and friends. In exploring some of the contours of fostering within the typically hidden realm of the home, it has been important to draw upon sociological literature from Douglas (1966, 2002), Morgan (2006), Shilling (2005), Watson and Cunningham-Burley (2001) as well as on the social work literature of Chase *et al.* (2006), Piper (2001) and Petrie and

Simon (2006), for the main theoretical underpinnings of this chapter. In revealing how the body and embodiment have significant implications for social work research, social work theory as well as the policy and practice of foster care services, the chapter will address corporeal themes of bodily comfort, gender, appearance, boundaries, touch and finally corporeal transgressions.

Bodily Comfort and nurturing

The theme of bodily comfort arose often in data from the children. The importance and symbolic nature of bodily care appeared to be very important for some children, particularly for girls. This notion of bodily comfort and care is noted by Cameron and Maginn (2007:6) who describe children who have experienced rejection as likely to be damaged and describe a continuum of parental behaviour as follows:

One end of the continuum is marked by parental acceptance which involves the warmth, affection, care, comfort etc, that children can experience from their parents and other care givers...The negative end of the continuum is marked by parental rejection; this refers to the absence, or the significant withdrawal of positive feelings in parental behaviour and by the presence of a variety of physically and psychological hurtful behaviours and affects.

The ordered routine of personal, physical care was both comforting and reassuring for children in this study and they valued the nurturing aspects of this care. Children are socially constituted as essentially vulnerable and it is widely assumed that they can only survive if intensively nurtured and protected by adults (Christensen 2000). Whilst it can be debated that not all children need intensive nurturing it can be argued that foster children in particular need to learn that they can be nurtured and to enjoy it. In turn they can develop self nurturing capacities as well as learning to nurture others. This much was evident from the data which revealed the critical importance of bodily care as a basic indicator of warmth and inclusion in the family. Family One provided a clear demonstration of the importance of bodily care. The family comprised three girls, (birth, adopted and fostered) and a male and female foster carer. Examples from the audio taped diaries from the girls follow:

My food was warm and delicious and the hot bath was lovely, especially when I lie, listening to the rain. Thank you.

(Audio diary extract, Helena, birth child, family one)

Had a bath, now I'm going to sort out my clothes for tomorrow over my Mum's. I had a shower, straightened my hair and it looks nice. I changed my belly bar. (Audio diary extract, Melonie, foster child, family one)

Now I'm in bed and after dinner we had some chocolate chip ice cream. Then I went up for a nice warm bath and washed my hair. Then I done my teeth and went downstairs to say goodnight to my dad and then I jumped in bed and my Dad and Mum came up and said goodnight I am going to have a very nice sleep. Night, night.

(Audio diary extract, Carla adopted child, family one)

In the car I fell asleep. Helena (birth child) carried me out of the car and got me undressed. Then I went to the toilet and I put my cream on my eczema and I had my eczema tablet. Goodnight.

(Audio diary extract, Carla adopted child, family one)

Steve always puts Carla to bed on a Wednesday. He puts her cream on. Carla puts her own E45 on most of the time, but when her skin is bad we have to use steroids and she is not allowed to put this on. On a Wednesday Steve puts her to bed and I pop in and give her a kiss before I leave.

(Audio diary extract, Liz foster carer, family one)

As revealed in these diary extracts, it was the 'routine of care' for each of the girls' individualized needs, which helped demonstrate to them and us the nurturing family environment in which they acquired a sense of care for self and for one another. The importance of physical caring can be seen in displays of intimate care for the child's specific needs (e.g. eczema treatment). All three girls regardless of their status of fostered, adopted or birth children, referred to and seemed to enjoy a sense of fit within this comforting pattern of care. Similarly in another foster family a child in

placement talked about the organization of washing routines and bodily care:

He (foster carer) always makes us wash our hair and have a bath or a shower. We don't get out until we've done it, which is different (from own family experience) really....Carl goes in the bath first, then Libby gets in, then Jake. They are really strict about that. (Nadia, foster child, family two)

Carers felt that boys also appreciated some of the physical comforts and the concern this expressed:

He returned (after running away) and he hadn't washed or anything I said have a hot shower, look after yourself and go to bed because it looks as if you haven't slept for days. (Hazel, foster carer, family eight)

Here the foster carer demonstrates her care for the young person, regardless of his behaviour by putting his physical needs first. There were similar accounts from other carers about physical care as a prime display of caring despite bad behaviour outside the home. Backett-Milburn (2000) in her study of families, suggested that children's bodies often need less resources and care to maintain them, as children are naturally active and healthy. However an emphasis on bodily care within fostering, serves far more than to maintain the body but acts as a clear display of caring, as a means of emotional reassurance as well as to provide for the physical well being and comfort of children. The emotional message underlying the behaviour is that the child's needs are paramount.

Gender

Interviews, observation and audio tapes revealed frequently the salience of gender in the way that care was shaped and individualized. Some families tended to care for girls and preferred to do this, other families preferred to care for boys. Families therefore provided what could be seen as a 'specialist' service in which 'gender fit' was very important. This is demonstrated in the following dialogue between Kerry and Mervyn (family nine), a couple who have been fostering for some years. They have grown up birth sons, and have extensive experience of caring for boys:

Kerry: Boys are less trouble

Mervyn: How can you say that?

Kerry: Boys are boyish; they're more affectionate, definitely more affectionate. I've always liked the relationship with boys and the trouble is we haven't had a girl.

By contrast, Liz and Steve (family one) had two daughters but no history of a male child to care for. The girls in this study appeared to need and value the physical caring, especially that which enhanced their appearance, and this was recognised and built upon by the carers. In this respect it seemed that the children, particularly girls, benefited from care that was gender sensitive:

This morning was spent with the girls, washing hair, having baths and talking. (Audio diary extract, Liz foster carer, family one)

*The three girls, when they do girly things, they do them together...
(Sally, foster carer, family three)*

Clothing and gender are inextricably linked (Barnes and Eichler 1992). One carer made particular reference to gender and the need for the female body to reflect the femininity of the individual and the gender of the child in foster care. Whilst this could of course be seen as some unreflective promotion of a gender stereotype, it has to be understood in the context of carer assumptions about their role. For example, the carer described a girl who came to her wearing 'scruffy, boyish' looking clothes and with her head having been shaved; the girl came to the placement with 'pitifully few belongings in a plastic bin bag'. The carer perceived the need for the girl to re-define herself and her gender, so that she could begin to find a secure positive identity and to value herself. This also helped the child to feel that she could fit in. Finding her sense of femininity and a feminine identity appeared to be part of this:

We grew her hair, we went out, we bought her new clothes, pinks and lilacs and, we got rid of everything from before and we went out and fitted her out in all the girl colours. I mean, we couldn't do anything with her hair, so we bought some slides and one thing and another and slowly she came to be this little girl. (Sally, foster carer, family three)

The girl, according to the carer and the placement manager, had made great progress whilst with the family and still remained living there at the time of interview. Sally recounted a time when one rushed morning she had tried to get the young girl to wear a brown khaki, 'boyish looking coat' to school, when they could not find her usual coat:

...she couldn't find a coat, sorry but maybe she had left it in school, so she needed a proper coat on to go to school and I took out this brown one and I said to her, 'there you are you can put this on', she said 'no'. I saw it in her face, 'put it on please, it won't hurt, it's only to go school', she said 'no I don't like it, ...I don't want to go back to being a boy, I don't want to be a boy, I'm not a boy, any boy, am I ? I'm not a boy'. I must say she was dreadful (upset), so I put that in the bin that day, let her see me put it in the bin and tied it, it must have reminded her something in that anorak, reminded her of the past and all of a sudden she was going to turn back into what she was before, whatever that was. (Sally, foster carer, family three)

Here we see an example of a child who had perhaps not had her feminine needs addressed in the past and wanted to be seen as a girl rather than more generally as just a child. The girl could be seen as acquiring an embodied sense of girliness.

Similarly, another young woman talks about the importance of the foster carer understanding her desire to be 'girly' and providing a setting for intimate encounters that help create a desired sense of gendered self:

I always wanted a girly Mum to share make up and clothes, and to be able to talk to but I can't (with my Mum). Like with Dawn (carer) she really likes make up. (Nadia, foster child, family two)

Given that many of the girls in this study are of the age for onset of puberty (see table 8.1) and subsequent menstruation, the need for a private, feminised space with a significant female role model (in the absence of a positive birth mother) could be seen as vital.

Table 8:1 Age of girls/women

	Birth child	Foster child	Adopted child
Family One	Girl age 13	Girl age 13	Girl age 9
Family Two		Girl age 12 Girl age 15	
Family Three	Girl age 16	Girl age 9 Girl age 10	
Family Four			
Family Five	Female age 20		
Family Six	Girl age 16		
Family Seven	Adult female	Girl age 14	
Family Eight			
Family Nine			
Family Ten	Female 23 Female age 20	Girl age 12 Girl age 16	

Prendergast (2000) in her study of girls at the start of menstruation, found that they looked to their own mothers at this time. She argued that menarche carries 'weighty pre-sentiments for girls, marking an end to childhood and the re-mappings of bodily experience, meaning and value' (2000:103). Such mappings are often done by girls alone, in isolation from their peers or other adult women, except for the mother. Prendergast argues that the onset of menarche is an intense phase in the acquisition of gender and difference for girls and occurs in a world of mindfulness and closure as it is rarely discussed openly across the genders. She goes on to assert that girls feel quite different at this time and often feel that they want to be quiet and alone.

The menarche is a moment of embodied transition and mothers are the main source of information about menstruation, bearing messages about hygiene and secrecy. This time also acts as an opportunity for 'protective discourse between mothers and daughters' (Prendergast 2000:103). Many young girls will be in the care system at the time of the onset of the menarche and need this important, personal female discourse with a significant female whom they feel comfortable with, this might be the female carer or a female residential worker. Thought and preparation are required to enable a foster family to provide a young woman with the support required to traverse this embodying experience. The menarche requires a watchfulness of the body, which needs to be kept under control it requires good maintenance of the self (Aitken 2001). The descriptions of the girls in the family with Liz and Steve and their daily washing routines may reflect some of this behaviour. Meanwhile at the same stage boys are increasing their physical prowess, building strength and publicly demonstrating their changes and will also need a significant adult male to whom they can relate (Weston 1997). We shall see in later sections that foster families impute different gendered needs for boys and orient their family practices accordingly.

Bodily adornment

Turner (1980) observed that the body may be conceptualised as the social skin upon which the drama of socialisation is inscribed. Bodily adornment becomes part of the language through which social actors are constructed and represented (Turner 1980:112). The carers and their families in this study all put much store in providing clothing for the children. It was important to them that the children had clothing about which they could feel proud. Carers were particularly aware of how few garments some children had in the past, and the importance of promoting a positive self image through appearance:

He (arrived and) sat in the arm chair and he brought his stuff in a black bag; his stuff was junk . His clothes were rags. I thought I've got better rags than this. I felt sorry for him. (Hazel, foster carer, family eight)

The conceptual division between the inside and the outside of the body so marked in

sociological literature (Simpson 2000) was mirrored in a common sense way by the carers in that they saw their roles as divided between caring for the outer body through observing, clothing, cleaning, grooming, touching and also nurturing the inner vulnerable core. An (adult) birth daughter demonstrates this twin concern and the synthesis of both in an account of a foster child trying on new clothes at home that were purchased from a catalogue:

She tried it on (a blouse) and liked it. One pair of jeans had to go back. She (also) had a trouser suit but the trousers did nothing for her. She looked beautiful, gorgeous but I couldn't say it (that the trousers didn't suit her). If she was more secure I could have said 'don't have the trousers'. I don't think she has had stuff (in the past). I have a cousin who is 12, who I could say different things to her because she is more secure. I still like Suxie (foster child) for who she is. We've built her up - we don't want to knock her down. (Katie, adult birth child, family seven)

Another carer describes the importance of appropriate clothing in the preparation for holidays:

Like we went to Butlins in February, and I took them into town before we went and they choose seven party outfits for the nights, seven different outfits, they choose their own.....and Peter chooses all these mosher jeans, he wants to be a mosher now ...he thinks he's cool, so he choose all these mosher, really quite smart and the girls choose something that they wanted. (Sally, foster carer, family three)

Choice and freedom to choose clothes were seen as positive status-enhancing experiences for children. Boys too were appreciative of attention to the outer body through clothes, especially when their birth parents had not been able to provide much clothing for them. The provision of clothing appeared to symbolize to the individual child that they were cared for :

They were the things that meant the most. I don't know I'd come home one day and there would be a new jumper or a hooded top or a pair of jeans on my bed if she knew I'd had a bad day... and clothes.....Clothes tend to cheer me up. Just little gestures like that. It is always nice to feel wanted.

(Callum, foster child, family eight)

Several carers, spoke of birth parents selling the foster children's new clothes in order to raise money. This meant that for some children, when they went to visit their birth parents, they wore older clothes which would have little second-hand financial value:

Over Christmas he went up there all of his clothes had gone, she'd sold them. I said 'next time you go, you go in scruffy clothes.

(Foster carer, Hazel, family eight)

Young people talked about their previous experiences of not having access to their own clothes and having to share clothing, particularly when in larger families. They stated they had much more independence and were valued when they were given a variety of clothing to choose from. This aspect of acquiring a more developed sense of identity and agency can be termed 'personisation' and can be discerned in the following data extract:

In the end I was sharing my room with my cousin for about four years...and I get, well the biggest problem was sharing clothes with my cousins and stuff like that. Now I go in my wardrobe, every thing in the wardrobe, in the drawers and on the floor (laughs) is mine. I can wear what I want.

(Callum, foster child, family eight)

Carers whilst providing clothing also expected the foster children to respect and look after these, in what they deemed to be an appropriate manner. Thus attention to the exterior of the body while expressing love and concern can also be a means of social control (Simpson 2000). A carer in his taped diary describes his frustration

when a foster child does not comply with expectations about care of clothes and by extension self image (and indeed implies for some a negative reflection of the family and its capacity to care):

*(I say) 'No Chris you can't wear those trousers, you can't wear that shirt, it's dirty. Where is that (other) shirt? Where are all of your clean shirts?' And they are all over the floor in the bedroom or just thrown over the chair
(Audio diary extract, Mark, foster carer, family five)*

Thus for some carers, with the provision of clothing also came attached clear assumptions of responsibility for its respectful upkeep; an intended inculcation of self care and responsibility within the foster child. It was the provision and physical care of clothing that appeared to symbolize for children a world that was ordered and nurturing, and much appreciated by most children in the study:

In the summer all our winter clothes goes away somewhere - I don't know where. In the winter we have them back out and our summer clothes goes away. (Nadia, foster child, family two)

Nadia compared this system favourably to the chaotic lifestyle that she had experienced when living with her birth mother. Indeed she viewed this planned and forward thinking aspect of care as wholly distinctive because it contrasted so sharply with her own mother's chronically disorganized world.

To repeat, the attention to the exterior of the body can express love as well as social control. The child's visible appearance is acted upon by others, as it provides an acceptable surface, it exhibits the status of its carers and is a moral statement of adult achievements (Christensen 2000:48). Contrariwise, the child may also reflect the pathology of the family and in a circular way, the pathology of the family could become attributable through the pathology of the child. Pathology in this context, being 'read' from the physical demeanour and clothing of the child. This point is made by Morgan (1996:128):

Bodily appearance stands for the social status and standing of the individual while that embodied individual also stands for or reflects the social status of the family from which she or he comes.

Thus it could be said that carers wanted the children to dress in a way which reflected their own sense of status, and would reveal to the outside world the sort of care which they were providing for the children in their family (see Finch 2007). Given the pressure on the acquisition of commodities in late modern society, there is a tendency for individuals to place ever more importance upon the appearance and presentation of the body as a constitutive of self-identity (Williams and Bendelow 1998:73). Clothing has taken on much significance for children over the past few decades (Wyness 2006), especially for those in less affluent families. However it was not the status of designer labels of clothing that the participants in this research referred to, nor did carers seem overly acquisitive on behalf of their foster children. Rather, the provision of clothing was understood less as status but much more as representative of thoughtful nurturing and care. For example, one foster carer prided herself on the foster children not being distinguishable from her own children in respect of their external appearance:

They never ever get it right. People who don't know us very well but know we foster, never ever once have got it right. (Sally, foster carer, family three)

Body boundaries

Rules around uncovering the body were explicit in all of the families in this study. The revealing of the body was often restricted to private space. Bedroom space was clearly delineated for example (as discussed in Chapter Nine), and all families that I interviewed had an explicit rule that everyone knocked on a bedroom door before entering and in some families nobody entered anyone's bedroom. This was viewed as particularly pertinent when there were both boys and girls living in the home. One carer explained that this rule was so well inculcated within the children that on one occasion when she asked a foster child to go and get something from her bedroom, he asked for clarification and was very reluctant to carry out this task.

Another family ensured that if they had a male foster child in the house, as well as their own two daughters, then they had to make sure that there were locks on the bathroom door and the male foster child would stay downstairs when the girls were changing (they had experienced an incident in the past when a young male foster child had inappropriately watched and tried to touch the girls). Thus the gender of the foster children coming to the home was central to the functioning of the family. Hence, the importance of privacy, of covering the body and never revealing it, regardless of the gender of the foster child. This was clearly stated by all families within the study, as exemplified below:

For a start you can't walk around in pyjamas like you would with your own child; making sure everyone has their bedroom door shut when they go to bed. It just comes natural; it is just part and parcel of life now. Don't get me wrong, Suxie has been abused, so I'd say go and put your pyjamas and dressing gown on and watch telly....She feels more safer with clothes on.

(Judith, foster carer, family seven)

These rules explicit and contingent impacted upon birth children too and inevitably influenced the behaviour of birth children. For example, it is hard to imagine being as mindful of the body at all times within one's home as the young respondent below:

You can't just lay around in your pyjamas watching telly and eating chocolate. (Charlie, birth child, family six).

When questioned about this, Charlie stated that it was a basic if implicit rule that birth children did not reveal their bodies when foster children were present. He also stated he would be expected to share his chocolate, if it was seen by one of the foster children. Thus he only felt relaxed in the privacy of his bedroom, which he shared with his brother. Similarly Kevin, an adult birth child in Family Seven, described not being able to lounge around the house in some relaxed way and that this was a decision he had taken for himself:

Kevin: You couldn't really lounge around (when asked what he meant, he continued).. (In a) pair of shorts or whatever...

Researcher: Did your Mum make it very clear you couldn't do that?

Kevin: No not really, I think it was more me than anything.

A sense of risk or potential risk lay behind much of these often self-imposed and informal rulings that made the body a self-conscious object in day to day domestic arrangements. Another carer who had a young person placed with her with a history of sexual offending, talked about managing that risk more explicitly, ensuring that even babies did not wander around without clothing:

....a couple of our friends they've got very young children and they can sometimes go out, out of the border of safe care and not realise it. Like a year ago we had a little one running around with ball and his mum took it, running around in the paddling pool and I said (to his mother), now I really think it's best that you put his pants on whilst he's doing that, seeing his bottom and things like that. So they're the sort of things that you instil but I can't, all I can do is guide and watch. (Josie, foster carer, family four)

In brief, there are rules and practices that constitute a 'curriculum' for the body (Simpson 2000) and detail what kind of embodiment is acceptable within different situations (e.g. in school you must not run, or you must not chew gum). Research by Simpson (2000) into school life describe formal school rules in particular as taming children and making them sensible. Similarly, foster families too had written rules, which were posted in the home, prescribing the covering of the body (see appendix 4). One foster family had clear rules about wearing dressing gowns if going to the toilet at night:

The bathroom, shower room are downstairs please wear your dressing gown when going to and from the bedroom to those rooms we don't want to frighten the cat. No worries flushing the loo in the night.

(Excerpt from Josie and Philip's rules, family four. Appendix 4)

It may be that all families have similar types of rule at some implicit level, but rarely so clearly delineated as to be written and posted on the wall, as in some of the foster homes. In essence however, schools and families are centres and domains for discipline and structure. Parents and teachers are in that sense experts in body management (Simpson 2000). Children are told how to dress appropriately within both the home and the school environment. Similarly, there are rules of behaviour in the home. For example, one particular family struggled with rules of bodily hygiene, which one young person in placement found difficult to comply with:

The constant reference to 'have you cleaned your teeth?' 'Have you washed your face?' I find tiring. (Audio diary extract, Mark foster carer, family five)

Thus, young people had to learn the rules of engagement within the family in order to fit in with family expectations that had built up through years of family practices in regard to foster care, and particularly with regard to the body and its careful self management.

Touch

The covering of the body and the heightened sense of privacy in relation to the body in foster homes, led me to consider the importance of touch for children in foster placements and how limited their experience of this was for some. Touch is vital for all people as reassurance and a means of communication. Yet because of the risk of abuse allegations (Minty and Braye 2001; Sinclair *et al.* 2004) and because of the bureaucratization of the caring role, it may be that some children in foster care are rarely touched, however this did not appear to be the case in this study. It is of course important to remember that this is a study of successful fostering and for that reason the nature of physical comfort was perhaps clearer and less risky and the children themselves judged as less likely to view touch as an opportunity to complain or allege inappropriately :

*Oh, he did ask for a cuddle after school, which is something that doesn't happen very often, so I gave him a little cuddle.
(Rachael, foster carer, family five)*

Here the carer was responding to the child's request for a cuddle and it was important for the carer to know when the cuddle would be well received. Foster children and birth children noted the importance of touch, signifying care and concern over and above that which had been anticipated:

Just small things she said like um letting me know that it would be alright, and comforting me and little gestures like hugging me.

(Callum, foster child, family eight)

The young people in placement seemed keenly aware that there were certain basic rights that they could expect when in foster care. Those carers who were willing to give in addition to these rights were deemed by young people to be demonstrating exceptional care. This was the case for boys and girls alike:

He (foster parent) is a real people-person. He is a very funny person and a very serious person as well. I found living with him he'd mess about 'do you want a fight' just messing around we just got on so well from the moment I came here. He was very hands on, he'd put his arms round me and stuff. Again gestures...from both Hazel and Josh with Hazel embracing ...it would be when I needed it whereas with Josh it would often be as a friendly arm around, Hazel would be a motherly hug.

(Callum, foster child, family eight)

Katie, an adult birth child (Family Seven) comments on the development of her relationship with Suxie:

..during the first 6-8 months, I wouldn't say that Suxie and I had had a conversation ; I tried very hard but nothing at all. She wouldn't shout. Now she has started to talk to me. I don't know what works with her. She never really asks for anything. Some children want this want that, she is not like that. I don't know what makes it work. She just loves being cuddled (now).

Suxie was never like that but now I often give her a cwtch (Welsh for cuddle). I tug her hair a little bit, playful you know and she loves it. When she is quiet she is really attached.

Above we have an adult birth child reflecting on the needs of the child in foster care and how as the child's confidence has grown she is benefiting increasingly from physical touch. By contrast, the social work profession has become much less likely to view touch as a means of reassurance to children within the social work relationship. Piper *et al.* (2006) see this lack of touch as part of a culture of fear about body and risk and some distance from a traditional culture of care in social work. Thus, current social work practice is viewed as fuelled by fear of accusation and litigation rather than an over-riding concern for a child (Piper *et al.* 2006:151). Gilligan too noted this fear of allegation in focus groups undertaken with male foster carers and observed that 'the risk of allegations being made against male carers was a frequently cited concern. It can rob the male carers' role and relationship of spontaneity' (Gilligan 2000:67). One carer in Gilligan's study noted that 'I am more likely to lift her down' (if she got up on his lap) (2000:67). Likewise, Inch (1999) in his US study of 15 male foster carers, also noted that fear of allegation led to a more limited physical contact with foster children.

Some carers and interestingly birth children in this study noted the risk of allegations and referred to accusations made against them by foster children. This very much concurs with the findings of Wilson *et al.* (2001). Allegations are now to be anticipated by carers and recorded so that liabilities can be challenged or established in any potentially punishable instance (Piper *et al.* 2006: 155). Sara below makes this point:

I've learnt from past experience never to touch or cuddle or anything with children. That came from the last placement when he was in one of his mad rages he decided to say that I'd restrained him.

(Sara, birth child, family five)

The above was an exceptional case, and the choice of language of 'placement' rather than 'child', seems to distance further the foster child and delineate them as 'other'. Many child-related settings are becoming 'no touch' zones, in case touch is misinterpreted or misunderstood. Touching is still nevertheless regarded as vital to children's emotional and physical development (Powell 2001). The discourse of fear in social work, whose focus is often on abusive touch, has become problematic in that it masks a more child-focused discourse. Many children in the care system have come not to expect physical contact with their carers and this makes it difficult for them to express emotion. One carer recollected a time when a child asked her 'why people hug each other'. Of course many of the children within the care system have experienced physical and sexual abuse and thus may be more anxious about touch, or, conversely, they may be in even more need of positive, physical touch and reassurance. Touch avoidance becomes so routinised that the 'safe worker' reinforces and reproduces safe behaviour, and this applies to the foster carer when in the home.

The risk averse and fear culture in social work requires not only the policing of professional touch, but even the policing of the possibility of touch (Piper *et al.* 2006: 154). Within foster care the young person may have been the victim of abusive touch and therefore vulnerable; the young person may also have been the 'abuser'. Within three of the families the fostered child was described as an actual or potential abuser. Thus, we have a strangely recursive arena of mutual surveillance, where a carer is potentially the abuser and so may be the child. This aspect of 'suspicious care' could potentially be very damaging in inhibiting a healthy approach to physical expressions of warmth. Much depends on experience and the 'learning' of others' motives and behaviours, both subtle and obvious. For example, one birth child saw her role as one of surveillance and was keenly aware of risk:

Just so you are aware 'cos anything can happen from allegations to actual abuse. I'm watching so I know what is going on. You can't afford to take your eyes off (the foster child), really for the sake of your family's children because of what can happen.....I think with John I was the second pair of

eyes for my Mum, because he didn't have quite the same attachment to me as he did to mum. I guess I learnt the skill of watching and I could read his face , 'cos with him you could tell whether something bad had happened 'cos you could read his facial expression....(I was watching for) Just changes in facial expression because he could be so violent. You were always on guard really but then I think that's the same with us now 'cos you don't know....(Sara, birth child, family five)

Whilst this particular birth child had learnt from experience that she should not touch or cuddle foster children, this was untypical as all of the carers (including her birth mother), had engaged in physical comfort and hugged foster children, despite previous allegations having been made against them. Carers acknowledged the need to be selective with whom and when they would cuddle. Thus as ever, offering a tailored and individualised response.

It is important to note that as fears increase and as we take more and more precautions, the number of false allegations against professionals in social care has remained more or less static (Piper *et al.* 2006). However we know that allegations are a major cause of stress for foster carers and play a part in them giving up their fostering role (Wilson *et al.* 2001; Sinclair *et al.* 2004). Parental paranoia can restrict children's creativity and their freedom to play. Parents who would previously have been deemed over protective may now be considered as realistic. We know that when children are placed with foster carers they are subject to additional layers of bureaucracy which further limits and inhibits the carers' handling and care of the children. Culturally too we in Britain may be less prone to touch in Britain than other countries (Piper *et al.* 2006). Professionally our 'no touch' rules are less likely to apply in other countries. For example, Petrie and Simon (2006) comment on comparative studies of residential establishments for children in England, Denmark and Germany. In relationships between staff and residents in England, only 8% reported that they had offered physical comfort through cuddling to residents, compared to 20% of German staff and 32 % in Denmark.

It is thought that girls generally touch or are touched more than boys (Coffey and Delamont 2000). Piper *et al* (2006) cite the case of a child minder who was very cautious about letting her son touch the children that she was caring for, whereas her daughter had more of a free rein. There is an implicit assumption that men are more of a risk to children than are women or older girls. This risk discourse is in contradiction to that which invites and encourages men to develop 'caring masculinities' (Jones 2001). It is arguable that such approaches undermine men's work with children, thus resisting any change in occupation and family sex roles (Piper *et al* 2006:159). It was notable that in one family in this study (where the carer was also a child minder), the male foster child was allowed to help look after the children and relied upon him to do so whilst I was interviewing her. She spoke about how well he interacted with the younger children. He too talked in some depth in interview about the benefit he derived from touch from those in the foster family. His past experience had been of touch that was extremely negative having been physically abused by his mother and encouraged to fight with other members of his family:

My Mum was violent towards us. My cousins used to live with us and they put themselves into care...We had four double beds where we had a wrestling ring, beating the hell out of each other and stuff. That was why we got so involved in fighting each other because we were mad about wrestling. We used to tombstone each other though and I'd go to school with lumps and bumps and stuff because of the wrestling. (Callum, foster child, family eight)

While positive touch can be beneficial it remains a challenging everyday aspect of care to be navigated albeit against a backdrop of official recognition that touch can be therapeutic (DfES 2002) yet at the same time it is widely perceived to be an area of uncertainty and potential risk (Piper *et al.* 2006). This difficult duality in regard to the body is explored further below.

Dualism

The dualism surrounding children, particularly those children in the care of the local

authority, maps across to a discourse identified by a sociological literature whereby children can be seen as essentially vulnerable, or, as troublesome and threatening (Jenks 1996). As Christensen notes, 'children's bodies were seen as troublesome agents, which must be controlled' (2000:67). This discourse of innocence versus demonic notions of the child in our cultural history resonates with children in the care system who are on one hand vulnerable 'abused' children and on the other potential abusers and people who sometimes make allegations against the very people that care for them (Minty and Braye 2001; Wilson *et al.* 2001; Sinclair *et al.* 2004). Some allegations are true and there is much historical evidence of children being abused whilst in public care (Gallagher 1999). Nonetheless, in this study many carers stated that appropriate touch was essential for children to thrive. Indeed some carers showed great resilience in light of past false allegations, and still were able to practice in the way that they felt the children needed and deserved with regard to touch. They did not want to succumb to labelling negatively all children as a result of past experiences:

you've come up against defences and brick walls and once we had, that was one of the allegations, in a cake shop, Simone said, I pushed her when I was in a cake shop and she told her father, mother and father, so he wasn't having me pushing his daughter. (Liz, foster carer, family one)

Liz went on to describe the formal processes that followed the allegation and her feelings about this; nevertheless she was still able to offer physical comfort to subsequent foster children. Perhaps one area where touch was much less prone to ambiguity or risk was in regard to pets. Here we briefly illustrate their role and importance in regard to matters of body and relational aspects of care and membership in the home.

Pets

Children in care may have been limited in their experiences of intimate touch for the reasons outlined above, it may be however that children had access to a different form of physical intimacy, that which can be derived from interaction with pets. It was interesting to note that nine out of the ten families interviewed had pets in the

home. One family had photos of some of their pets (three dogs and two cats) included in the information about the family given to foster children when they first came to stay (the pets were anthropomorphised by speech bubbles introducing themselves and saying things like 'I love sleeping on Philip's chair'). Another carer, Rachael, when completing the 'Profile of Carers' information returned it with cat paw prints walking across it, circled them and wrote by the side 'Foot marks by Ena'. Triseliotis *et al.* (2000) when describing the background and lifestyle characteristics of foster carers and their families noted that as a group they tend to 'have more pets' (2000:52) than the general population. Some of the children chose to place the pets in the household in their eco maps and clearly pets played a significant role in the children's lives. The significance of human-pet relationships in children's creation of family has been noted by Mason and Tipper (2006). Gilligan's (2007) meta-analysis of the range of factors potentially increasing a young person's resilience and academic achievements included learning to care for a pet.

Children in foster care may have more physical contact and intimacy with pets in the home than with humans, as there are fewer boundaries around this type of touch and intimacy. Details about family pets will be important to be included along with the information about family members when matching a child with a family. Gabb (2007) notes that 'cross-species (human-pet) relationships remain on the periphery or are typically excluded altogether from the intimacy research especially within the terrain of social theory' (2007:6). She continues 'pets join in and shape exchanges of affection'. This may not be the same kind of love one has for a person 'but it is nevertheless experienced as love and as such should remain within the intimate equation' (2007:9). Cats, for example, sit on laps and sleep on beds, whilst dogs snuffle intimate places that would be out of bounds for anyone else. In one family, each time I visited I would have one of their rabbits placed on my lap, which I stroked throughout the interviews. Data from this and other families would suggest that where physical touch and intimacy is restricted for a child, the presence of a pet takes on an even greater significance and many lessons can be learnt by children about the care of pets:

Yeah but the sunflowers, you see, what I'd done in the past was, you let one of these children have a pet, they don't look after them, so you end up looking after the pet or they hurt it. So, what I tell them that they have to do, is grow a plant from a seed and then when the plant has got a flower it will mean that they're learning how to look after something, then they're allowed to have a small pet, so those are Chris' sunflowers that he's growing from a seed. They're teddy bear sunflowers and they're not well developed yet but when they come to plants, he's allowed to have a fish, I said, it's a bigger fish that we fancied. The little boy before, he was allowed a hamster and that hamster was almost human, I mean, it was amazing. He played. The placement he'd been in previous to us, he killed the hamster within the first week of having it but this hamster, it was in his pocket, wasn't it Mark ? (Rachael, foster carer, family five)

The male carer concurred with his partner and elaborated further with regard to another foster child placed with them previously:

It was every day. He used to talk to it and when he left us he wasn't allowed to take it with him. It was heart breaking, so when we went to see him we took the hamster with us. (Mark, foster carer, family five)

Here we see the significance of pets for the children, which afford intimate contact with another being, but often this physical comfort and intimacies cannot be continued when a child leaves placement, leaving a significant gap in their lives. While there is much to discuss with regard to human-pet relationships we return to our core focus on the body and its management in foster care.

Dirt and Taboo

The use of the body within the foster home can be a means to express rebellion, rejection, or achieve some desired outcome (Simpson 2000:78). However in dealing with corporeal transgressions most interviews with carers revealed their reluctance or inability to cope with those fairly rare behaviours that defiled the home. Social order is ultimately concerned with regulation and restraint of individual and

collective bodies. For example, dirt essentially represents disorder (Douglas 1989; Prout 2000). Our notions of dirt and defilement are revealed through our conventions around hygiene and our respect for these conventions (Douglas 1989:7). Sacred things and places (such as our homes) are to be protected from defilement which would constitute a significant transgression. Such transgressions of these fundamental mores or threats to them could be detected in the way carers often struggled with the dirt and lack of hygiene that some children exhibited. One described her difficulties when a young person in her care started to urinate inappropriately:

His personal hygiene had gone down and with other things as well, he started wetting himself. He had hidden them - I picked them up, cups and cups of urine. It was terrible ...he had hidden them , cups and cups of urine, and faeces as well. We had to redecorate afterwards....

(Kerry and Mervyn, foster carers, family nine)

Dirt exerts pressure on socially defined boundaries. Bodily orifices, together with 'marginal matter' issuing from them, are potent symbols of danger, pollution and taboo (Prout 2000:18). Simply by the production of bodily fluids, people have 'traversed the boundaries of the body' (Grosz 1994). In fostering, such transgressions can push and break the normally resilient bonds and boundaries of care and commitment:

.....I won't take them if they do that, the smearing, (of faeces) because my stomach won't take it and if my stomach won't take it, then I can't deal with myself to be able to deal with them. If a child had been here for a while and then started, then I would have to find a mode of help really for myself to be able to deal with it. I had one that used to, used to do it in bags and hide it under the bed ...no, no I don't like that, I'm not up for that.

(Rachael, foster carer, family five)

On the one hand, bodies are inherently ordered and organized, on the other hand bodily seepages and discharge can create horror and disgust. Thus the body is

subject to surveillance, regulation and control (Prout 2000:18). Indeed, the body of the child in care can be seen to be subject to particular surveillance through records and progress reviews that note achievements around developmental milestones. Furthermore, soiling for example might well be construed by professionals as a sign of unhappiness and a cry for attention (Cohn 2007). Yet such interpretations based on some distanced clinical discourse about therapeutic or developmental need tell us little of how the foster family sees things. Thus while children more generally are subject to a civilizing process in which they learn the basic rules of bodily etiquette, some children in foster care may not have been subject to such socializing influences from their birth parents. Some have little understanding of hygiene norms, nor can they always interpret the behavioural codes signalled by foster families, whose members may well invoke notions of moral worth to account for such events:

You can't imagine what it's like to live with someone who you don't like, who is particularly difficult or smells or pees on the wall or whatever, you just can't imagine it until you actually have to live with them....
(Sara birth child, family five).

Such children whose bodies might be described as 'troublesome agents' in need of control (Christensen 2000:67) map well on to sociological reflections about children polarized as either vulnerable or threatening (Jenks 1996). Such ideas resonate all too well with notions of children in public care, who on the one hand are vulnerable 'abused' children and on the other hand are potential abusers, who may defile the home and are children who sometimes make allegations against the very people that care for them (Minty and Braye 2001; Sinclair *et al.* 2004). Foster children are often at the margins of society and at the margins of families and are to some extent excluded from the mainstream. In this sense, their bodily transgressions in respect of dirt, obscenity, lawlessness and danger symbolise and reinforce their exclusion from the majority (see Douglas 1989:97). Such foster children are likely to be a small minority but their transgressions mark the limits for many carers about what can be tolerated within the intimate realm of the family.

Conclusion

Carers and birth children demonstrate much resilience in caring for young people serially entering their homes. Likewise, fostered children too learn to cope and build trust in a home that is not of their making or necessarily of their choice. Central to this is the largely unresearched theme of embodiment and the body, of the ways in which looked after children reveal themselves, are physically nurtured, touched, acquire identity and learn boundaries and sometimes, for a multitude of reasons, test and break those basic taboos that sustain our more intimate arrangements around joint habitation. We now move on to examine aspects of space and time in fostering, both of which connect with issues of embodiment and assist in the management and maintenance of body boundaries in the domestic realm. We shall see how the ecology of the foster home and the way it is learnt by the foster child reveals processes of membership and belonging as well as revealing limits and control within the care setting.

Chapter Nine

Caring for strangers: the importance of space and time

Introduction

Space and time are very real practical constructs for all families but particularly so for the foster family and this was a recurring theme arising from interviews with all respondents. In this chapter we concentrate on the experiences and ways of dealing with space and time within foster families. Aspects of space are particularly critical given that the fostering relationship necessitates the acceptance of an outsider into the very private confines and 'borders' of the home. This means that families need to create space both literally and emotionally for the 'strangers' coming into the home. Foster children too struggle with the idea of moving into the private space of strangers; Nadia for example recollects precisely this point:

If we (had) all had a choice to move in now. None of us would have. It's really hard to move in with strangers. (Nadia, foster child, family two)

The experience for the birth child in a foster family is in a sense an extraordinary one. They have to share their belongings, their space, their time, possibly their identity and indeed their parents with the incomers. Whilst many children have new younger siblings arriving in to their families, this is usually after a pregnancy, during which the child will have had time to emotionally prepare for the new arrival. Similarly with a reconstituted family, there may well have been a period of getting to know each other and the incoming children will be accompanied by their own birth parent and possibly their own siblings too. What we have in the foster family is a unique situation whereby a formerly unknown individual or group of siblings is incorporated into a household which will have its own distinct family practices within which the newcomer/s will be expected to fit. Generally there is little time, if any, for extended introductions in order to get to know each other before moving in.

In this chapter we explore how the host family and the new child begin to live together harmoniously and with mutual respect. The foster child may have had a

range of negative experiences within the home, both from their own birth home and from other foster family homes and will be undoubtedly anxious at navigating through another transition into yet another family. This is made particularly difficult for the foster child because the family is a grouping in which one potentially can never become a bona-fide member (Erera 2002). Some foster children because of their personal histories may themselves pose a threat and a risk to members of the family and this risk needs to be managed. Much of the management of risk involves separate and sometimes contested space (physical, emotional and temporal) being allocated to each individual so that access to space can be controlled and monitored. The chapter will start by considering issues of time.

Time and fostering

Time is also critical to the process of fostering and the fostering relationship. The given nature of foster care is that it is usually a temporary arrangement and whilst all relationships are temporal, this particular arrangement has specific boundaries around it which determine, typically, that it cannot be a permanent arrangement (Sinclair *et al.* 2005 a,b). As a result of the essentially temporal nature of foster care, a foster child and a foster family will be expected to have serial contractual relationships. Whilst we know that it can take time to accommodate, acclimatise and adapt to a new environment, time is something which is limited and commodified in this context (Adam 1990). Time is also critical given that children in placement may require long and often un-limited periods of time to be devoted to them in order to understand and make sense of their previous negative experiences. Birth children also require an investment of time, as do partnerships and marriages, hence time and space as finite may be contested within the foster family in particular, on a recurring, daily basis. Time is recognized as a crucial factor within the processes of creating and maintaining a sense of family (Morgan 1996). Time is often seen as one of the most valuable resources for families; it is the spending time together that creates family and allows for the enactment and doing of family.

The foster family has an added dimension with regard to time in that the role of a foster family is that of a 'working' relationship with regard to the foster agency. Working relationships are generally limited to some extent by time and location.

However in fostering, it is a working role within and outside of the home and with no boundaries upon the day to day time of the carers, who are explicitly contracted to care for the foster children on a twenty-four hour basis. Foster families therefore have to create physical and temporal boundaries around their caring role in order to structure and control such a time precious commodity. Whether talking about everyday family practices or special occasions like family holidays, the emphasis from the interviews with carers was always about the *quality* of time spent together, as family. For foster carers the giving of time to achieve a strong relationship was seen as highly important and meaningful '*to show them what real family life is about*'.

The home is a prime physical and spatial location for people's social and emotional lives (Christensen and O'Brien 2003:2). The family home has come to be represented as a modern domestic ideal of parents and children living together in a nuclear unit (Chambers 2001). This ideal centres children within the family, nested in bonds of love and care, with the parents responsible for their health and socialisation (Christensen and O'Brien 2003:3). However, families are by no means homogeneous and a range of structures and arrangements operate in practice (Erera 2002; Smart and Shipman 2004). Today, work and home are by no means divisible and different places. Work still takes place within the home and it is generally domestic work and parental caring, which is undertaken mostly by women as mothers and carers (Finch and Groves 1983; McRae 1989). Thus it could be seen to be a 'natural' development for a parent (often a mother) to work within the home and 'naturally' extend her role and her time into that of a more formalised care role. In this context, discussions of flexibility in relation to work and organisational practices, are often seen in terms of the benefits to and their impact on women and the domestic realm (Morgan 1996).

The carers interviewed in this study had a range of commitments and claims upon their time. One of the female (joint) foster carers, for example, worked outside the home in a local children's home and worked night shifts; weekly she spent two days and two nights a week out of the home but kept in regular telephone contact with her husband who 'managed the ship' whilst she was away. Similarly, with

reconstituted families there are often complex linkages between several social and domestic spaces (Smart 2004). Foster children themselves often have a range of complex linkages which need to be managed by the foster carer e.g. spending part of the week with the birth family, or as with two of the children in the sample, spending one night a week in respite care or in their educational establishment. A foster family situation might take any number of 'combinations of relationships, times and spaces' (Morgan 1996: 140). The management of routines and time is therefore a vital component of foster care.

Out of the ten families in this study only one of the main carers (a single carer) worked outside of the home and that was within an educational establishment as a playground assistant, which fitted closely with the timings and physical locality of her family and foster children. All the other primary carers did not work outside of the home. Many carers stated that this was because local authorities and independent fostering agencies preferred them to be fully available at all times. Thus, in Family Two, the male partner felt he had to give up his job as he was so regularly called away from work to school and to other social care meetings related to foster children. The female foster carer worked on a contract basis, taking employment only outside of school vacation periods (see below):

Ian: I stay at home mainly because we find that social services always wanted somebody at home.

Dawn: It is expected of you and I think in practical terms we couldn't do it, because of the sheer volume of work. I don't work full time. I don't work in the holidays, so I contract work. There are so many meetings and training(in foster care).

Ian: You'd be in work and someone would call you, especially with a difficult child and it was impossible.

Here we can see how the family has had to adapt their work-life balance in order to generate enough time for the needs of the foster children. There were three families in this study however where the adults in the household had no other form of employment than foster care, these were Family One, Family Three and Family

Seven. The majority of main carers were bound to the home and family as the locus of both caring and employment.

Those families who were fostering via an independent fostering agency were in receipt of higher remuneration for fostering and so in principle this would allow the carers more time to care for foster children, as there would be less pressure to work outside the home. However in four out of the five families from the independent agency, one of the carers had full time employment. Three out of six local authority carers were engaged in paid employment outside the home in a part time capacity. Thus remuneration for fostering did not appear to be related to freeing up additional time to be spent in the caring role amongst this group of families.

Time for carers

Most of the carers living with their partners stated that it was difficult to protect sufficient time for each other in order to sustain their own relationship. This might have some bearing on the finding by Sinclair *et al.* (2004) that single carers were no more stressed than carer couples. Sue and Steve talked about their lack of time:

Steve: No we don't, um Sue works and its not that we don't see each other, actually we see quite a lot of each other, we just don't have a lot of time together

Sue: Without children

Steve: Yeah. So we don't speak as much as we used to and we are a very, very open, communicating family.

(Steve and Sue, foster carers, family six)

Later in the interview Steve comments on aspects of time scarcity again:

Really what we lack now more than anything (is time) we don't get any time. Its an effort... just to go shopping together. You know I have to arrange to go out together.

The families had to create opportunities to be together without the children so that

they could communicate effectively. Routines and structures were put in place to create and manage different sorts of intimate time, including keeping some adult time insulated from the demands of the family. One couple described driving to the coast and sitting in the car with music playing, (whilst the children were in school) in order to find some quiet, private space in which they could be together. Some of the carers with partners were able to create the opportunity to make time for themselves, with each partner individually for example going out regularly on one evening per week. For others the opportunity to spend time together rarely arose.

The sometimes sensitive nature of the information about the young people in placement also necessitated that the carers find a time and a place to discuss these issues with the local authority or the independent fostering agency. They could often only do this at times when other members of the family were not present, as not every family member was or needed to be fully conversant with the information about the fostered child:

I had to create a couple of minutes free space to phone up the agency on a couple of points. It's strange how you have to juggle your time isn't it, to make sure no-one is within earshot at various conversations. I didn't realise that I did it quite so much (until I started the taped diary)...

(Audio diary extract, Josie, foster carer, family four)

These issues of confidentiality are an instance of the private-public dualism faced by families who foster. This also demonstrates the ever present necessity for foster carers working from home to structure, divide and allocate their time and space between the competing demands of family life. It is to these roles and routines that the discussion now moves.

Roles, routines and rules

Time and space may be seen as representative of particular aspects of power differentials within family relationships: gender is particularly pertinent in relation to domestic housework. Housework exerts an element of control over family time and space; this is often a major area of contest and conflict between family

members. Women are typically expected (or have expectations of themselves), to undertake household chores in addition to their working role outside the home (Finch and Groves 1983). As with other foster families there were clear boundaries around the roles and tasks within the home. This was seen as helpful when this led to less opportunity for these to become an area for contest or dispute either between carers or between children and carers (Farmer 2002). For example when one of the carers in Family Nine worked away, her partner took over these domestic routines but, as soon as she returned she 'took things back over'. Upon her return too, she would also do a large quantity of baking to re-assert her position, and create a 'homely atmosphere'. It seemed that clarity of role and boundary was important both with regard to housework for carers and also for the young people themselves. All of the carers appeared to create structured and visible routines, for example one foster child described with some amazement how all of their clothing was put away or issued according to the seasons. It was evident from interviews and diaries that children very much appreciated the impact of routine and predictability in contrast to some of their former experiences of insecurity and chronic chaos.

Synchronicity, routine and space

It is as a result of being placed within a family and being part of its routines that one feels to varying degrees a sense of membership and belonging. Brannen and O'Brien (1995) note that the family is a prominent site for establishing a sense of belonging. Douglas (1998) argues that homes structure time through the ability to order the activities of family members spatially e.g. through communal eating, division of labour, moral obligation and division of resources. The process of time-discipline begins in the family through the introduction of activity rhythms, such as sleep time and meal times (Ennew 1994). The notion of synchronicity of activities (Adam 1995) is one which surfaced prominently during the transcribing, coding and analysis of the data. It soon became apparent that there was a structuring rhythm and order to the daily lives of the families involved in this study.

Hallden (2003) discusses how for children the family is created in a house that becomes a home through caring routines. Everyday domestic routines are very important for children in creating and accounting for a sense of place. This

particularly came to the fore in the audio diaries of both carers and children. It was the regularity, the order, the mundane and the predictability of the ebb and flow of life that stood out. This routinised structure of life created a sense of security and reassurance. In Family One, their diaries described routines of daily bathing, food consumption, weekly and daily out of school activities and the division of labour in the household. There was also a regularity to their socialising with the male partner going out with his friends every Tuesday evening and the female partner going out with her friends every Wednesday. All of these routines lent a sense of order and purpose and one could surmise were easily assimilated by children and facilitated their own sense of belonging:

On a Wednesday night Greg puts her (Carla, adopted child) to bed and I always pop in and give her a kiss and say goodbye before I leave. Melonie (fostered child) and Helena (Birth child) were on the computer before I went out and when I came home Greg said they'd been really good and they went up to bed as good as gold. So, I'll speak to you tomorrow on Thursday.
(Audio diary extract, Liz, foster carer, family one)

The foster child in this family regularly spent weekends with her birth mother and this too was incorporated into the weekly routines of the family. The foster child clearly benefited from this 'temporal regularity' (Zerubavel 1985) which contrasted notably with her experiences at the weekends with her own birth parent. This child described a situation with her birth family, where the boundaries are perhaps more unclear and which she mis-reads, and stays out late for which she is severely reprimanded:

Hello Alyson. This is Friday, Saturday and Sunday. It's because I had contact (with birth mother). On Friday it went on well but I come in a bit late My mum's boyfriend told me that he was looking for me and my brother, Keith. Then he (mum's boyfriend) was going mad and my mother was worrying..... (Melonie, foster child, family one)

When restrictions around time were less well defined by birth parents, these seemed

more difficult for the child to grasp compared to those in the foster home. As with time, physical space within the home needs to be understood and acted upon appropriately by the foster child.

Physical Space

Many of the families, because of the additional members living in their home, struggled for physical space. Several of the families built extensions to their main residence in order to accommodate the foster children. One couple who fostered a sibling group of four had an extension built on the ground floor, an extension on the first floor, and were planning to convert a garage for a music room for the children. Another family with three foster children had two extensions built. Thus the physical structure of the home sometimes has to be as permeable as the emotional boundaries around family relationships. Interestingly, these families did not choose to move home as they felt rooted in their own communities and hence extended and adapted. Thus we see an iterative process of social and physical adjustments within these foster families:

(One of the major difficulties) was having to build extensions, to accommodate the children, where both my own children had to leave their own bedroom for the foster children in order for social services to allow us. We had to move both of our own children into extensions foster children can't be in an attic conversion and secondly foster children under a certain age would have to be on the same level as the foster carers.....the other extension that was built was not on the same level as us, so my daughter had that.... (Sally, foster carer, family three)

Clearly these extensions to generate space were costly to the adults who were inevitably investing much in their role as foster carer. The funding available from foster agencies for these extensions did not cover the full costs incurred by the carers. Sinclair *et al.* (2004) noted in their study, the reluctance of authorities to help with housing improvements or extensions, yet the carers in that study believed that financial help from the authorities would have enabled them to take more foster children or provide improved care for the children already placed with them. The

carers in this study who had undertaken building work to provide extensions made familiar points:

(We were given) one thousand pound to accommodate the foster children. We paid three and half (thousand pounds) for that one (extension) and we paid two and half (thousand pounds) for the other one (extension) because Craig (foster child) couldn't share.....I did say to them (fostering agency) if it's a real problem don't worry because we won't take them long term.

(Sally, foster carer, family three)

Fostering standards rightly demand good quality of accommodation for foster children (whilst as we see above, birth children can be accommodated in the attic or on another floor to their parents). The regulations state that foster children should have their own bedrooms if they are to remain with a foster family long term (see Meral 2005). If a family is to foster several children, several additional rooms have to be found. This means that birth children sometimes share a room which can cause friction for siblings, who have to give up their own private space for a newcomer (Triseliotis *et al.* 2000). All children and especially foster children saw having their own room as important. Often this was because it was the first time foster children had their own rooms. Also it gives the foster children a break and respite from the family, as Rachael illustrates:

They (birth children) understand about giving them space really and conversing with a new child. I say (to the foster child), we're going to have a house full of people today, so if at anytime you find it's too much for you, then do go upstairs to your bedroom and I'll make sure that none of them follow you. (Rachael, foster carer, family five)

All of the people in this study saw their bedrooms as a place for privacy. Nadia comments explicitly on this with regard to her foster carer, Dawn:

Dawn's retreat is her bedroom up in the attic.

(Nadia, foster child, family two)

Birth children too, noted that one of the few places that they could relax fully was within the confines of their own bedroom. This is echoed in research by Twigg and Swan (2007) who found that birth children often found seclusion away from the family in their bedrooms. Birth children also recognised that having a foster child in the home meant they had less space, as Charlie mentioned below in response to a question about what he did not like about fostering:

Charlie: Um I don't know. I suppose you could say there is less space in the house. (Birth child, family seven)

All of the birth children who had to share a room stated that they would prefer a room of their own room, as did the one foster child who was sharing a room (Family Ten). Thus, all of the families, particularly birth children, in the study had to manage to varying degrees the contest for physical space within the home. Patterns in the physical distribution of space within the family home had been subject to frequent change and development in some families. Here again was another example of the permeable nature of boundary within the families in this study.

Boundaries: temporal and spatial

It was notable how the carers sought to draw boundaries around their caring role with regard to both time and space. This is exemplified in the case of the carer in Family Eight who placed boundaries around the physical space and temporal arrangements within the home. She clearly delineated them thus:

It is the same on a Monday and Tuesday night. They both (the young people in placement) can't wait for me to go out, so they can get in there (her lounge) and watch the TV. They have TV's in their rooms, they can come in there (her lounge) in the evening but after 10 they are gone. It is my time. I want space. That is my domain. I have boundaries and they respect it.
(Hazel, foster carer, family eight)

The two young men fostered with her had their own bedrooms and responded well

to the house rules, not least because they were both treated the same and given the same boundaries. The male foster carer chose to relax in another part of the house (the kitchen) where smoking was allowed. The intended sense of boundary can be noted in the carer's use of the term 'domain' and the foster children too were able to depict their acquisition and use of rules around space and territory. For example, Callum the foster child in this family describes what happens on Monday and Tuesday evenings when Hazel goes out and both foster children have unfettered access to the lounge:

There is one of the arm chairs I prefer sitting on and Alan the other one, well not so much when Hazel and Joshua are there we just sit anywhere but for me and Alan - I have a chair I prefer to sit on and he knows it, so he might be sitting on it and when I come in he'll get up and sit on the other one for me.

Researcher: So you have established your own... ...?

Callum: I didn't say anything, he just noticed and asked me 'do you like sitting in this chair?' I said 'yeah I just like sitting in this chair', but both chairs are exactly the same.

Here we can see how routine and the control of space became mapped, and in this instance how the young people support and respect each other, with a degree of reciprocity, in establishing spatial arrangements. The birth child in Family Six described how his parents did not smoke in the lounge until after a certain time, when they took back 'ownership' of the communal space:

Um well mum and dad don't smoke in here unless it is after half nine 'cos it is their time if you like and if we don't like it then there is a TV upstairs or we can go to bed or do other things um I can't really think of any other rules at the moment because it's normal.

(Charlie, birth child of Steve and Suzie, family six)

This sense of the 'normal' that Charlie refers to, indicates the emergent and tacit nature of how space is understood and also how there are clearly prescribed rules

about domestic territory. For example, the carer in Family Seven describes how she has two lounges, one of which was communal and one which she used after the foster child had gone to bed, or if there was a conflict over what to watch on the TV. Similarly, Nadia a foster child in Family Two refers to how the family uses time and space within the household. Again the rules and boundaries comprise those that are clearly defined and those that are implicitly understood by the foster children:

*We've all got our own seats, mine is there, Ian's there, Jake there, etc,etc....
Even though we all sit down together dinner times, we all spend time in different places. I don't watch telly much in here. I'm usually in my room.*

Most respondents referred to the importance of private space inside the private home that they had some control over and which seemed to be a pre-requisite for harmonious collective arrangements.

Reciprocity, care and time

Part of fostering is developing a sense of mutuality in which the young people in placement became sensitised to the needs of the carers. This is demonstrated in data from the carers' diaries:

I have a very quiet night in the lounge. The boys leave me alone because they know I am not feeling too good. (Hazel, foster carer, family eight)

Hazel elaborated on the above in interview, noting how space is clearly determined as both accessible and proscribed. She describes how Callum, the foster child, recognises the rules around private space, particularly about not going into others' bedrooms. She recalls a situation when she had asked the foster child to get something from her bedroom and he had resisted because of the explicit rule prohibiting this very act:

(Callum said) I wouldn't dare; that is your territory. I wouldn't dare approach it. It is more than my life is worth! I'd asked him if he had seen something in the bedroom drawers and whether he would get the guest

mattress out from under my bed. (Hazel, foster carer, family eight)

Those that had successfully internalised and implemented the membership rules on territory seemed to be accepted much more by the family, whereas those who were still struggling in this area gave a sense that the balance and stability of the placement was more fragile and prone to fracture. The following diary extract is about a placement fraught with difficulties over space and time boundary:

Day Four:

.....I said he's only making things worse by not going to bed because then he'll be so tired that he can't get up in the morning. But anyway it was about ten o'clock when he finally settled down and he does need to settle at nine. So there we are, we'll see what the morning brings. Thank you then. Bye.

Day Five: This morning didn't manage to get out of bed. I went back in at five to eight (am) and he was fast asleep, so he very grumpily got up and was downstairs just in time for the taxi. So off he went. After school he was very excited about the builders having started work on the extension at the side of the house. He wouldn't leave them alone. He was offering them a drink, trying to talk football with them, standing right by them, bouncing a ball, walking through the mud and just wanting to be right by them. He was speaking to them as if they were old buddies of his, although of course he had never met them before but you wouldn't have known it.

(Audio diary extract, Rachael, foster carer, family five)

Here the foster child had problems performing the basic family routines around sleep time. Also, there were difficulties with boundaries of physical space when communicating with strangers, both were a source of friction in the foster home. Thus whilst the rules around space and time are typically clear and prescribed in order to be able to be learnt and assimilated, the families also needed to be flexible in order to allow foster children opportunities to test and negotiate, to learn over time the often tacit nature of how things 'work'. It is towards this more emergent

and permeable nature of routines and membership rituals that we turn next.

Permeable boundaries

Some of the foster families appeared to be inherently more open to outsiders and possibly less encased or bounded than other families. Two birth children described their homes and parents thus:

I have always shared my Mum all my life, not just with my brother but with family and friends; there was always someone in need at our house. We always were looking after people, friends.

(Katie, birth child of Judith, family seven)

It is natural to them like. They have had four kids of their own, at times they have had twenty people to visit. If people round here have a problem, not just my friends, they always come round here and ask for advice, even more than their own parents.....We've been on holiday with groups of up to forty of us and have taken over the whole floor of a hotel.

(Paul, birth child of Sally, family three)

We might assume therefore that it is easier for such open, porous families to assimilate new comers, as the wide variety of guests and callers to the home meant that the young people were less obviously 'outsiders'. This also meant that for some young people they were less readily identifiable by outsiders and did not attract attention. To repeat, the permeable nature of these foster families seemed evident in the way streams of people flowed through the home. These visitors usually comprised large numbers of extended family members and/or a wide circle of local friends. Rachael, foster carer Family Five for example, was close to her own brothers and sisters and has eighteen nieces and nephews and spends a lot of time in large family gatherings in which the foster children are included. It was this extended and open nature of the families that seemed to allow for the incorporation of newcomers seemingly with little negative impact. The many comings and goings of kin, friends and foster children in these families did not unsettle the family but rather served as a stabilising factor. These families seemed to be 'open systems'

which regained equilibrium and stability quickly (homeostatis) when changes were made (Bertalanffy 1968). We now move on to consider family space for leisure activities.

Extended space for leisure

Some of the families had access to more space or had widened the physical boundaries of the home by virtue of having a holiday home or caravan. Eight out of ten of the families lived either in the countryside or in a town or city directly adjoining open space. The other two families who lived in more urban environments had intentionally compensated for this by having holiday caravans in rural coastal locations so all of the children had the opportunity of some connection to a different and more rural ecology beyond the home. Holloway and Valentine (2000) stress the importance of the link between childhood and the countryside and argue for what they see as the positive sentiments associated with the countryside and its links to nature, and thereby a sense of reflective rhythms and freedoms.

Social or symbolic space refers to the meanings that are assigned to physical localities, not only the home but to places where we regularly go, for example, to a relative's house or to a holiday location. This was particularly noticeable with the foster families, where four had routines of going to their caravans. The family space was thereby extended and family memories were constantly added to and developed by this shared experience. In these more rural environments the children were able to have more freedom to explore further afield than when in their urban homes:

Arrived at the caravan, absolutely beautiful, the children have jumped on their bikes and off they have gone.

(Audio diary extract, Sally, foster carer, family two)

This also allowed the carers more space apart from both their own children and the foster children. The caravans are however in a safe and regulated space where the family will know most of the residents and have a sense of other people looking out for the children on the site. This sense of continuity of location and connection

beyond the home is noted by Olwig (2000) who discusses the process by which a place acquires a special meaning. She examines the links between belonging and the social organisation of a community as constituted by the people living there and the many ways they are interconnected with each other. This provides for 'the production of locality where locality is not merely a geographical area but it is also a place where people can acquire a sense of solidarity' (2000:44). Caravan sites and holiday parks are very much places for colonisation, where the same people return regularly and have a sense of solidarity and identity about the lifestyle choice they have made for their leisure time. Colonising is the process whereby people give meaning to a place and make it part of their self-identity, caravans featured as meaningful places for the carers and young people in this study.

Boundaries

Borders are important for identifying a place and identifying the boundaries to a place or indeed a family. Thorne (1993) describes 'border work' as what children do to make a place inclusive or exclusive. Hallden also develops this idea suggesting that border is important 'thereby creating conditions for belonging and social organization, in particular kinship' (Hallden 2003:32). Family relationships form the basis for much boundary drawing. Distinctions between 'us' and 'them' start at a very early age. Yet the foster families in this study far from drawing tight boundaries, appeared to be flexible in their permeable perimeters, which unlike most families, did not delineate so clearly between 'us' and 'them' (i.e. new members). An example of the borders being flexible came from Family Two, who were fostering four children, and also had a nephew staying for six months as he 'is having some difficulties' (Dawn, foster carer). Thus these families managed to generate a sense of family identity and inclusivity (ie. members seemed to have a strong sense of belonging and commitment) whilst also allowing new non-family entrants to traverse their borders. This duality of family openness and boundary is something of a conundrum but is aptly described by Kerry:

Yeah but it's not, it's an open house, it's a family house but it's not. It's an open family house... (Kerry, foster carer, family nine)

The acceptance of newcomers/strangers found its most concrete expression by one family in the adoption of the foster children. In another five families the foster children moved from being with the family on a short-term placement to being there for the foreseeable future or at least until they were leaving care. This suggests that families were able to intensify and deepen their attachment to the young people in their care. It seemed in these families that not only had new children entered the home they had moved from being brief visitors to long term members. We now move on to look at this aspect of transition and the life course in relation to fostering.

Transition and the life course

The age of social maturity does not necessarily connote chronological age and differs from one person to another (Adam 1990). By drawing upon a life course analysis we can shift the focus from gradual age-related transition to more visible and sometimes abrupt change or turning points. Within a life course model these turning points are those that social actors themselves see as important. This approach to grasping change seemed to be particularly relevant for foster families. Foster carers and young people demonstrated that they could recognise and value the meaning of turning points, where things suddenly changed and allowed a child to make sense of their situation. Hazel, foster carer, Family Eight, gives the following example:

He (foster child) went to see Mum in prison. He didn't want to go again. He said that's it. It's over. He finished with her like that. He became bitter towards her. He suddenly realised what had happened to him. He just changed when he realised that this is life. (He thought) I don't have to shiver and shake when I've done something wrong. Straight after that, at his review, we asked if he could stay long term.

Whilst two of the foster children in this study were intending to return to their birth parents, the remainder were variously accommodating to the fact that they would never return to their birth family as children. Their family and its meaning had therefore to occupy some uncertain or ambivalent place in their individual history

and their recollection in this history. By using the notion of life-course (Morgan 1996) we can avoid more rigid notions such as 'life-cycle' and other normative models of human development. This is essential in understanding foster carers and their approach to interpreting the needs of young people and the progress they make. The young people in their care will be likely to have developmental needs because of the disruptions they have experienced (Sinclair 2004 *et al.*). Carers were aware of this and able to respond accordingly:

I've got all the toys from when Sara (birth child) was little, Fisher Price farm and garage and all of those things... and he (foster child) was playing with it as though he was four and I mean, he'll be fourteen next month, so I got down on my hands and knees because I thought, ...I got on my hands and knees with him and was doing the, you know, playing with it, as you do with a very little child and making up a story about that the elevator breaking down, then sending the farmer's wife off to town to get a part, all of that and the car had run out of petrol and he was really joining in and filling it up with petrol. (Rachael, foster carer, family five)

As might be expected, carers sometimes struggled with ensuring that they related to a young person appropriately for their stage of development whilst wanting to act in ways that recognized their chronological age:

I mean there are times when you really want to talk to him like a little boy uh but you must give him the respect for being the age that he is .
(Audio diary extract, Josie, foster carer, family four)

Many young people who have been looked after will not be ready for independent living by the time they are due to leave care, partly because of disrupted development. It is of course debatable whether any young person is somehow unambiguously ready to leave their family home particularly when children in the west leave home much later than they did in previous decades (Blanco and Kluve 2002). This was an issue for all those carers who were fostering older children. As both Josie and Judith note:

We had him the day after his seventeenth birthday and he wasn't able to do washing, iron, ...but obviously as he's progressed, he won't be going straight into independent living; he has started to work, so hence he's here that much longer and we're grateful for that because I still feel he's still developing a lot of his character and strengths...

(Josie, foster carer, family four)

If everything goes to our to her satisfaction (the foster child will stay in the home) until she leaves to go to college. I'd like to keep her after that, but unfortunately after that I can't. She don't know about it yet. In an ideal world it would be a lot later because she is so immature, she really needs more support. ...(Judith, foster carer, family seven)

Thus the carers were struggling to care for young people who were less developed because of their unhappy earlier experiences, yet were catapulted into independence at a relatively much younger age than most birth children. Had it been their birth children, this would not have happened, but the contractual relationship in fostering ensured that it is time limited and conditional in this regard. Looked after children generally leave care at eighteen years of age as prescribed in the Leaving Care Act (2000). Every young person has a 'pathway plan' drawn up when they turn sixteen years of age, mapping out a 'clear route to independence' and they receive continuing assistance between eighteen and twenty one years of age (*Every Child Matters*, DfES 2003). This is clearly very different to children in the general population, and provides an example of a limit to the porous and flexible nature of these families. We now move on to consider memory and transition.

Memory work

Part of what family living means is the sharing of recollections (Urry 1990) about our past events and transitions, through the practice of autobiographical memory. We select from, edit out and embroider our past according to the present or imagined future audiences. Thus we construct our sense of self through this process. The importance of this is recognized for looked after children, when life story work is

undertaken (Nicholls 2003). The imagined future audience can be a difficult concept for a foster child, where it is less clear who or where the future audience might be, as they have no reliable basis upon which to predict what the future might hold. A child who has had a fragmented experience of home, care and carers will find it difficult to construct a cohesive story of a past and future from their memories.

Families not only do memory work they constitute or re-constitute themselves in the process. Urry (1990) discusses the importance of the 'imaginary co-presence' in family life, that is, some shared memories will be about people no longer physically present because of bereavement or a change in circumstances. Multiple discontinuities perhaps provide much of the motivation to achieve some sense of social and temporal stability through memory work (Morgan 1996). This will be particularly so for children who have been fostered and for foster families who will have witnessed a series of transitory relationships. Most of the families talked fondly about colourful foster children that had lived with them and these accounts became part of a shared family folk-lore about caring and its vicissitudes and rewards:

I can remember once having James (previous foster child) in town and he was seven when he came here, twelve when he left and he would have been about just eight, I think, and we're standing waiting for a lift at a car park. James burped and there was a very nicely dressed gentleman in his early fifties standing by the side of us, and I said, James say excuse me, I said, it's nasty for that poor man to have to sit there, stand there and listen to you making those noises without saying pardon me and he (James) said, it wasn't me, it was him. James said it and thankfully the man laughed you know. (Rachael, foster carer, family five)

All of the families had stories of children who had previously lived with them. We can observe that not only were the foster children incorporated across the boundary of the family home, but later after their departure they were incorporated into a shared family history of fostering and revealed much of what families saw as the essential nature of caring for children whose needs could rarely be grasped by

reference to the formal schema of child development and its measurement.

The marking of symbolic family events

Family relationships are important in that they provide contexts through which many locations and events to do with age are given substance and meaning e.g. birthdays and anniversaries (Morgan 1996). Birthdays were seen as particularly difficult events for foster children who provided several accounts of the anxiety and trepidation they faced over how to enjoy and celebrate birthdays of family members. This may have been in part to do with trying to fit in with the traditions and practices of a family from which they did not originate. It also seemed to be about the difficulty of 'giving' possibly because there had been few role models within their earlier lives of people giving freely. It was perceived by foster carers as a key turning point when a foster child willingly spent their own money on a card or present for someone in the foster care family. One young man, Stu (family four), felt he wanted to give something but not give up his money in order to do so. However when he saw the family momentum gathering for an imminent birthday event for the male foster carer, he cycled to the nearest village and brought a box of chocolates. He nevertheless still struggled to give the gift without resenting doing so, as Josie recollected:

Stu did get a bit grumpy. He hadn't got anything for Philip for tomorrow and he saw everybody else turn up with presents and cards for Philip and he suddenly realised that he had got a card but not a present and this touched a bit of a raw nerve because I jokingly said 'I bet you forgot'. He took it in his mind to think this was a personal insult and he stormed through the kitchen and he swore.... He then got on his bike, went down in to town and got a box of sweets for Philip for his birthday and I said 'that's lovely, a real nice thought, thank you'.

(Audio diary extract, Josie, foster carer, family four)

In the above extract and elsewhere in the data it was apparent that foster children were expected to reciprocate in some symbolic form and yet this expectation was rarely discussed explicitly with the children. Christmas, birthdays and other family

events bring to the surface traditional social conventions, in a social context of giving and receiving. Foster children appeared challenged by these social conventions. Josie (above) went on to describe how she had to discuss with the foster child the way presents should only be given with good grace. Stu for example was still reluctant about giving the chocolates to the male foster carer and so held on to them for another day, before he felt that he could offer them with good will. This seemed to be a complicated lesson for Stu to learn, especially given the potentially ambiguous relationship that foster carers have with foster children (i.e. paid carer and not parents). The norms of reciprocity in this sense are not altogether explicit for a 'stranger' in a typically short term relationship.

Another carer described the difficulties of a foster child dealing with the social conventions of giving in relation to the female carer's birthday (Rachael) and also with their difficulties as a family in accepting this:

I asked him (foster child) where he went today, he said 'Haven Island'. I said 'how much did he have to go' and he said 'I had a fiver. Well I said there are lots of things in Haven that Rachael would like' and he said 'I went in to one shop but this man threw me out because he thought I was 'chopsin' but I wasn't but I couldn't get anything from that shop'. But there are lots of other shops you know but no I didn't want to. There is not a thought in his body for anybody. He is the first child who has stayed with us over Rachael's birthday who has not given her a card or a present.

(Audio diary extract, Mark, foster carer, family five)

This aspect of the formal 'gift' was an area that needed to be handled sensitively by the carers. Christmas and birthdays are significant days when one thinks more about one's own birth family, or about the lack of such a family. These festive events contain family celebrations, which are family practices that have a clear structure and an expected format which is intimately understood by members and re-enacted annually. They can also unintentionally provide a moment for a foster child to feel more of an outsider and emotionally vulnerable as a consequence. Thus it was seen as a measure of significant improvement when children were able to begin to join in

the family practices and reciprocally give and take thereby marking their valid membership of these family events:

She (Suxie) made a real big effort to go out and buy us Christmas presents with her own money. This year she did this, previously she didn't give us gifts like that and this year she did it on her own.

(Katie, birth child, family seven)

It might have been helpful for the foster families to articulate these expectations, yet this might have diminished the meaning of the gift from the child. It was only through time and the building of trust between carers and the foster child that practices such as celebrating family events could be understood and adhered to. The carers had to expend time, care and instruction for these mores to be understood and assimilated by the foster children.

Conclusion

This chapter has covered many of the often unconsidered aspects of fostering with regard to space and time. Foster families have limited time and foster carers have developed their employment and domestic routines to incorporate caring for additional children within the home. This meant that for all of the families in this study that there was always at least one carer not working outside of the home. Foster caring could therefore be seen to be prioritized within the families, rather than maximising incomes. Time is a limited and valued commodity in all families but it was through giving care and spending time together that relationships were built and developed, and it was thus important that one carer was fully available at all times. This often meant that there was little time for couples to spend together.

Structured, visible routines and predictability was evident within all of the family practices and the children appeared to respond well to this. Synchronicity was reassuring. Space was at a premium in these sometimes amorphous families and the physical boundaries of the house were extended in an iterative permeable way, as more people were incorporated into the home. All of the young people except one, who were being looked after, had their own rooms and this was an important

demarcation of personal space in all of the families. Entering each other's bedrooms without being invited was typically forbidden. Many of the children and carers sought seclusion and refuge in their bedrooms. Four of the families had holiday caravans and this created an extension of the family home which gave the children greater freedoms and was another source of regular routines. Access to the countryside was also seen as important for children.

Foster carers were often able to move away from a chronological understanding of child development and this was helpful to those foster children who were developing at their own pace, given their circumstances. Many carers felt that the foster children should be allowed and supported to stay with the foster families for longer than the regulations allowed, as all appreciated that young people were often not sufficiently mature to embark upon independence. In part this was because of their past life experiences, but also because this was an unrealistic and undesirable goal for most children in the general population. The notion of care, reciprocity and networks of on-going support were far more desirable than fully independent individuals. Foster children became part of the family history, memory and shared recollections and lived on in the families long after they had moved away.

Routines and annual family celebrations were sometimes difficult for children to learn what might be expected of them, and this called for sensitive handling by the carers. All of the carers aspired towards and valued reciprocity with the foster children, and many saw this as a major milestone when children felt able to give presents freely and demonstrate their appreciation and their care in doing so. Thus it can be seen that time and space were vital aspects enhancing the fostering relationship and merit due consideration. We will now move on to the voices of the children in the study and start the next chapter by continuing with the themes of space and time, but from the child's perspective.

Chapter Ten

Children's Voices: space, place and time - 'I've landed on my feet really'

Introduction

There are two core principles that should inform childhood studies according to Woodhead (2003:13), the first is that childhood is socially constructed and the second is:

about children; recognising their status and their rights as the starting point for research, policy and practice.

Although all of the preceding chapters have included the perspectives of the children, this final findings chapter now focuses upon the children in this study in order to explore in greater depth their status, and in doing so to give them more voice within the analysis. We start with a poignant comment from a foster child which came at the beginning of an interview when she was asked 'what are the important things that I should know about you ?' and she replied 'I'm not sad'. Clearly she did not want to be viewed as some 'victim' of circumstance. Indeed it is all too easy to portray looked after children as victims. Another young person said 'I've landed on my feet really', finding himself at last in a safe and supportive environment. Thus as George *et al.* (2003:356) note:

Foster care children are not merely statistics, or victims and thus objects of pity to be ministered to by individuals and organisations. They are also protagonists in their own right and have agency within the structures described. It is for this reason alone that their views, as well as those who are close to them, should be taken on board in decision making about their lives and future.

This chapter will display key aspects of the agency and resilience of the children interviewed in this study. First, we recognise that there is a more pronounced commitment at government policy level to the involvement of children and young people in commissioning and evaluating services. Further there is an emphasis on

child-centred practice on the part of practitioners, the latter building on the requirement in the Children Act 1989 that social workers take account of the views of children and young people about decisions which affect them (Wilson *et al* 2004). The United Nations Convention on the Rights of the Child also stresses the importance of this. This chapter too will demonstrate a similar commitment to voice and participation and will reveal the views of not only the foster children but also the birth children who help facilitate the fostering process. Some voices of carers are included in this chapter where this demonstrates their approach to advocating or representing the views of the children. We start with a brief reprise of key literature on what is known about children's priorities and concerns. We then turn to consider space and time from a child's perspective drawing on some of the themes, emerging from Chapter Nine. The chapter then examines the impact and role of birth children in the fostering process. The chapter ends by focusing on aspects of voice regarding the foster children in this study and the key messages for practice and research.

What children want: a child's perspective

In traditional sociological studies of the family, the child is often seen as the family member upon whom influence is exerted and it is generally the adults who are the main subject of enquiry. More recently it has been acknowledged that children should be studied as people (not solely in relation to others) and that an ethnographic method has been suggested as an effective research approach to this topic (Christensen 2004). Such a view has informed this study and the perspectives of all of the children living in the families were sought via semi-structured interviews, drawings/eco maps, and audio diaries. Together these lent an ethnographic focus, offering the outsider a glimpse of the inner world of the child.

The importance of the child's view as a key means of grasping the quality of foster care cannot be underestimated (Wilson *et al.* 2004:31). Sinclair *et al.*'s (2000) landmark study, based on 150 postal questionnaires from young people in foster care, revealed their pre-occupations were focused on five main areas:

- the care they received from foster carers

- the relationship between their feelings for their foster carers and their birth parents
- contact with and prospect of return to birth family
- the predictability of their carer career and their own say in it
- the ordinariness of their lives or lack of it

Sinclair *et al* (2000) concluded that in order for services to respond to these sorts of issues there is a need for clear, individual and flexible planning which promotes children's individuality and choices (e.g. where young people want to remain part of a household past eighteen, or allowing children to remain in placements that they have chosen). A pre-occupation with life stability linked to wanting to be able to stay within the foster families until they were at least eighteen, was a theme which was echoed throughout the data gathered from fostered children in this study.

Research conducted by the Children's Society (2006) with 8,000 young people found that the most common words used when asked about 'what constitutes a good childhood' were family and friends. Their responses indicated relationality and connectedness with others as critical to their well-being. Young people's comments emphasised topics such as the importance of being loved and being treated with fairness and respect by others. Similarly, Smart *et al.*'s (2001) study of children whose parents had separated suggests that children valued highly four interlinked factors of fairness, care, respect and trust. They found that children had a refined sense of 'what is fair' and 'what is not fair' (see also Williams 2004). Morrow's study also discovered that from the children's point of view love, care, support and mutual respect were the key characteristics of 'family' that they valued (1998). Happer *et al.* (2006) found that being trusted and trusting were vital ingredients for children. We can see from these several sources that children have an understanding of the moral quality of relationships and linked notions of reciprocity; they particularly value fairness, respect and trust.

In summary, children develop identity and agency through their relationships with significant others and they typically achieve this by taking the opportunity to socialise through their use of time and space in the locality. We now return to

examine issues of space and time but with particular regard to the views of children involved in fostering.

Time and space from a child's perspective

The home is often thought of in static terms (Sibley 1995), whereas the reality of the home can be seen as constituted by movements in and out of the physical setting. Children's understandings of themselves are achieved through the movement in, out and around the home as a material space and a fixed locality (Christensen 2000). Children's understanding of the house and their 'border work' (Thorne 1993) in and around the home forms part of the foundation for children to develop social skills and competences. They become navigators and negotiators in the public realm of the neighbourhood, community and within friendship circles. Foster children will have a range of different experiences of navigating local areas and a range of differing friendship circles. They must learn to develop their grasp of the home setting and locality quickly given that most of them are placed in foster homes in the short term. Some of the children will be seen to have become proficient at this navigation by virtue of their repeated experiences of foster care. By comparison most other children only have to do this once or twice in their childhoods. However children who have remained in one location will have experienced a more gradually evolving and possibly deeper understanding of their everyday world.

Research by Matthews *et al.* (2000) into children and youth playing 'on the streets' stressed the importance of the local environment for children, enabling them to move away from adults and from childhood. Matthews *et al.* suggest that any decline in the use of the street reduces opportunities for identity construction. It is through this street space that young people explore and come to understand their present and prospective social roles. As more mothers go out to work, children's experiences are becoming more institutionalised in a variety of forms of child care and leisure (James and Prout 1997a). This view is echoed by Ennew who asserts that 'child leisure is not excepted from this mix of consumerism and curricularisation' (1994:133). However, for the children in this study, all had at least one carer/parent at home for the duration of their out of school hours. All of them were given regular access to outside play or were allowed to go out unattended by

adults and therefore had the opportunity to learn to navigate and construct an 'outdoors' identity (Matthews *et al.* 2000).

Many of the young people including birth children, foster children and adopted children talked about going out alone or playing out and how important this was for them. Playing out with other local children is particularly important for developing skills of independence and negotiation. The foster children sometimes 'rated' a placement by the opportunity to play out with other children of a similar age in the locality. When asked what it was she liked about her particular foster home, Suxie was clear that the locality and local children were important:

I likes living round here because I has a lot of friends around here to play out with. I likes to hang out with friends on the streets.
(Suxie, foster child, family seven)

This gives foster children the opportunity to mix with other children not in the care system, and so they are not insulated or narrowly confined as some looked after children might be for example in a residential care setting. Research has shown that having friends outside of the care system and being able to sustain relationships with peers is a useful barometer of emotional health and very important in helping to stabilise a placement (Schaffer 1996). Playing outside also helps children to understand and become part of the local community.

One adopted child in her audio diary describes playing with a variety of children throughout the day and for differing periods of time and negotiating new activities with different friends over an extended period. She clearly had the opportunity to mix with a variety of children throughout the day and had learnt to manage difficulties and knew where to go to get help:

I went into Hilary's house to watch Scary Movies Three. Then Gill had to go out. Because I was on my own Macsen asked me if I wanted to go to the park. We had a lovely time in the park, the only thing was that Kim hurt her arm and the skin was peeling off. We went into the leisure centre for first

aid. Then we played Poo Sticks on the way home; a race with sticks in the river. When we came back we played in Bex and Sioned's house. Then I played Swing ball with Macsen. Then I went in to my house for tea.

(Audio diary extract, Carla, adopted child, family one)

A foster child within the same household similarly joins in playing with local children:

Hi Alyson its Melonie. It's been great today 'cos I played out, I asked my neighbours if they want to go swimming tomorrow. I done swing ball with Macsen and Carla.

(Audio diary extract, Melonie, foster child, family one)

Birth children were often helpful in facilitating the process of introduction to the new neighbourhood and friendship circle for the foster children and both a birth child and foster child described, in their audio diaries, walking home from guides together, which neither had done before. The mother/foster carer also describes her reaction to this event and noted the importance in terms of independence for the two girls and for them gaining a feeling of safety in the physical locality:

I went to guides tonight and we played a game called, I can't remember but we had to dress up in loads of different costumes. Then me and Melonie walked home so I've enjoyed it today. Hopefully it will be a good day tomorrow. Bye. (Audio diary extract, Helena, birth child, family one)

Hi Alyson it's been good today. Me and Helena went to guides. We walked home from guides 'cos Kevin had the car to watch the football over the pub.

(Audio diary extract, Melonie, foster child, family one)

The girls came home and they walked home on their own, it's the first time they have ever done that but it was a nice evening, good weather, nice and light. I wasn't worried but I couldn't wait for them to get in but they came home safe and sound. They came in quite grown up; they had actually been

offered a lift but refused it because they wanted to walk home on their own.
(Audio diary extract, Liz, mother/foster carer, family one)

The trust that the foster carer/mother placed in the children facilitated the relationship between the young people and their feelings of independence of adults and interdependence between the girls to navigate their locality.

Neighbourhood and education

O'Brien (1996) states that children live in the 'local' and the quality of the local environment close to home is paramount. The incorporation of a regular autonomous outdoor life is most apparent from the age of eleven years in the UK when children go to secondary school often using public transport. For many foster children they continue to attend their old school but from a different home location in order to preserve their educational stability (Jackson and Sachev 2001). This also sustains their old friendship network. Transport is usually via taxi which diminishes their opportunity for more autonomous movement. Taxis indeed were often the source of much frustration to carers and children, as the families seemed to have no control over them, despite communication with social workers. This often left the foster families and children feeling as if this was out of their control and that this was a bureaucratic arrangement which could have worked better and have been less costly, had the families negotiated directly with the taxi company themselves. Taxis also made the foster children stand out, as less ordinary and different to other children.

Morrow (1996) takes a holistic perspective of children's social relationships within different place contexts. She argues that social relationships take precedence over place in constructing a sense of community for children. Community for children tends to be located in a sense of belonging that resides in relationships with other people rather than places. Morrow demonstrates that peer friendships as well as relationships within school and with kin are central to building up children's sense of trust and security in their neighbourhood. According to this perspective, the geographical dislocation of a children's education from their new home locality could lead to young people retaining their sense of trust and security within their

previous geographical home, rather than investing in their current location and current foster home. This has to be weighed against the benefits of children remaining in their old school. It may however have been the short-term nature of the planning for children which led to retaining the 'old' school rather than allowing the child to move on and engage with a new future. This needs to be individually assessed; remaining in the 'old' school might be counterproductive in encouraging a child to commit to the new locality and friendship circle and thereby damage the potential for the short term placement to become long term.

Geographies of fear

Foster children face the challenge of different expectations in different localities and sometimes in the same week, for example, if they have contact with their birth parents. Issues of safety and custom and practice in the localities may be very different and difficult to negotiate for the foster child. Children can be seen to share their parents' perceptions of the world outside the home as a place of risk and danger (e.g fear of youth). The morals of the external world prey on the innocence of children, as the older youth on the street are seen to pose a risk to younger children (Christensen and O'Brien 2003). Hence, foster children may well be expected to grasp several sets of perceptions about the outside world as a place of risk and danger and these perceptions may differ markedly, as was the case for some of the children in this research. One foster child was placed with a foster family where danger was perceived to come from strangers outside of the home:

And again about paedophiles, you know, they don't, they haven't got a neon sign over their head, saying I'm a bad man. You have to judge individuals (outside). This is a safe place here this is home..... The home is a secure environment where they feel safe, that's the biggest (thing) and that's what we, we try to create that. I don't sit down and lecture them but I put it into my words that you're safe here. We can't stop people harming you outside but we can stop it in here. (Liz, foster carer, family one)

Liz, the foster carer above, was anxious about letting the girls (Helena and Melonie) walk home from guides for the first time; both girls were then 13 years of age. Yet

when staying with her birth mother later in the week, Melonie describes a very different set of freedoms which she interprets as allowing her a lot more flexibility, although she misjudges the discretion she is permitted by her birth mother. The source of threat perceived by the birth family is also very different, as suggested by Melonie's audio diary:

On Friday it went on well but I come in a bit late . I didn't listen to my Mum. But I regret that. Saturday it went quite well, 'cos then my brother came to my house and slept for the night. Then Sunday my brother was going to go home and my Mum's fiancée, well boyfriend, told me to come in about half past four and I never got in until seven o'clock and my mum's boyfriend told me that he was looking for me and my brother, Keith. Then he (mum's boyfriend) was going mad and my mother was worrying just in case I sleep around and all that but I'm not going to do that at my age. OK then Alyson. Got to go. Bye.

(Audio diary extract, Melonie, foster child, family one)

The birth family would seem to view Melonie as both problem and risk, rather than danger coming from an outsider. This is interesting given that the harm to Melonie in the past had come from within the home. We might imagine how difficult it must be for the foster child to adapt to these differing perceptions of risk and danger (Valentine 2004). Thus Melonie appears to be viewed by her birth family as potentially deviant whereas she is cast as the innocent potential victim by her foster carer (see also Valentine 2004). Yet she herself claims a moral understanding that it would not be appropriate, to 'sleep around' at her age.

In essence, everyday risk management by parents and carers is informed by a range of information, 'vicarious and personal experiences, all of which are interpreted and made sense of within the context of local communities, producing subtly different geographies of fear' (Valentine 2004: 100). In this context, the physical structure of the home, by contrast to the potentially threatening outside world, shelters those inside from the dangers outside. The home is supposed to be the place where children can be safeguarded and protected. Yet these comfortable ideals often

disguise the fact that it is the home which is often the primary locus of abuse for many children (Morgan 1996) and is likely to have been the case for some of the children in foster care. In such circumstances it may be hard for foster children to understand and accept the security of both the physical and emotional family home when they have been abused within their own homes or even in foster homes in the past, as Callum describes:

My Mum was violent towards us. My cousins used to live with us and they put themselves into care and they made allegations against us as well. And I was very angry; I was angry with my cousin for doing it. Now I know he did the right thing. I'm glad to be here and I'm glad to be away from my Mum..... She went to prison for her violence against us.
(Callum, foster child, family eight)

This young person was only able to move on and feel trusting and safe with his foster carers once he had ended contact with his mother and stopped visiting her home. By doing this it seemed to allow the young man to put down roots in the safety of his foster home and begin to develop confidence in operating within it and also navigating his way in a safe new local community.

Children's rooms and children's space

All of the children in this study valued their own space. Out of the foster children interviewed (n=9) only one of the children was sharing a room with another foster child. All of the other foster children had their own rooms. This was very important for them as they had the opportunity to retreat from the foster family when they felt like doing so, and could use their rooms for this purpose. Many of the children took great pride in the orderly arrangement of their rooms which seemed to help them create a sense of control and stability. For some of the children it was the first time they had a room of their own and this lent them a new sense of self-regard and pride, as Nadia discusses:

We used to share a room in here but we found it too close together; now we've got our own room.....I'm upstairs on the far end; a big narrow room;

I got two windows, one at each end. I've got my own sink and a computer. I chose the colour, it's purple with pink curtains. I've got loads of pictures. You can see it if you want. (Nadia, foster child, family two)

In the audio diaries many of the children talked about spending time away from other people in the household by using their own bedrooms. This was the case for birth children and foster children. The bedrooms also allowed the young people to take responsibility for themselves and their space, in that they were generally required to keep their own rooms tidy and put their dirty washing in the appropriate place. This appeared to be an important principle in all of the households:

*They have to keep their own bedrooms tidy. They have to pick their washing up from the floor and put it in the laundry basket.
(Sally, foster carer, family three)*

The fact that foster children were supposed to have their own rooms and that there were regulations about rooms for foster children meant that it was the birth children who either ended up sharing a room or having a room on another floor to their parents (Sinclair *et al.* 2004). This clearly could have been an issue that caused bad feeling between birth children and foster children. One adopted child when asked what she would wish for, answered:

Have my own room. I have to share, as foster girls and boys have to have their own room. (Carla, adopted child, family one)

This child in giving an unequivocal view did not express any negative views towards the foster children within the home, especially as she had moved from being a foster child to a permanent member of the family herself. The one foster child who shared a room with another foster child would clearly have liked her own space. She was nonetheless happy in the placement and was there on a long term basis:

We argue a lot. We get on each others nerves. We share a room and she

likes to talk when I'm trying to go to sleep. (Lilly, foster child, family ten)

Foster carers recognised that this could be an area for friction between their birth children and the foster children and one carer discussed how she made sure that the birth children were not too inconvenienced or upset by these requirements:

I wouldn't say they (birth children) made a huge fuss over it, but they did say, why do we have to move (room), and we said, because we can't keep the kids long term if we don't move but we will build for you what you want. So you tell us the sort of thing that you want for the bedroom and we'll do it. (Sally, foster carer, family three)

Rooms became places of safety for the young people in foster care to the extent that some became guarded about their own space and rarely allowed anyone else in their rooms. One carer noted that it had taken the young person a long time to invite a friend to the foster home and that it was a real move forward when the young person felt able to let their friend into their bedroom:

That was a real coup because he doesn't let anyone into his bedroom; he is very sacrosanct with his bedroom. (Josie, foster carer, family four)

Belongings

Having their own rooms allowed the foster children to have their own belongings around them. Many of the birth children felt that it took a while for the foster children to begin to respect the birth children's property; having separate rooms helped to deal with this. Several birth children mentioned that the foster children would often take their property at the beginning of a placement:

When they first come in they don't know that our property is ours and they just go and take it, but after a while they learn that their property is theirs. (The kind of things they take) like things that are in my room, games and things. But they are fine now. (Megan, birth child, family three)

Another carer noted the importance of private space and individualised belongings for foster children:

I think it's really important that they have their own friends, their own space, their own toys. I think it is really important to have their own property. (Dawn, foster carer, family two)

Several of the carers talked about how few possessions foster children came with:

Jade and Candice both moved into here at the age of six, with a black bag, not two, a black bag, imagine they've been in the care system since the age of three and have so few possessions. (Sally, foster carer, family three)

Carers found it difficult to understand why some children had so few possessions when previous carers had been given clothing allowances for the foster children. Several carers also made the point that carrying children's belongings around in a black bags was disrespectful and something that the local authority could easily remedy. One carer said that the first thing that she did was provide a foster child with a 'holdall with their name on it', which went with them thereafter. It is this demarcation of property and belongings that might help a foster child develop a sense of self respect and identity. We move now to the role of the birth children within fostering.

Birth children

Both Part (1993, 1999) and Pugh (1999) come to similar conclusions that the majority of birth children enjoy fostering and that there are some inherent benefits for them. For example, Pugh identified positives such as companionship, looking after younger children and feeling good about helping others. Birth childrens' dislikes were noted around sharing (particularly bedrooms), dealing with difficult behaviour and coping with social workers who did not always recognise their value. Farmer (2002) concluded that many carers received informal support from their own birth children and where this was forthcoming there were fewer disruptions in placement for the foster child. As Fox (2001:45) notes:

Consideration of the significance of natural children in foster families....would ensure a more holistic approach which would ultimately lead to quality, safe and total care for all involved.

Siblings

In fostering, the birth children have new temporary 'siblings' entering their family on a regular basis. Relationships between brothers and sisters have been much less researched and observed than most other kinds of family relationships (Jackson 2004: xiii). There is also a paucity of sociological research on the subject (Brannen *et al.* 2000). However, Punch (2004) conducted a study based on 90 children who were natural, full siblings. She drew upon the work of Goffman (1959) and considered the ways in which interaction with siblings is often as a *backstage*, rather than a *frontstage* performance. Goffman defines backstage or a back region as 'a place, relative to a given performance, where the impression fostered by the performance is knowingly contradicted as a matter of course' (1959:114). As a majority of sibling interaction takes place within the family, the main setting for backstage is the home. Backstage activity occurs when an individual loosens control over their actions and appearance (Punch 2004, 2008). According to Goffman it is the relaxation of the personal front that allows someone to neglect the social rules of politeness and etiquette. Punch found that most siblings spoke of 'being who you wanted to be' when with siblings; backstage, siblings do not need to perform. Punch (2004, 2008) found that it can also be a tense, irritable place where anger is easily vented. Thus the home is a double-edged environment where people can relax and be themselves but also a place for conflict to emerge. This is an interesting notion when applied to foster care families, where there are indeed strangers living in the home, that is, other surrogate siblings but with whom one cannot necessarily be 'backstage'. This was mentioned by several of the birth children who noted that they were not always able to relax when foster children were around. This could make for a very different home environment where perhaps one's guard may never be truly dropped. Goffman (1959) argues that frontstage (i.e. in public) there is a desire to avoid a scene, but backstage siblings may sometimes try and create confrontation. Certainly the birth children were aware of this and some noted the difference in the

relationship between themselves and the foster child compared with their natural siblings. Charlie (birth child, family six) discusses this aspect during interview stating that it was not as easy to argue with foster children, as it was with his own brothers and sisters because:

.... if something happened you would not necessarily be able to make up.

Whereas he believed that he would have a continuing and repairable relationship with his birth siblings regardless of how they behaved. It could be argued that living in a home where you cannot fully relax places undue tensions upon the birth children, who in this study and elsewhere, utilised their bedrooms as areas of protective 'seclusion' from the family (Twigg and Swan 2007). Alternatively, having to be concerned for another's welfare, attending to the needs of others and learning how not to initiate or respond to conflict are important capacities for young people to acquire.

Sibling relationships have been characterised as either involving rivalry or being supportive, or a mixture of both (Sanders 2004). Historically and traditionally, the rivalry can be seen because of the competition for scarce resources of food, sustenance, parental love, affection and approval (Sanders 2004:7). Positive sibling relationships are important preparation for later life, such as friendships and family building. Sibling relationships can also be experienced as deeply divisive and troubled (Sanders 2004). A polarisation occurs when one sibling is viewed positively or negatively in stark contrast to the other; it is the differences that form the basis of thinking about them, not the similarities. Siblings therefore often have to find their own niche within family hierarchies (Sulloway 1996); this is not a universal hierarchy but a 'pecking order' which is unique to each family.

For the birth child in foster families, they may have a child coming to the family who is close in age or the same age and thus the birth child could feel their positioning within the family to be less secure or in some cases to be usurped. Younger children could become middle children, by virtue of having younger children placed with them. Clearly, this may present some difficulties for birth

children understanding their role and position in the family. Predictably, birth children often commented on status and positioning, most difficulty seemed to occur when children of a similar age were placed together, as has been recognised elsewhere (Twigg and Swan 2007). Liz, foster carer, Family One talks about this with regard to Melonie who is currently placed in the family:

Yeah, well I'm glad Melonie (foster child) is in the middle. You know, they're too close, because they're both thirteen now (Melonie and Helena), but at least Helena (birth child) just stays the oldest, Carla (adopted child) stays the youngest and they both (retain their position).

Children too similar

An additional but infrequent complicating factor can occur when not only the foster child is close in age to a birth child but also has the same name. An adult birth child in this study described the deep discomfort of feeling displaced by child of a similar age with the same name:

Yeah. Well the first placement we had was older than me so it was before they went into independent living and I got on really well with him. The girl that came after him, she was quite difficult but the younger ones that would come then you'd start to notice more that you were sharing like your parents more than with the older ones I think.....My parents would have to do more for the younger children depending on their problems as to how much time they would have to spend. You know they did actually place someone (who was a year younger) with the same name which was horrible. It was really horrible. I was big Sara and she was little Sara. That was awful.....Well I didn't like being big Sara (laughs). I'm not big, I'm little. Um and the name shouldn't come into it, but it is difficult..... I don't know what it was really. It's hard to imagine what it's like to have someone else there the same (as you). I guess it's a bit of role removal as well..... I hated them copying. I remember with Sara, the one with the same name, Mum was taking me clothes shopping and it was quite a rare thing 'cos I always had hand me downs from my older cousins. And my Mum had taken me clothes

shopping and then Sara had, had her clothing money through and she went out and bought just exactly the same thing and that was like uh-hh, the copying especially at like fourteen, fifteen years of age.

(Sara, foster child family five)

As an adult it is difficult to imagine how it would feel as a child to have another person of the same gender, age and name moving in, especially when they then started to mirror appearances. Yet birth children are sometimes expected to cope with such challenges and do so with good grace. For example, Josie and Philip, foster carers (Family Four), discussed the fact that their youngest son, Stuart, found it difficult to accept a foster child who had the same name and was of a similar age. Interestingly, they viewed their son's reluctance to accept the foster child as an act of selfishness and were unpersuaded about Stuart's fears about a likely loss of positioning:

He (Stuart) fronted us and I suppose he wanted us to, to break down (and drop) the thought of fostering because he wouldn't then be the youngest in the family, he wouldn't have all the attention or whatever but because we sort of stood firm and we had time together to think the thing through, it sort of took it's own natural level in the system, didn't it. When we met Stu (foster child) for the first time there was no animosity....(Philip and Josie, foster carers, family four)

Josie and Philip cast their birth son as immature and as the one presenting the most difficulties. The family managed the name difficulty by calling the foster child 'Stu', and the birth child by his full name, Stuart Roberts. Of note in this home was that the birth children were step children to Josie, hence there had been differing and staggered levels of integration within this reconstituted family. Josie stated that she was well placed to understand how a foster child might feel as an incomer because she too had once been an 'outsider' in the family and had to find her own position *vis a vis* her new partner and his children. It may therefore be that she had more empathy with the foster child in this context.

Another carer felt that her now adult son may have similarly experienced feelings of displacement, not for himself, but for his own infant children, when young foster children were placed with his parents. Sally (Family Three) discussed something of the complex interplay of family ties and expectations that fostering can bring to the surface. She notes how two young boys of a similar age to her two grandsons, were placed with her:

That did cause jealousy in a way Harri (grandson) used to be so jealous. He (son, Paul) used to find it hard to see the two little ones that we had, the foster children on our laps, and not the grandchildren... My son probably thought you've waited all this time for grandchildren and you are not making a massive fuss over it because you've got someone else's kids! Yet he (son, Paul) never behaved like that when we fostered kids and he was living at home.... We had the caravan and quite often we would take the boys, the two little ones down to the caravan and maybe Paul (son) thought that we should be taking his (children), but there wasn't enough room in the car and he may have thought if we didn't have them (foster children) , we could have taken his.

Such insights, reinforce the importance of anticipating the impact on the birth children and grandchildren when arranging a foster care placement and matching needs. Not only do some children feel displaced but there are some instances when they experience false and harmful allegations that can have a profound effect, as Sara described:

That came from the last placement when he was in one of his mad rages he decided to say that I'd restrained him and that came at the same time as.. when I was doing my AS levels. It was terrible. It was awful. He withdrew it almost as soon as he said it. The authorities didn't investigate or anything as there were loads of people in the room but it's still hard and you don't want it to happen to anyone else really. So I think my role now, I've taken on the role of watching any interaction between my own family and the foster placement because you never know what might happen....

(Sara, birth child, family five)

Whilst this allegation was never investigated by the local authority it had a significant impact thereafter on Sara, who became more cautious in her involvement with foster children. It is important that the needs of all of the children involved in fostering are considered. This was highlighted by Twigg and Swan (2007), who noted that some of the risk situations in which birth children are placed might well be considered as harmful and could trigger child protection proceedings were they to happen to a foster child.

Choice of placement by birth children: 'it's my home too'

Whilst all of the birth children in this study believed that they had been consulted when a prospective foster child was coming to the family, it is possible this process might have been superficial. There seemed to be some variation over whether they were told or consulted. The young people could not think of scenarios when they might say 'no' to a placement, Helena discussed this issue, stating that she was always consulted:

My Mum wouldn't accept a person into the house without asking, 'cos its my home too and she would want me to feel safe as well as my parents. Mum would know about the problems and tell me, so I would then know what my safety is...(the kind of information she would tell me about is) just what type of home they have come from so I know what type of things I could help them with and what to secure them with. My Mum don't tell me the really secretive ones because they are confidential.

(Helena, birth child, family one)

Whereas, Sara felt that she was told rather than consulted:

When Chris was coming Mum said it's another little boy, but you don't really get a choice. When we were getting approved we, Mum specified the type of child and they asked what Dad and I thought too. I have never said no to a child and cannot think of any circumstances when I would say no.

(Sara, birth child, family five)

Sara said that she would never say 'no', despite recalling problems with certain foster children and their behaviour in the past. In practice, the opportunities to object to a placement are limited in a world of adult decision-making (Thomas 2000), and consultation more generally is curtailed by the typically limited time for matching and preparation that occurs before placements are set up.

Positives of being a birth child

Mostly the foster carers, as in other studies (Triseliotis *et al.* 2000), felt that fostering had been positive for their birth children, with a few exceptions. Most carers felt that their birth children had learnt vicariously about life through fostering, without having to experiment or involve themselves in risk taking behaviour. All felt that fostering made the birth children appreciate the home comforts and security that they had previously taken for granted and were clearly able to compare their own lives with those of the foster children. The act of fostering and living with someone less fortunate than one's self seemed to lend the young people a capacity for empathy:

Charlie is a kind of father figure. He is very, very good with children younger than himself. He has a hell of a lot of time for people, very intelligent, very compassionate so I knew that he would get on with Carl....
(Steve, foster carer, family six)

The birth children in this study enjoyed the social contact and being in a helping role. Helena described helping and protecting foster children and gave examples of the way she engaged with Melonie (foster child):

Like when sometimes when Melonie says 'I am going to have a fight today', I'll try and push her away to stop her from getting hurt. So you're like trying to help them and stopping them from getting hurt and like protecting them at the same time, which is really helpful..... to them. ... It makes you

feel warm hearted and kind and considerate when you are doing it. It makes me feel good about myself. (Helena, birth child, family one)

Helena went on to describe ways in which she helped a child settle into the home and again talks about situations in which the foster child, Melonie, needed protection and advice:

When Melonie came and we all went to Pontafelin to buy her a few things to get her nice and settled in, I went up into Melonie's room to help her settle in. I was just helping her to relax and unpack so she would feel more welcome and everything. We went into Church Road to buy her more stuff so she would feel more welcomed into this home. And she goes 'Oh my Auntie lives down by Church Road'. I goes 'Oh there's nice' and she says 'I'll run away or something', but I talked her through it to stop her from running away. I told her all the bad stuff that would happen, like the police would be after her, maybe she'd have to get moved to another home after another. Then I told her all the good stuff, like if you stay, the foster people might think you are getting better and you go home to your parents more sooner than you think. And as soon as I started to put all them good ideas into her head, she started to come round to the idea that she was getting more welcomed into the home and that was starting to secure her and that I wouldn't let anything bad happen to her if she ran away.

Helena's insider knowledge of the fostering system and caring intervention lent additional stability to the placement. Young people often invoked terms and concepts that indicated their acquisition of formal language usually associated with adult discourses in fostering. Sara, age twenty and still living at home talked about fostering and the different skills required of birth children:

Sara: There is a lot of stress I think and a lot of people don't understand about the way, like different behavioural techniques of managing behaviour
Researcher: Do you ever use such techniques?

Sara: I do if I know I need to, like the child we had before, we had him for so long, it was effectively that, that I did use them.
(Sara, birth child, family five)

Of all birth children interviewed only Sara had been on a training course for dealing with behavioural difficulties (a course on 'working with sexually abused children' provided by the independent fostering agency). She had found the training informative and felt that it assisted her role in family fostering. Sara had also briefly attended support groups for birth children, run by a local authority. The other birth children had not been actively engaged in training or in events to support them in their roles as informal carers. Like their parents, many of the birth children felt a loss (see Twigg and Swan 2007), like a bereavement when a foster child was leaving the family. Here again we can note the need for more involvement with birth children to help support them in their multiple and often complex and subtle caring functions. We now move on to the views of foster children.

Foster children: choosing and being chosen

The foster children were able to compare their experiences in a range of family settings, including their own birth families. In this respect they had some expertise about family life (Holland 2007) and knew what they did and did not like. All children have to negotiate the difficult period of settling in. They need time to do this in order to begin to come to terms with what has happened, to stabilise and then to invest in their new situation and their future (Cairns 2002). Yet fostering often does not allow children the time needed. However this could be rectified if fostered children and carers are allowed to choose to continue in the placement after the initial short term trial. Whilst in this study little matching seemed to have happened before a child was placed, choosing to stay there, or knowing that the carer had chosen to keep the child after the allotted time limit, was important for both carers but most importantly for the foster children. Certainly Lilly, the child placed with Julie, felt that she wished to remain with Julie (Family Ten), as a 'forever family', despite the fact that Lilly had been taken from Julie for adoption (against Lilly's wishes). When this did not work out she was returned to Julie:

Lilly: I've always felt at home here.... I didn't like the other one (adoptive parent). I like Julie. She is like my mother.

Researcher: How is she like your mother?

Lilly: 'Cos she treats me good.

(Lilly, foster child, family ten)

Julie stated that the local authority would not place other children with her if she kept Lilly in a long term placement. Julie described how this was potentially devastating for her as a single parent with limited income and resources. She believed it was inconceivable that moving Lilly again would have been in her best interests and insisted that Lily should remain with her:

I had to wait to go to panel. I was told that if I was going to take her (foster Lilly long term) then I wouldn't be having any other placements. I said 'fair enough, if I can get one out the system, carry on'. At least I knew she (Lilly) wanted to be here and she was happy with us . She had been here two years and it is a long time in a child's life. It was just the way it was put over to me. I think they thought that I would say OK I'm not going to take her on then, but I wanted to make it work. They didn't want to lose me as a short term carer basically.....Well I went to panel a week before Christmas last year and the placement officer told me I'd been passed at panel, since then I have been passed for , actually I could take two long term and a short term now so things can change drastically (laughs).

(Julie, foster carer, family ten)

Julie's commitment to Lilly, to publicly articulate her wish to keep the child, was a very important message for Lilly, who for the first time felt wanted and cared for. Callum too (foster child, placed with Hazel, family eight) perceived it as highly significant that Hazel *chose* to keep him and vice versa, demonstrating a mutual commitment that cemented the young man's sense of stability and self worth:

I didn't think I was ever going to settle down here and I had only been told that I was coming here for two weeks until they could find me a place up in

Llanon. And two weeks came and went and then I went on to a couple of months and then I started school and I just fell in love with them....with the place and the area. I got moved from placement to placement and I never settled anywhere and then they dragged me away from everything I knew, my family and...I didn't. I was told get into the car you are going to a place down in Cyfeilog and I got in the car and I got here about half past nine bonfire night 2004 and I never left (laughs) and it was supposed to be a two week temporary thing because Hazel was only a carer for temporary for six months so she had to go back to panel so that I could stay.....They realised that they didn't want me to go, and I realised that I didn't want to go and I felt (it was) a real big gesture by Hazel when she went back to the panel to ask if she could be long term foster carer, just for me and I thought that was really, really I really felt wanted by Hazel.....After that six months they could have said OK the six months is over take him away but they didn't. That was when I felt wanted. (Callum, foster child, family eight)

Callum, an articulate young man felt settled for the first time in his life and was able to stabilize and put down roots in the local area. He had made attachments to the locality and to the local people; thus if he was to move, he would lose far more than the immediate foster family. Callum began to succeed academically, achieving GCSE's and began an employment training course. He was starting to lay the foundations for his adult life. It is difficult to see that he could have done this without settling long term with this family. As referred to in previous chapters, Callum was able to deepen his attachment to the family because of the help of a therapist employed by the independent fostering agency, who helped him come to terms with past experiences and the loss of his mother:

But when (Callum's) Mum went to prison it was a different story. He seemed to think Mum pleaded guilty to a crime and he no longer wanted to protect her, because she admitted what she had done to them. He realised that there was more to life than what Mum was doing. He didn't have to stand there and be the battering ram. He didn't have to be hit. She went down for GBH on them and his cousins. (Hazel, foster carer, family eight)

Birth family and closeness

Notably, relationships with birth parents did not feature widely in interviews or diaries. Some young people did not want to talk about their parents and most seemed content with the contact arrangements that were in place. Some still spoke of missing their parents but appreciated that living together was not possible. The way in which children did articulate their relationships with their birth families was in relation to completion of the eco maps. The children were asked to indicate diagrammatically significant others to whom they felt they were 'closest'. Eleven children completed eco maps and two of these also chose to draw their networks of connectedness. Most children used concentric circles in their eco maps to depict the closeness of relationships and did so with three circles widening out from the centre (levels one, two and three). The information from eco map diagrams and drawings has been transposed into Table 10.1 (overleaf).

Whilst the eco maps took on a variety of forms, it was evident that four of the seven foster children who completed them had not included their birth mothers on the diagrams, yet two of these children had located their birth fathers as people they felt close to. Gardner (1996) also found that foster children often exclude birth parents from descriptions of their families. From discussion with the children in this study, the absence of mothers in eco maps was because they held birth mothers responsible for what had happened to them and therefore felt more let down by them. This of course may be reflective of a society which expects more of mothers than of fathers. Three of the four birth children who completed eco maps did not locate the foster children on their diagrams as people to whom they felt close. Similarly, four out of the seven foster children who completed eco maps did not locate birth children as those to whom they felt 'close'. This may suggest that some foster children do not recognise or experience birth children as individuals they feel closely attached to and vice-versa. Two of the young people in foster care included professionals in their network (social workers, residential staff, police and solicitors) this perhaps is not surprising given the amount of time and intensity of events that the young people share with these professionals. In this sense these eco maps in part mirror some of the support frameworks, as identified by the foster carers in Chapter Five.

Table 10.1 Eco maps completed by the children

Foster Children N=7	Birth Children N=4	Level One	Level Two	Level Three
Melanie Family One ***		Male foster carer, dog	Female foster carer, birth mother, birth grandmother	
	Helena Family One	Mother, father, adopted sister, foster child and dog	Uncles and aunts	Cousins and friends
Candice Family Three		Female foster carer (‘Mum’), male foster carer (‘Dad’), foster carers’ children, foster uncle, foster auntie, foster grandmother, best friend	Birth sister, birth mother, social worker, solicitor, friends.	
Stu Family Four		Stu’s birth mother, birth brother and sister	Female foster carer, male foster carer and ‘their family’, two dogs, Independent fostering agency, residential staff (previous placement)	Foster carers’ friends, social worker, work placement staff, police, friends
Chris Family Five *** (birth mother not located)		Female foster carer, male foster carer, Chris brother, two dogs	Chris’ sister	
	Sara Family Five *	Mother, father, aunty A, aunty B, two friends	Church friends, cousins, grandmothers, other uncles and aunts	Neighbours, work friends
	Geraint Family Six *	Mother, father, brother, sister		
	Charlie Family Six*	Mother, father, brother, sister		
Suxie, Family Seven ** (birth mother not located)		Suxie	Suxie’s sister, brother, grandfather and nanny	
Callum Family Eight (birth mother not located)		Male foster carer, female foster carer, Callum’s birth sister, birth father, two friends	Carers’ children and their partners, friend	Carers’ grandchildren
Lilly Family Ten (birth mother not located)		Female foster carer, foster carer’s children, other foster child in placement	Lilly’s birthfather and sister	

* No foster children located on eco map

** No foster carer located on eco map

***No birth children of carers located on eco map

Being with others: being alone

Of the five families who had placements with the independent agency, four of those families had only one foster child placed with them. This was because it was felt better for the foster child to be placed alone to meet his or her needs, or that the foster child presented challenging behaviour that might be difficult to deal with if more than one foster child was in the home. There were three of these 'singleton' placements where there were no birth children under 18 years in the home (Stu Family Four, Chris Family Five and Suxie Family Seven). Two of these were in rural locations (Stu and Chris). For Stu this was not an issue as he was older and going out to work, but for Chris, this was problematic. Chris and Suxie were also transported some distance to school, and so it was potentially more difficult to make friends in the neighbourhood. Suxie was not in a rural location and very much enjoyed going out to play on the streets of the housing estate and so was able to tap into the local children's social network. However, Chris, foster child in Family Five, found his rural isolation difficult:

I'm having a rubbish day. Every day is a rubbish day. It's because there is nobody here to play with. (I do play with the boy down the road) but not very often; I don't really know him... I can't play board games. They are for two players. I haven't got anyone to play with! I'm on my own all of the time.. I would like to be with my brother (who he had not seen for many years and was in prison).

Whilst Chris did see the foster carers' nephews and nieces on a regular basis, he found not having any control over friendships difficult. Interview and audio diary from Chris highlighted the difficulty he felt in being alone. It can be difficult to balance the needs of the foster child for company with any risk they may pose to other children. Being with others was appreciated by many of the foster children and they compared this favourably to times when they had been placed without other local children being around:

Well if you are on your own, you get left out and upset but where we live we have lots of friends. (Candice, foster child, family three)

In four of the ten families there was more than one child in placement and this seemed to be appreciated by the foster children as supportive and helpful (even if individuals were not recognised in the eco maps). This was also noted by Berridge and Cleaver (1987) who found that sibling and peer support were vital in sustaining placements. There were four sibling foster children in this study and their shared placement was a matter of strong regard by the group:

I think it's that we are all here together and Dawn and Ian are our friends more than just a carer..here we goes out a lot and does a lot of things. Going out together and doing things together. We all go and see my other brothers and sisters. (Nadia, foster child, family two)

This was the only group of siblings living together in this study (they had other siblings who were placed elsewhere). All of the foster children had brothers and sisters but no others had been placed together.

When interviewing the foster children, it was only Nadia (above) where the foster child could recollect making a choice to come to the placement. All of the other children were clear that they felt they had few if any other options if they turned down the placement, in this sense the idea of matching would seem to have marginal utility:

*Not much (choice) if I hadn't come here I'd have gone into a home.
(Chris, foster child, family five)*

This is interesting in that Sinclair *et al.*'s (2005a) findings suggest that children's desire to be in a placement was a significant factor in whether the placement was successful, whereas the majority of children in this study had not been given any real choice, yet nearly all were experiencing successful placements. This might suggest that a child cannot really make an informed choice about wanting to be in a placement until spending a period of time there.

Communication and technology

Whilst some adults fear technology, believing that computers and television weaken the inter-dependency and links between adults and children (Wyness 2006:81), it is possible that computers may strengthen links between children. The computer and the internet can reveal much of the 'permeable boundaries of domestic space' (Facer *et al.* 2001:23), and was seen as an important tool by many of the foster children in this study. It was a means to keep in contact with friends whom they no longer lived near to and a way of 'staying connected' more generally (Gilligan 2001:28). It allowed children some autonomy and a penetration beyond the 'cocoon of the family which allows children to demonstrate independence of mind relative to their carers' (Lee 2001:159). Given that foster children often feel that many of the decisions about their lives are taken out of their hands, their ability to take control of contacting friends in this way was important to them. All of the foster homes within the local authority had computers which facilitated this possibility. (The use of Bebo, MSN and other communication sites have increased significantly since the completion of this research study). The following comments from the children demonstrate how they used computers to sustain links with their circle of friends and support networks:

I came home and had a go on the P.C. I logged on and caught up with friends. (Extract from email diary, Nadia, foster child, family two)

I'm good at maths and IT. We have a computer at home, we have two. I like it to keep in contact with friends. (Candice, foster child, family three)

Another child when discussing her planned move back to her birth mother, hoped that she would be able to keep in touch with her new friends via MSN on the internet:

They've all got MSN and I'll be getting a PC soon. My mum doesn't have a computer, but my mum's boyfriend has one, but he hasn't got MSN, but he has got the internet. When I get my PC, I'll be getting the internet and then I'll be able to keep in contact.... (Melonie, foster child, family one)

In foster care the internet could be an essential aid in maintaining links with significant others across geographical distances, even potentially between birth parents and their children who are fostered. It does seem that computers increasingly facilitate the preservation of friendship and potentially sibling support networks. George *et al.* (2003: 357) note this potential in terms of an international body of foster children ‘undoubtedly the internet will grow in importance as a vehicle for communication between these groups and will give some of them a sense of belonging’. They argue that foster children and foster carers might be able to ‘band together’ internationally in this way to become a visible presence for policy makers. These internet contacts and support networks may play a significant role in improving self-esteem for children which in turn could help develop resilience. Technology and foster care remain a topic in need of more research.

Resilience

Much has been written about promoting resilience in children. Developing a range of interests and skills is one aspect of this (Gilligan 2001, Gilligan 2007). The children in this study were all very appreciative of having the opportunity to take part in a range of extra curricular activities. For some children this was in stark contrast to that available in their birth home, as Nadia highlights:

I'm learning German..I used to do Theatre Craft but now I just want to do singing. I likes activities; I've been to Germany. I go to Romarts (arts centre) to do art...I'm staying here. I don't want to go home. I aint got enough activities to do there. I want to start driving lessons next year; I've been saving up already I got my money. I won't be able to earn nothing there (birth family home). I'd have nothing. Here I've got so many more options. (Nadia foster child, family two)

This interview extract belies the child's reluctance about having money spent on her. She found it difficult to accept that she was worthy of having special things of her own. Both Nadia and the carers commented on this and the confidence that being involved in community activities had given her:

Like I'm always worried about finances and I don't like asking for things, but they have taught me to be able to ask for anything. I comes first with them (foster carers).....I did have a chance. I have done so many activities now, I think well my attitude has changed. Now I think I can try anything...I feel every activity I've done is where my confidence has come from.

Other children spoke about the new opportunities available to them that would have been very unlikely to occur in their birth family:

I am in a band at the moment, called (names a horrid film) which..... My friend chose that name (laughs) he is a little bit more weird than I am. He wanted it to be ... I wanted it to be a mellow band you know with significant guitar solos and stuff. But he wanted it all this, a lot of heavy, almost violent lyrics and stuff and we just came about it. We were talking about the film called and he thought it would be a good name (for the band). We are hoping to have a concert in the Queens Hall and that would be around 250 people... It's only been in the last months (that I have been interested). I had a guitar for Christmas off Hazel (carer), an acoustic. At the moment it doesn't sound like anything, but I'm starting to put things together.

(Callum, foster child, family eight)

It was the pride that these children took in their new activities that was striking. Nadia noted how her foster carers, like others, were good role models (Gilligan 2001:47, 2007:93) who inspired her and boosted her confidence, so that she had a 'can do' attitude:

Dawn and Ian are so active; they are really confident people. Living with confident people makes you confident. They are always doing things, Dawn likes archery...In the theme park she came on this massive ride...

Foster carers were not only facilitating activities for the children but also modelling a positive approach which contrasted with the earlier and negative experiences of children, as Nadia notes:

When I lived there (birth family home) I used to be the mother. I used to feed her (sister) and look after her. I was making bottles (for the other children) at five (years of age). I was changing nappies at six (years of age).

Nadia was clear that this would be the case again should she return to live with her mother. It would seem that the confidence of the children increased as a result of developing a range of new interests. Similarly, the carers much enjoyed sharing in the interests of the foster children and saw this as something that the young people contributed to their family:

We enjoy all of the things that the new children bring into our home.
(Steve, foster carer, family six)

Steve noted that the foster child had brought a fishing hobby into the home and that consequently all the males in the family had developed this interest; Steve's brother Jason had joined them too:

If you said to me last year, to me how anyone can sit all day long in the freezing cold and not catch anything all day long - got to be stupid, bored out of my head but what it is- it's meditation. It's time and space. The time goes like that. Carl (foster child) initiated us into it. He is passionate and so we take him.

Sport

Sporting interests and activities seemed to be one of the obvious ways in which male foster carers and male family members could make their contribution to fostering. Ian (Family Two) comments:

We have always said that whatever child comes along our focus is around finding out what makes them tick. And you do. You will find something. There will be something. So we throw ourselves into different activities all of the time. Something clicks. Which is rather wonderful for us.

(Ian, foster carer, family two)

For those actively involved in sport and for those who were not, sport and supporting teams was of much importance for nearly all the males fostered. As Willams and Bendelow note (1998:21), sport provides spectators as well as participants the opportunity to:

spontaneously lose their bodies. In this respect the intensity and excitement of involvement in sporting events facilitates a controlled, decontrolling of emotions and allows a blurring of boundaries between individuals and collective bodies.

Young people saw their allegiance with extended foster family members as being formed and developed through the support of differing sports teams by family members. One young person talked only of sport during an interview:

(My name is) Carl Lord and I support Chelsea at football. (He continues) My birthday party is this Saturday...It's a football party.....I like football I like playing rugby, I like going fishing, coarse fishing. I like catching fish, I like golf and swimming (too). (Carl, foster child, family six)

In Wales, sport (particularly rugby) takes on a special significance. Bonding for the male foster children appeared to be developed strongly through sport and the supporting of team games. This allegiance seemed to give children a sense of identity, affiliation and a sense of belonging, 'it is the emotional engagement with the team that makes it so gripping and inspires this loyalty. And to really feel that you need a strong sense of tribal loyalty and attachment to place' (Baggini 2007:15). Their allegiance to sports teams seemed to bolster a sense of belonging and self esteem. This aspect of their identity was something they were able to take with them

(and had taken with them) in the course of their care careers that had involved moves to different families and different parts of Wales and England.

Extended family and local community

The importance of extended family playing their part in fostering was highly valued by all of the young people, and this was in relation to adult birth children, grandparents, aunts and uncles. One young person Callum, Family Eight, talks about his feelings for the extended foster family and exemplifies this point:

We went to the Royal Welsh Show and I carried him on my shoulder. He is still my little nephew. I was so happy because of it. Little Sophie, his sister is the same, she comes up sits on my knee and I read to her. She is a darling. She means a hell of a lot to me. As far as I am concerned they are my relatives, that's why I call them my niece and nephew. I asked Fran (adult birth child) if she minded me calling them that and she was quite flattered by it. They mean a lot to me. It's a shame they support Man United though.

As with other looked after children, the local community was seen to play a part in their developing sense of stability and identity (Ungar 2008). Thus, Callum went on to talk emphatically about how he felt part of the community, and was recognized positively by local people in the village. We might infer a gathering resilience and sense of relatedness (see Howe *et al.* 1999) for Callum in that he felt supported by the family, the extended family and also by the local community:

Well most of the people know me. I say 'Hi' to everybody but a lot of the people I do know. There is the occasional person who will say 'Hi' and I don't know them...

Thus we can see that support networks can spread wider than the family unit (Williams 2004). Even when children had left these foster families there was for many the offer of continued support and affect:

It's funny how they (past foster children) pop out of the woodwork. One girl visits and she brings her son and we baby sit for her. She is a friend really too. We help out whenever we can . (Dawn, foster carer, family two)

What we see in these foster families then is a network of care that can help embed the child in their foster family, neighbourhood and locality.

Conclusion

This chapter has sought to give the children in this study a sense of 'voice'. It has aimed to place them centre stage in order to recognise and affirm their status and rights (Woodhouse 2003). The children in this study did not want to be seen as passive victims but, overall, saw themselves as fortunate to have found some stability via the foster care system.

The children very much valued the opportunity to play with other children freely, and the opportunity to engage outside of the home independently of adults. Feeling safe in the locality was important. Foster children often had to navigate several 'geographies of fear' (Valentine 2004) with regard to the various communities and homes in which they lived. It seemed to be difficult to transpose expectations across different cultural communities. All of the foster children in this study valued their own bedroom space, and took sanctuary in the seclusion of their own rooms. These gave the fostered children something to take pride in, as did accumulating and establishing their belongings around them.

The birth children were seen to play a pivotal role in fostering, although they were rarely included in planning or training. They nevertheless had become 'experts' in assisting and mediating with the foster children. The extended relatives of the foster family were also seen to be significant as relational attachments for the foster children, especially adult birth children who no longer lived at home, who took on the mantle of trusted Uncles and Aunts. Where children were placed with birth children of the same age and gender this was particularly difficult and was exacerbated when children shared the same first name; this was particularly difficult for the birth children. Living in a 'frontstage' (Goffman 1959) environment

could also be tiring for birth children, especially where they did not have the equal status of having their own rooms.

Resilience and self-esteem in foster children was engendered through participating in a range of extra curricular activities and pursuing hobbies and interests, as well as through allegiance to sports teams. Foster carers who encouraged and participated in such activities and acted as role models were particularly valued by the young people. When children felt settled in foster care, and had acquired an often elusive stability, they wanted to be able to choose to stay with the family and exert some control over their destiny.

Conclusion

The two literature chapters One and Two addressed several themes which have informed the design of this study. There have been few studies in the UK that have taken an in-depth case study approach to foster care, including interviewing foster carers and both foster and birth children. Many studies have taken a more quantitative and outcomes-based approach from large data sets (Triseliotis 2000 *et al*; Sinclair *et al.* 2000). Quantitative studies whilst hugely valuable do not uncover the everyday practice and the meanings ascribed to them, which this study has sought to reveal. The review of the literature chapters also noted the relative lack of sociological approaches to social work and foster care (Berridge 2007; Winter 2006), hence this study has drawn upon social constructionist tradition to explore fostering in-depth via an ethnographic type focus that included audio diaries, interviews, eco-drawings and participant observation. This mixed methods approach has aimed to expose the inner workings of the foster home and the experiences of those within it.

The literature review, with regard to the sociology of children, emphasised the need to place children centre stage, and as a starting point for the study (Woodhead 2003). The study has endeavoured to give children a voice (Kehily 2004) and to try and understand their experiences and the meanings attached to these. Further, social work research has often dwelled on the negative, rather than taking a strengths-based perspective and focusing on what is being done well (Saleebey 1996). In contrast, this study has attempted to unpick elements of foster care success from the lived reality of children and their carers.

In grasping this notion of 'success' the study was situated conceptually within the notion of an ethic of care as being central to people's lives, albeit often unrecognised and undervalued (Williams 2004). Previous studies undertaken with children have revealed that their strong moral understanding of care and that 'love, care, support and mutual respect were the key characteristics of family that they valued' (Morrow 1998:112). Williams (2004:51) too, noted that 'children value fairness, care, respect and trust'. Happer *et al.* (2006) noted the importance of relationships and trust. This study has drawn upon these and other contemporary writers (Orme 2002; Parton 2003;

Featherstone 2009) in recognising the relevance of the ethic of care to social work settings, and within this thesis it has been positioned as the core topic of empirical study and conceptual application.

Sociological theory for understanding foster care and vice versa

Adopting a sociological approach has been illuminating for this study, as it has made the familiar strange (Savage 2008) and worthy of consideration, rather than somehow self-evident and therefore not meriting attention. Thus, food, touch, space and time came to the fore as pivotal influences on family life and as ways of demonstrating intimacy and commitment to and from significant others. The symbolic importance of each of these domestic zones of care, transcend the regulatory and formal approach sometimes taken by social work to public care, which for this reason finds it difficult to capture the nuance, richness and complexity of family life. Foster care itself challenges some of the sociological notions of individualisation (Bauman 2003, 2007) and loss of 'otherness' and stands in some contrast to these. Rather it is better grasped via the insights offered in the sociological work on the family by Williams (2004) and Smart (2007). Smart (2007:9) notes that 'qualitative studies cannot prove or disprove the grand theories (such as individualisation), they can only bolster or chip away at their credibility'. This study 'chips away' at 'the decline in the family' thesis, and emphasises continuity and connectedness across groups and localities. Studies like this one illuminate meaningful experiences as they focus on 'a range of family practices and the meaning attached to forms of exchange and connectedness, which tend not to be visible at the national survey level' (Smart 2007:15).

Care and its multi-faceted character has been the core focus of this sociological enquiry and has provided a number of important insights into the experiences of these remarkable families. The lives in foster care have rarely been focused upon in this way. Whilst the literature on fostering reveals important data about demographic and service structures of foster care, it contains typically few qualitative explorations of the hidden world of foster care families. Hence the major justification for this study is the hitherto rarely excavated mundane world of the foster family.

A summary of the findings

This is not simply an examination of the hidden aspects of every day fostering. It is also a conceptual mapping of informal welfare practices and lessons that can be learned from this. The study has drawn throughout upon ideas about the ethic of care, which has helped thread together this large and varied examination of the private realm of fostering.

The vital aspects of effective parenting were defined in this study as acceptance and warmth, blended with an authoritative style. Parenting style was seen by participants to be extremely significant for helping vulnerable young people. We saw that difficult behaviour appeared to be moderated by consistency, warmth and empathetic caring. Carers allowed young people to express their feelings of anxiety and loss whilst providing consistent care throughout some extreme expressions of distress and challenging behaviour, until the children began to stabilise and meld with the family. This study also demonstrates that some carers are more readily able to 'click' with a wide range of children. However where the click or chemistry did not occur or had not yet happened, this could prove to be quite a laborious and stressful experience. Foster families need to have clear rules that are reasonable, not oppressive and are tailored to the needs of the foster child. It is the accessibility of the rules and the ability of the child to understand, digest and interpret the rules that allows the child to settle in the home.

Carers and therapists can be instrumental in helping a fostered child move through ambivalence towards adaptation and assimilation into a foster home (Cairns 2002). While the intervention of therapists was more readily available via the independent fostering agency than the local authority, it would be beneficial if this service could become more accessible to all looked after children, given what we know about their sense of loss and attachment needs (Aldgate and Jones 2006).

The provision of physical care is often overlooked and is difficult to incorporate into standards and outcomes; however issues of physical nurturing and bodily comfort featured highly in the accounts from the children. Attention to physical appearance and grooming and its impact upon self-esteem should not be under-estimated and potentially should be actively encouraged. Touching and hugging were valued highly by foster

children who often had limited experiences of positive, non sexual intimacy. This too has often been overlooked in research. Within this context, pets proved to be significant in offering foster children the possibility of physical comfort and nurturing as well as providing opportunities for learning to be responsible and to give and receive affect.

The need for individualised placements for young males and young females was also highlighted. Some families will provide more feminised spaces for children, whereas others may offer more masculine settings and this could be factored into the planning and arranging of placements, especially given that many of the children in foster care will be reaching puberty. Other placements by virtue of the make up of the families were equally able to provide male or female space. Time and space need to be prioritised for private and intimate discourse between carers and children. Foster children need their own space and a demarcation and personalisation of their own belongings. This in turn allows the young people to respect the space and belongings of others. Space also enables foster children, birth children and carers to have seclusion within the home.

Space for play and leisure, for example outdoor space, parks and caravans were seen as helpful and safe environments which created further opportunities for young people to develop their navigational skills across a range of social settings. This finding was echoed in the Funky Dragon research undertaken with children from across all local authorities in Wales (2008 www.funkydragon.org). Funky Dragon (a children's policy representative body) found that children wanted safe places in their own neighbourhoods. Children's feelings of connectedness and being part of peer support networks were facilitated by access to playing out in the locality. This independence from adult supervision allowed for autonomy, essential for the development of resilience (Howe *et al.* 2001). The autonomy over maintaining and promoting friendship networks for young people was also assisted by the use of MSN and other internet communication sites.

Whilst some carers see fostering as an occupational role, all of the carers were motivated by altruism, wanting to give something back to society. Two of the male carers, who had childhood experiences of being looked after, particularly wanted to help

ameliorate some of the negative experiences that young people may have had in the care system. There were three male carers taking primary responsibility for fostering and two joint male carers out of the eight male carers in this study. Male carers took a prominent role in fostering within this research, with all of the male carers being actively involved with the children, offering 'hands on care' (Brannen and Nilsen 2006). Male foster carers, adult male birth children, uncles and grand fathers were seen as important role models especially for children who had previously experienced abusive relationships. Males in fostering in this study took on an activity-based role, as well as responsibility for domestic housework (Dolan 2008). Participating in sports and activities and allegiance to sporting teams, offered a sense of permanence and connectedness for young males in particular, and appeared to bolster their self esteem and thereby potentially increase their resilience.

Young people were supported by extended foster family members including grandparents, uncles, aunts and adult birth children which allowed them to feel connected, related and part of a wider family support network. This 'behind the scenes' activity may be under recognised. Children benefited from being placed with other foster children and the reciprocal care that it afforded: they sometimes did not appreciate being alone, especially where there were no birth children in the home. Rural locations could exacerbate these difficulties and the impact of this needs to be considered. However one must also be mindful of the needs of birth children when placing challenging foster children. Only one sibling group was placed together in this study and this was experienced as supportive and helpful, yet all of the other foster children had siblings but no others had been placed together. It may be that more emphasis should be placed on keeping siblings together and more carers prepared and allocated for this role, for example those who did not have birth children living in the home. All of the carers in this study were white UK citizens although there were six black, minority ethnic children fostered with them. Notably, this was not raised as a matter of interest or issue by any of the young people or carers during interviews and in audio diaries.

Birth children were seen as essential to the success of a placement, in some cases making significant sacrifices for the sake of the foster children. The needs of birth

children were not cast as paramount by adults, but often came secondary to the needs of foster children. The birth children benefited from a wider understanding of the complexities and difficulties of some children's lives and learnt about the world vicariously. On occasion however they were put in potentially challenging situations, including having allegations made against them. Birth children in fostering contexts have the same needs for protection, participation and agency as foster children. Access to training and support groups should be made readily available to birth children. More systematic and meaningful liaison could be achieved with birth children when planning and matching arrangements are being undertaken. Placing foster children with birth children of a similar age and of the same gender (especially with the same name) should be thought about with care by fostering agencies.

Food of course is central to the lives of children but can be seen also as a potential therapeutic device, which merits more consideration and thought by providers of services. As a subject area this could be usefully included in training and development workshops for carers. The eating of communal meals and the joint preparation of food and table were seen as highly significant by and for the young people. The symbolic importance of preparing good, nourishing food and the regularity of meal times should not be under-estimated for physical and emotional development. Family life was seen to be enacted through routines, regularity and constancy and these were essential frameworks within which the young people could easily locate themselves.

Having time to spend as families, for example through the Sunday lunch routine, was an important ritual by which family could be enacted and displayed to the foster children. It was important that time was freed up to be spent with children and this was helped by at least one carer being dedicated to the role of fostering, so that there were not too many competing demands on carers time; albeit time for carers to spend together without children seemed extremely limited. Aldgate and McIntosh (2006) note the central importance of spending time with children in their '*Time Well Spent*' study.

This study suggests, as have others (Sinclair *et al.* 2005b), that notions of short term and long term care are not always helpful. Placements that are only intended as short term but where the child and family 'click' should be allowed to continue, as alternative

plans may be unsuccessful. It seemed that sometimes organisational policy took precedence over individual needs. As Berridge (2001:172) rightly observes 'organisations owe it to the people that they serve to keep in mind their key overall objective of improving the quality of life of children and families'. Choosing or being chosen was a vital ingredient in the success stories of both the children and the fostering family; choosing is essential for participants to demonstrate their agency, their commitment to care and connectedness. Financial support could be put in place to facilitate adoptions or residence orders to further increase the likelihood of long-term care.

The children in this study, birth, adopted and foster children, showed great strength and resilience. All were able to locate and develop their abilities and achievements through systematic development of extra-curricular activities. This offered significant potential to improve self-esteem. None of the foster children felt sorry for themselves, but the majority felt appreciative of the opportunities that they were being given and viewed themselves as active participants in fostering. The foster children brought a great deal to the foster families in this study in a reciprocal act of care, communing, sharing and the enhancement of family life.

Implications for practice

There are a number of implications for practice from this study. The first is that some excellent work takes place by fostering families and their views should be listened to with more regard around matching. Their work is often unacknowledged and unrecognised. Many children have found a security and stability from foster care that they had not previously experienced. In fostering, children and families have the chance to 'try each other out', an obvious opportunity for long-term matching. Once the 'choice and matching' has been made by the main stakeholders (the children and the foster family), this should be listened to and taken seriously by social care staff, who may sometimes be placing more emphasis on freeing up the carers as a future resource or on implementing previously made plans. 'Forever' families are not found easily by children, and should be cherished not jeopardised.

The importance of the parenting skills of foster carers, typically offering warmth, acceptance and an authoritative parenting style has been highlighted in this study, as elsewhere (Cameron and Maginn 2008). It is difficult to know whether foster parenting can be 'taught', but workshops discussing different approaches to parenting and dealing with challenging behaviour which are jointly facilitated by foster carers and social workers can help demonstrate the importance of parenting style and encourage carers to see themselves as beacons of good practice.

The foster children valued relationality, feeling connected and part of a greater whole. The importance of the foster carers family networks to the foster children has been highlighted in this study and, if more fully recognised by social care staff, might lead foster agencies to extend some of their training to wider family members. The feelings of the foster children with regard to their connection to the immediate community would suggest the need for more emphasis to be placed on children taking part in local activities and groups. Spending time with other children was highly valued and keeping in contact with peers through internet-sites may also be a resource that could be developed and encouraged by carers, rather than being viewed with suspicion by some adults (Bingham *et al.* 2001).

More recognition is needed of the importance to successful fostering of food, of sitting together to partake of family meals and as a vehicle for communication. The young people valued food not just as sustenance for life but something to be enjoyed and shared. The adaption of menus to the 'food personae' (Brannen *et al.* 1994) of the children was a symbolic gesture which allowed the young people to feel cared about and also encouraged some reciprocity. A more nuanced grasp of food should be placed on the training agenda of service providers.

Emotional warmth and physical touch were highly valued by children who had often had little positive warmth previously in their lives. Rather than being touch-averse as part of a risk minimisation strategy, touch could be placed back on the agenda and highlighted as an important tool in the repertoire of skills held by carers. Some placements seemed to be gender specific and the 'gender fit' of a family should be considered when the initial explorations for a prospective placement are being made.

Birth children were often in the process of developing their own cultural histories and caring had started early in their life experiences. The birth children had their own roles and tasks within fostering and were a vital part of the family 'business'. They had become 'experts' in assisting and mediating with foster children. Birth children however seemed to be given relatively little consideration in terms of planning, liaison, training or support. The focus typically remains on the foster child, sometimes at the expense of the birth child. More support is needed for birth children, possibly via virtual communities where birth children can share, learn from and support each other. Not only are they valuable participants and contributors to fostering arrangements, but evidence suggests that some of these young people may also become the foster carers of tomorrow (Twigg and Swan 2007).

Young people who are looked after will be more likely to have attachment or other behavioural difficulties and should be provided with easy access to therapists and community mental health services as a matter of course. This should assist in children's capacity to settle into the foster home, by helping to increase their coping mechanisms. Services should be accessible either in the foster home or via a child friendly drop in centre.

Lastly, the importance of resilience has been highlighted in this study. Self-esteem is an aspect of resilience and developed through a range of activities and also through taking care of one's personal appearance. Whilst seemingly obvious this could be more actively encouraged by carers. Foster children should be encouraged to access a range of extra curricular activities. Resources and payment for these activities should be made available to foster children. This area could be given greater prominence within the fostering role, rather than being seen more the job of a mentor, youth worker or voluntary project. Many parents in the general population spend a substantial amount on supporting their children to undertake evening, weekend and holiday activities and looked after children should also have access to these 'ordinary' opportunities. The modelling by foster carers of their willingness to try out new activities and jointly undertake new interests and hobbies (Gilligan 2007) should also be encouraged as a means by which fostered children can learn to engage with the wider community.

Limitations of the study

This study is a small sample case study and does not seek to be generalisable or representative. The carers and children are however 'representative of themselves and worthy of study in their own right' (Thomas 2000: 200). The study was only able to gather and observe what the participants chose to share with the researcher. The study purposefully did not interview social workers, as it wanted to focus exclusively and in-depth on the views and perceptions of the carers and children - the main stakeholders. The study also targeted 'successful' foster care only. Had the study been larger, it would have been useful to compare these families with less successful fostering contexts. Despite this being a study of 'successful' fostering, one family, Family Five, was struggling with the current placement and this allowed for some useful contrast and comparison. A larger study however may have given more insight and revealed more of these processes. There were areas of interest that counter-intuitively did not surface in the interview or diaries. For example, issues of ethnicity were not brought up by any of the carers or the young people. The nature of the relationship with birth parents was rarely invoked by young people, and was not readily forthcoming in interviews or diaries. Education and related themes were rarely highlighted within the data. While all of these areas would have been interesting to delve into, it was a principle of the research to allow respondents to filter areas of sensitivity or relevance, rather than allow the research methods to become overly interrogative. As Thomas notes (2000:102) when researching with children 'it may be necessary to make space for children's own ideas about what is relevant, interesting or important'.

New research themes

Further studies into the 'gender fit' of children into different families would be illuminating and may help improve matching. More research into the use of computers and internet communication for children involved in fostering would be beneficial, particularly a pilot study to look at the impact of this technology upon both foster children and birth children at a local, national and international level. A comparative study of resilience, potentially with a control group of those not involved in extra curricular activities and placed with less active carers would allow for a more robust analysis of the benefits of such involvement. Additionally, studies that examine the

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central role of birth children in facilitating fostering would both increase the knowledge base in this area and help ensure that they are recognised for the pivotal part they play in the care experience.

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APPENDICES

Appendix One Outline/prompts for in-depth interview with carers

Introduction covering areas of confidentiality. Warm up- pick up on answers from postal questionnaire.

How did you come to start foster caring?

With regard to the foster children who are living with you now are they placed with you on a short-term /long-term basis or don't you know at this point?

Has the basis on which they came to you changed since they have been with you?

What do you like best about being a foster carer?

Can you describe the kinds of support you access?

How important are friends and /or family in offering you support with regard to your role as a foster carer?

Are there other forms of community support/local organisations/clubs that are helpful in helping to sustain the placement (for example local youth club, community centre, church)?

How much support do you get from the children's social worker and other professionals for example health or education where there may be special needs?

Is religion an important part in your life?

Are there other important values/ philosophies that impact up on your role as a carer?

What are the aspects of fostering that give you most pleasure?

What do you think helps children settle most into your home?

What are the most difficult things for you about fostering?

Do you ever find the foster children's behaviour difficult to manage?

From the attached list of children's challenging behaviour which do you find most difficult to manage?

How have you managed those types of behaviour in the past?

Can you give me a recent example of when you dealt with these types of behaviour?

Who or what helps you most to cope with this behaviour?

What has been the impact of birth parents of the current foster children on the placement?

Has this always been your experience, or has it been different with previous placements?

If negative any positives?

How do the children placed with you compare with your own children? If negative which aspect is more positive? Vice versa

What do you think the advantages are for your own children of having foster children living with you?

What do you think are the drawbacks for your children of having foster children living with you?

How do you manage disagreements within your family?

Do you think that it is necessary to involve children in your family decision making?

How do you try and involve them?

Are there differences in the way you solve problems or issues with your own children to the way you solve issues with foster children?

Do you see yourself as having many rules in the family household?

What are the most important rules for you?

What sanctions do you use when rules are broken or if a child behaves badly? Can you give some recent examples?

How does your family manage to incorporate foster children into the home?

What strategies do you employ?

Does this become easier or harder (over your career as a foster carer)?

How do you know when the foster child is having difficulties? What do they do? Who does the foster child/ren talk to inside or outside of the family when they have difficulties?

In your experience do you feel that it is necessary to like a child to be a good foster parent to them? Probe- do you love the foster children placed with you?

How do you view childhood?

Should children have more or less rights in society and within the family?

How do you see your future as a foster carer?

Have you ever thought about giving up foster care?

What are the most important qualities for a foster carer to have?

Are there things that could make life as a foster carer any easier?

What are the things that would make life as a foster child easier?

Are there any other things that you would like to tell me about your experiences of fostering?

Discuss arrangements for taped diaries, next visit. Re-iterate issues of confidentiality.

Behaviour	Please tick up to a maximum of 3 behaviours that you find most challenging
Damages own property	
Damages others property	
Damages home	
Damages elsewhere	
Physical aggression to carers	
Physical aggression to people outside the home	
Verbally abusive	
Injures self deliberately	
Temper tantrums	
Non-compliant	
Misuse of substances	
Absconds form home	
Absconds from school/work	
Lies	
Steals from others in home	
Steals outside of home	
Bullies others	
Incites others	
Exposes self sexually or sexually provocative	
Makes inappropriate sexual approaches	
Promiscuous	
Deliberately ignores instructions or rules	
Confrontational	
Makes false allegations	
Urinate inappropriately	
Smears faeces	
Begs or demands money	
Demanding or seeking attention	
Withdrawn or isolates self from others	
Repetitive or stereotypic behaviour	
Obsessive or ritualistic behaviour	
Overly noisy	
Causes disturbance at night	
Makes threats against others	
Moody or has drastic mood swings	
Stubborn or defiant	
Hyperactive or restless	
Wanders away if unsupervised	
Tells stories/ fantasises	
Overly nervous/anxious	
Sets fires	
Wets bed	
Incontinent	
Inappropriate eating	
Threatens suicide	
Manipulative/uses threats with menace	
Won't talk/communicate or sulks	



Appendix Two

Aide-memoir for Semi- Structured interview with carers' birth children

Name

Age

Discussion about confidentiality

Warm up, discuss their interests, hobbies, school.

How long have you been fostering as a family?

How many children have you fostered so far?

What are the good things about being a foster brother/sister?

Are there any bad things about being a foster brother/sister?

How much choice do you have about whether a child comes in to your home?

Does anyone come to talk to you from the social work agency when a new foster child might be coming to live here?

Have you ever said no to a child who is about to be placed with you?

Are there circumstances when you might say no to a new foster child coming to live with you?

Do your parents always discuss things with you?

How do things get discussed in your family?

How is your relationship with your foster brother/sister different to that of your relationship with your own brother/ sister?

What would make fostering better for you?

Have you ever attended any groups for young people who foster? Were these for training/support?

Do you still keep in contact with any foster children that have moved away?

How do the foster children placed with you fit in to the family?

How do you and your family help them to fit in?

What is your role within this?

Do foster children go on holiday with you?

Do you manage to do any activities as a whole family? Details of activities/time spent.

If there are disagreements how does your family try and sort them out?

Please can you draw a map/ diagram of those people closest to you? Show examples of eco maps and drawings

Any other things that you would like to add about being a foster family?

Discussion and arrangements about audio diaries, written or email.

Re-iterate issues of confidentiality.



Appendix Three

Aide-memoir for semi- structured interviews with children in a foster placement

Name:

Age:

Introduction discussion about confidentiality/warm up

What is the most important thing I should know about you?

What things are you good at?

Who do you most like to spend time with?

What kinds of things do you like to do together?

Can you tell me about a time you had fun together?

How long have you been with your current foster carers?

What are the most significant events that have happened since you came here? Use milestone diagram.

Can you describe your average day in the week (ask about school activities ; about which is their favourite food and how often they have it)? And their average day at the weekend?

Have you been in any other foster placements? Develop- what were they like?

How much choice did you feel that you had about whether to come to this placement?

Who discussed this with you?

Did you meet the carers before moving in? How many times did you visit?

Did you meet the carers' children before you moved in? How many times? Details.

What are the special things about this family?

What kind of family are they? Can you describe them in four words?

Can you tell me about a time when they were like that-fun, noisy etc?

What are the three good things about this placement?

What types of rules do the family have?

Which rule is the hardest to keep and can you think of a time that you broke it?

How do arguments get sorted out here?

Who do you talk to if you are worried about things?

Is there anything that you like to change about this placement?

How do you get on with the other children here?

Where in the house do like to spend most time?

Do you have your own room?

What is your room like? Ask about choices they made about the things in their room...

Have you changed school since being at this foster home?

Do you like the school you are in now?

Who do you talk to if you are worried about things?

How do you think things might be improved for children in foster care?

Is there anything else you would like to tell me about being in foster care?

If you were to give advice to another child coming to this placement what would you tell them?

Do you see any of your own birth family?

If yes, where do you see them?

What do you do together?

If you could have three wishes what would they be?

- 1.
- 2.
- 3.

Discussion and arrangements about audio diaries, written or email.

Please can you draw me a map of the people closest to you- show examples of eco maps, and drawings to give some ideas.

Re-iterate issues of confidentiality

Appendix Four

Rules at Josie and Philip's

Includes a photo of them eating



Also includes photos of their pets

A few things that might be of interest to you about us and our home :

Let Josie know the food you like to eat she's a good cook.

Feel hungry-help yourself to the food just let Josie know if you have used the last of anything so she can replace it next time she goes shopping

The bathroom, shower room are downstairs please wear your dressing gown when going to and from the bedroom to those rooms we don't want to frighten the cat. No worries flushing the loo in the night.

Let Josie or Philip know if you are going out, who with and what time you'll be back. We're not nosy just interested, and could offer to taxi you about if required.

If you are old enough to smoke- and want to light up, no worries, you can smoke outside in the garden. But not if there is young children about. Thanks (cig butts in the bin please). We don't smoke cigarettes in the house. **If you fancy trying to give up just say there are ways we can do it together.**

Please do not give out our home address or phone number to any person or company unless Josie or Phil say you can.

If you switch things on remember to switch off after use (saves electric)

It would be a great help if you could keep your bedroom tidy.

If you have a dislike or just want to moan about something tell Josie or Phil we are great listeners and may have an answer or suggestion for you.

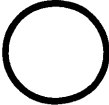
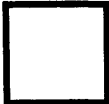
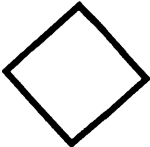
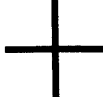
It's a happy, busy house-you will be welcome and safe with us.

We are here to help in any way we can. Just let us know.....

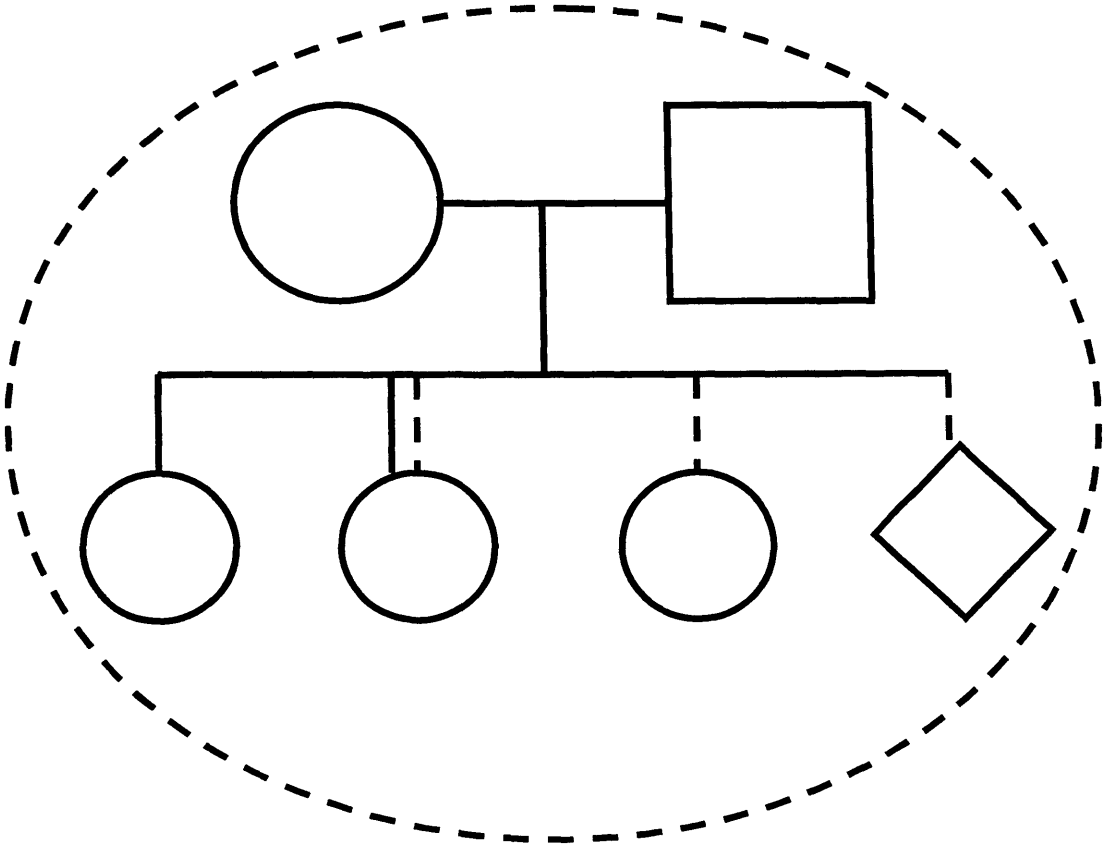
Local Useful Information...

Appendix Five Symbols

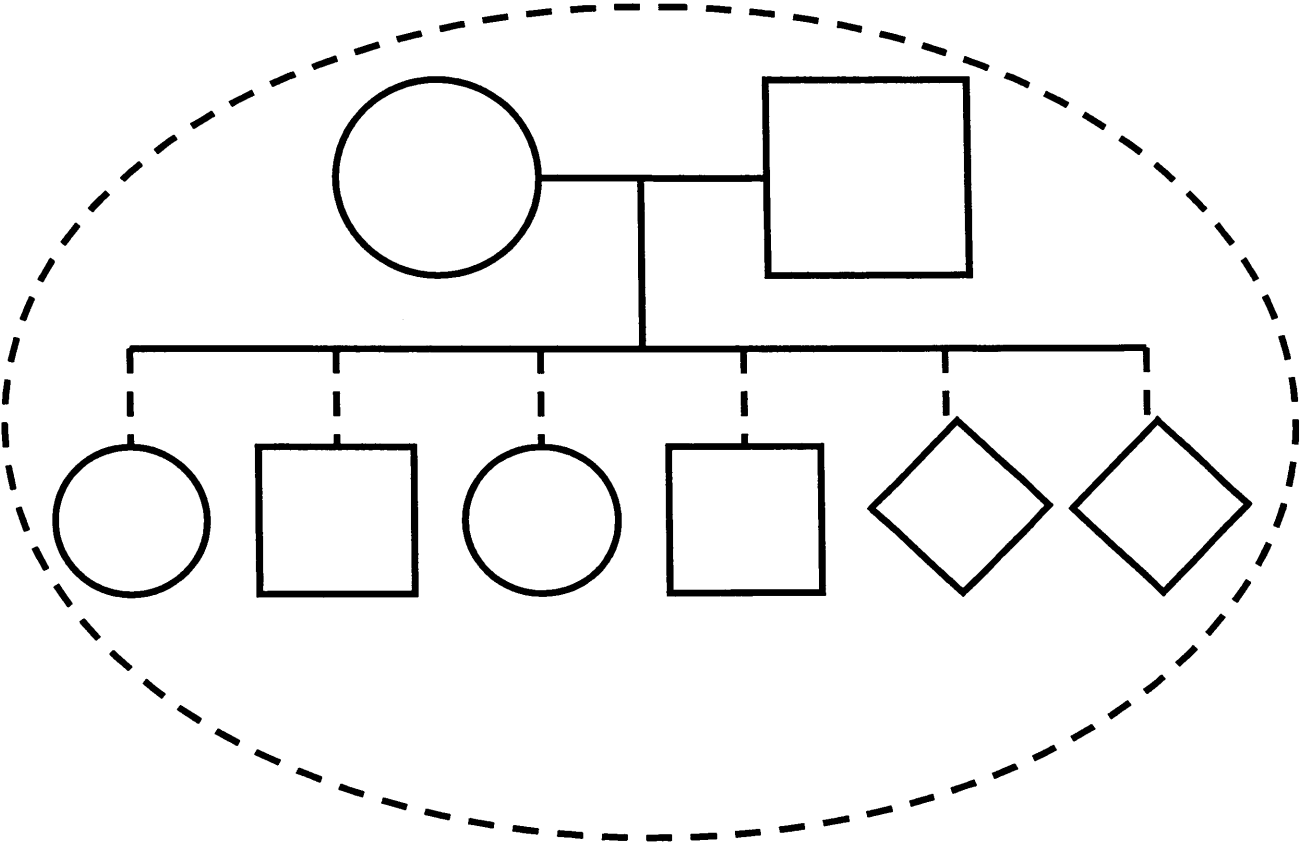
The dotted line around the diagrams delineates those living in the same household

	Female
	Male
	Pets
	Permanent
	Transitory
	Adoption
	Divorce
	Death

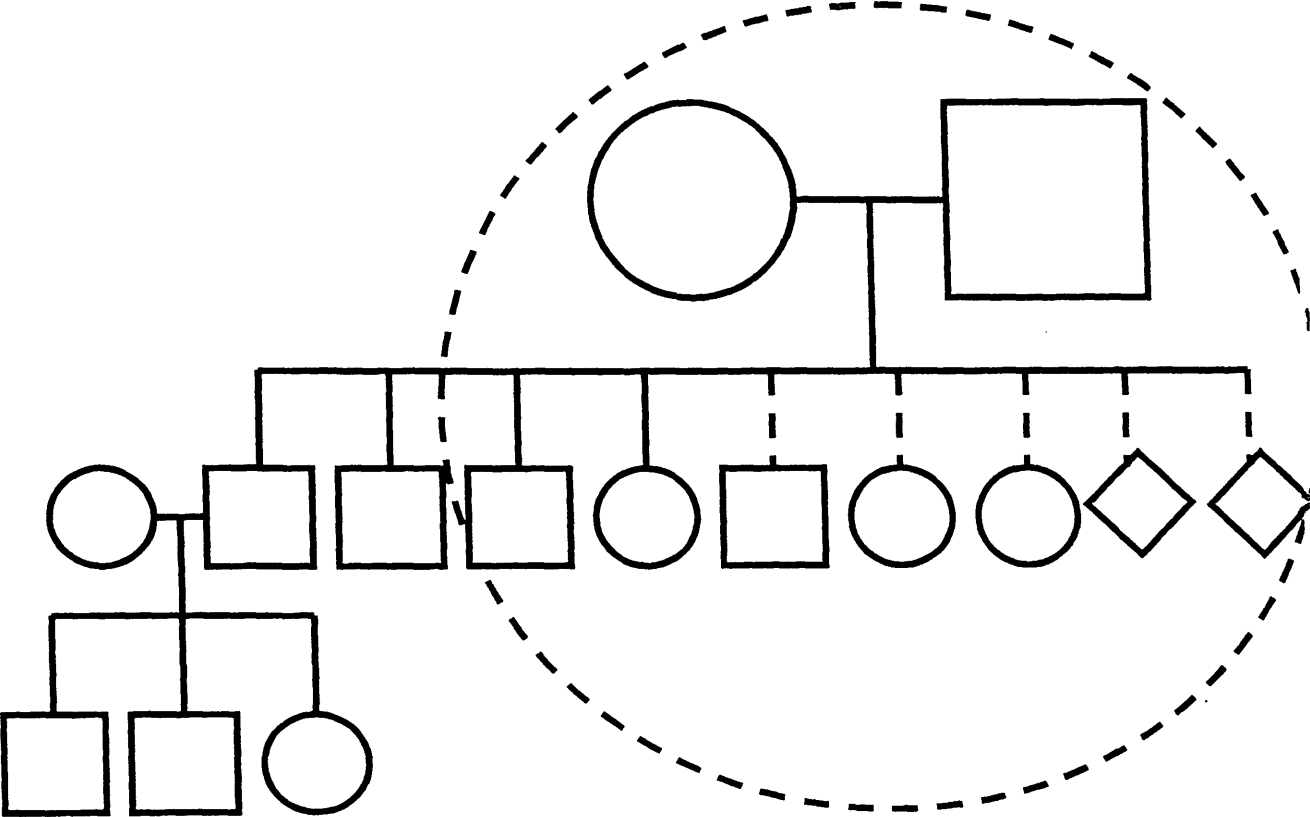
Family One



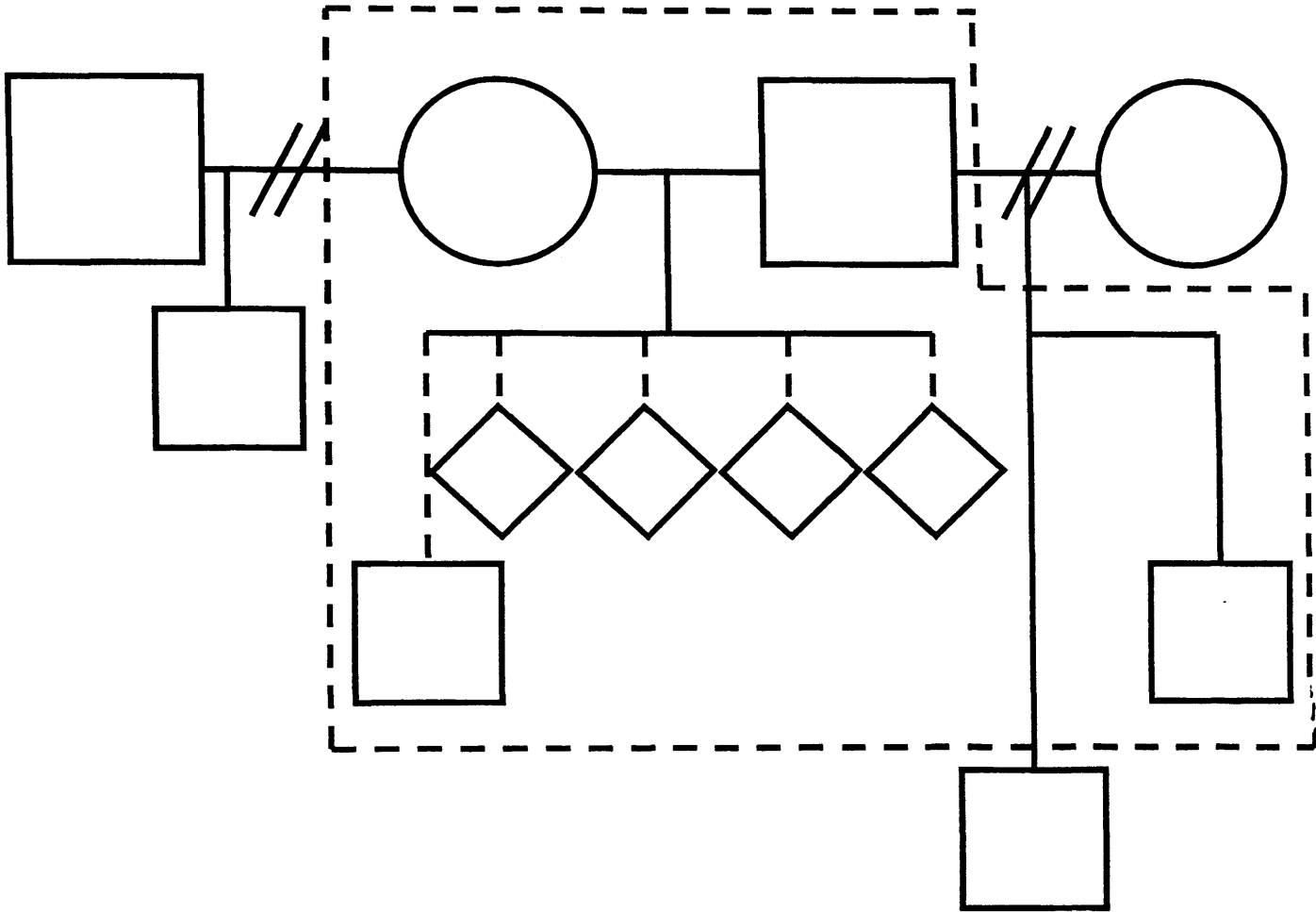
**Family
Two**



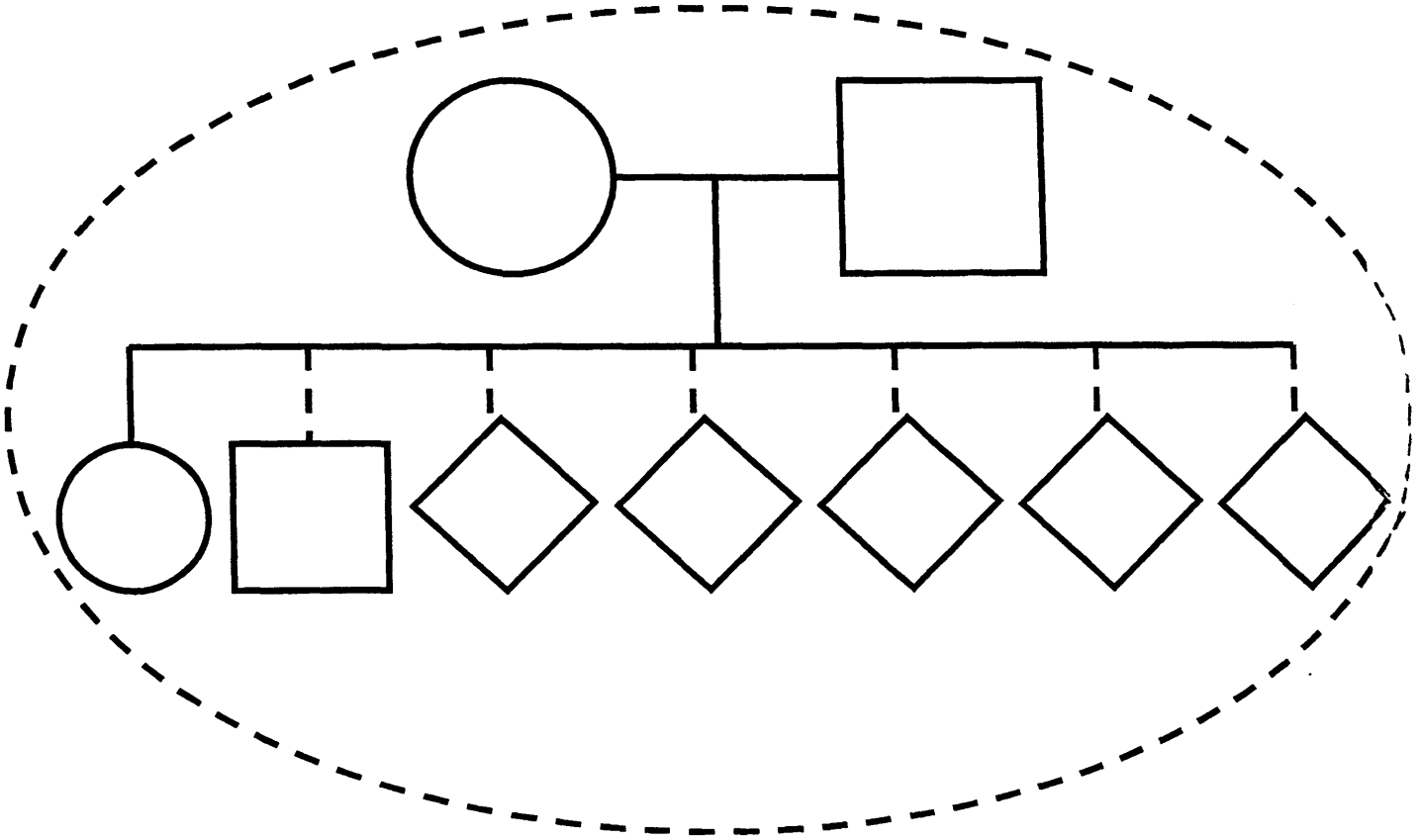
Family
Three



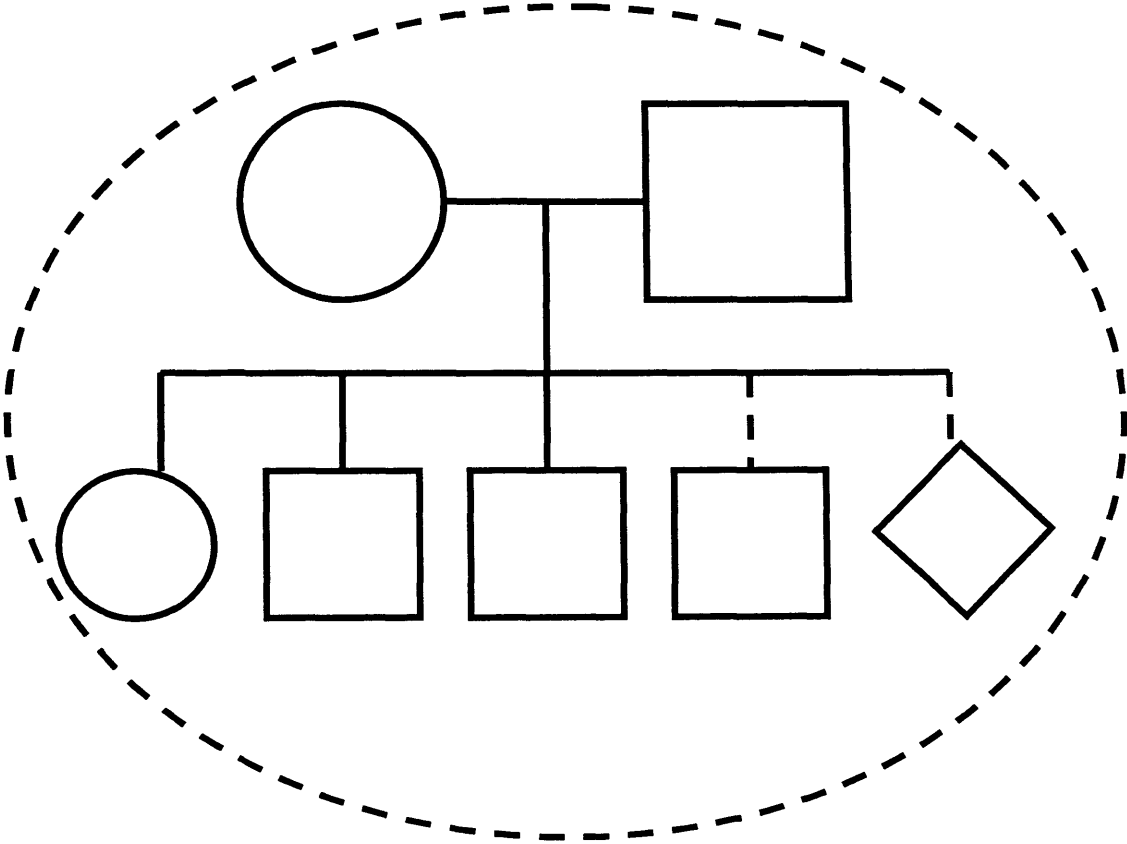
Family
Four



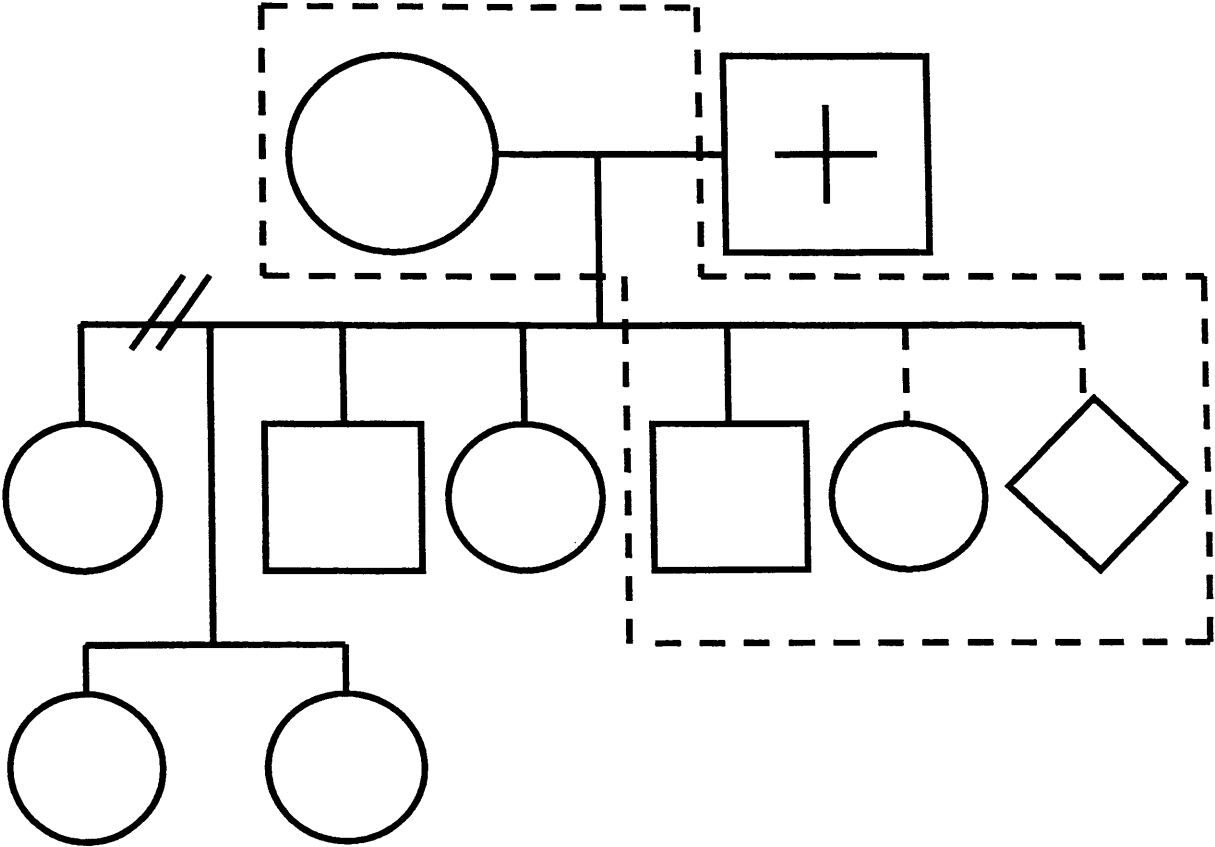
Family
Five



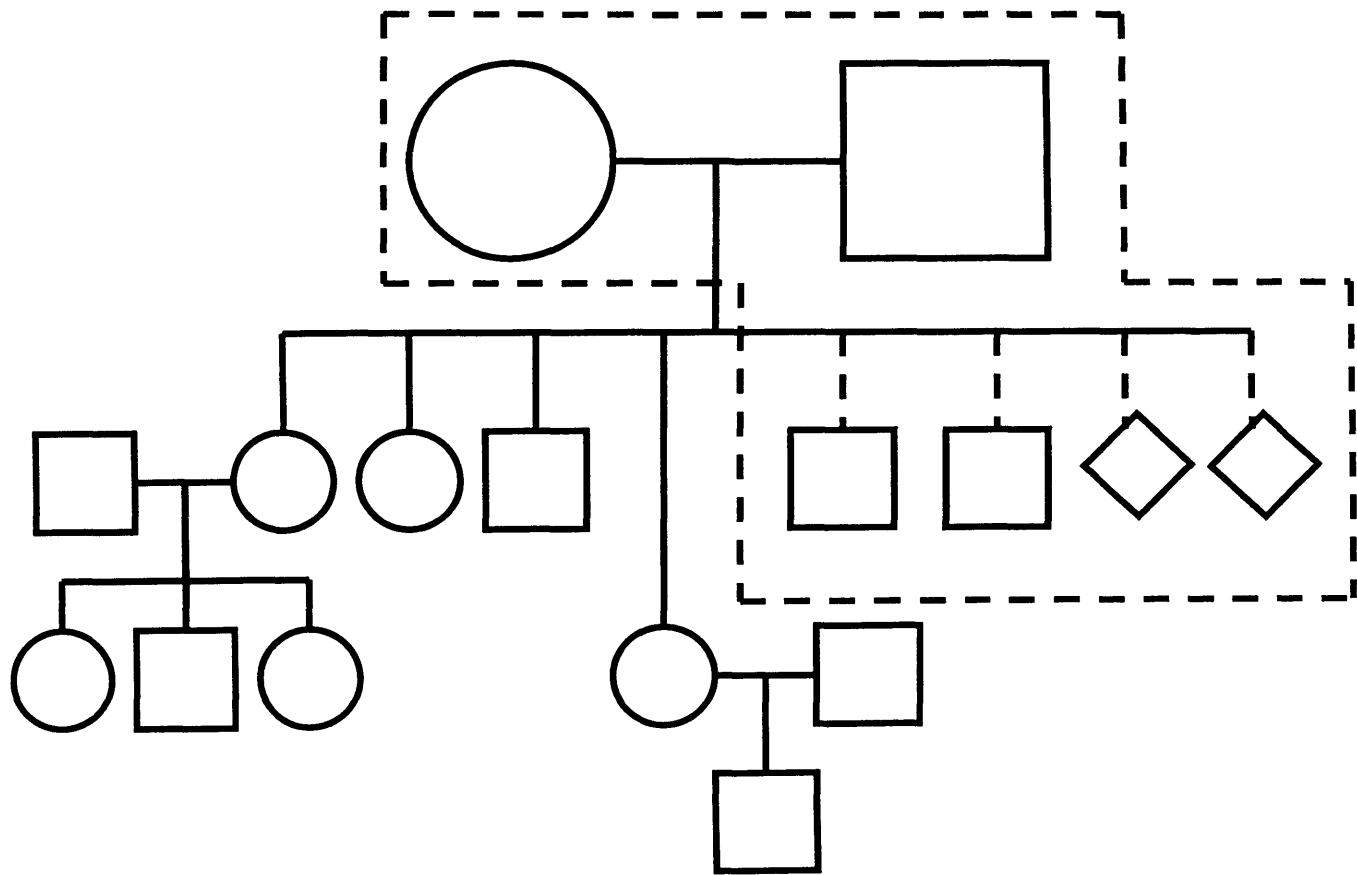
Family
Six



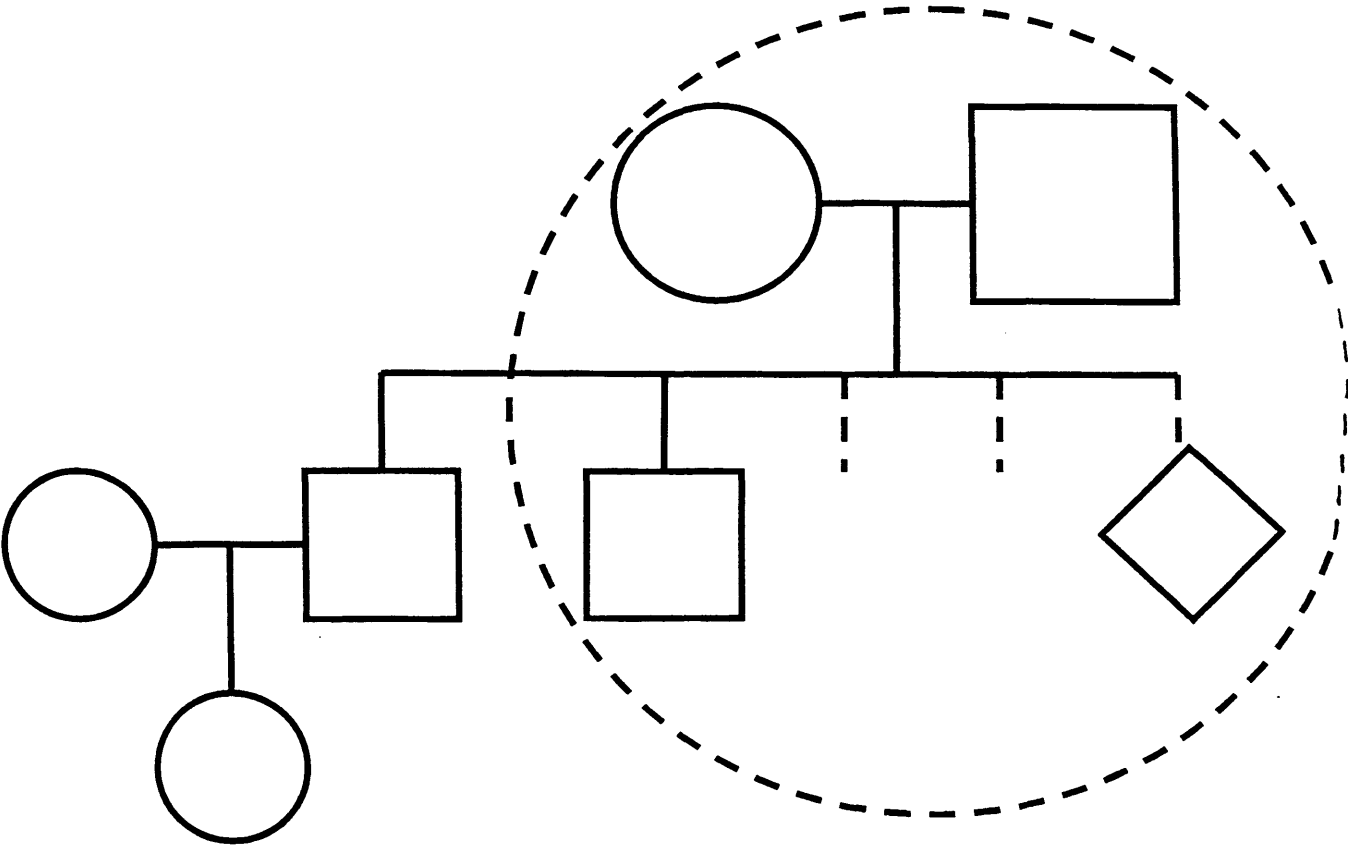
Family
Seven



Family
Eight



**Family
Nine**



Family
Ten

