

Biography

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Children's perspectives of different care settings: Foster care, adoption and kinship care

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*"I would like to remind you of one of the greatest difficulties that we experience in the placement of a child-namely our problems about seeing things through his eyes, and adequately understanding and being sensitive to the real meaning of what he is trying to tell us through his verbal and non-verbal behaviour. We can never effectively help a child unless we can understand his reactions to his past and his fears for this future."¹
(Littner, 1956)*

Introduction

In NSW there are proposed reforms to child protection legislation² that involve a wide range of new initiatives. This literature review is written in part as a response to these proposed changes, in particular to those changes that seek permanency for children in care. It comments on studies which present children's perspectives of living in three types of care settings; foster care (short or long-term), adoptive families, and kinship care. It then highlights broad and common themes evident in all three care settings structures. The policy implications of considering these views and attempting to improve children's experiences of entering and living in care are briefly discussed throughout the paper.

¹ Littner, 1956

² Refer to the discussion paper for a comprehensive overview of the proposed changes:
www.community.nsw.gov.au/docs/wr/assets/main/lib100047/cp_reforms_discussion_paper.pdf

It is important to note the paucity of literature on the perspectives of children and young people currently in care³ on adoption and foster care, including their experiences of the transition into foster care (Folman, 1998; Ryan & Nalavany, 2004; Mitchell & Kuczynski, 2010). This is also true for children's perspectives on living in kinship care (Messing, 2006), especially informal kin arrangements (Selwyn et al., 2010). There are almost no studies on the perspectives of specific sub-groups of children such as Aboriginal and Torres Strait islander children in either foster or kinship care (Higgins et al., 2006) or children in foster care receiving special education services (Quest et al., 2012).

A more sizeable number of studies report the retrospective views of children previously in care (Feeney et al., 2007). Some studies use a mixed sample of children and/or young people currently and previously in care (Gardner 2004; Tilbury et al., 2009). Where this is the case, the evidence shows that the views of children and/or young people currently in care correlate with the retrospective views of children and/or young people who were formerly in care.

In the last decade we have seen a marked increase in the number of studies that emphasise hearing the voice of the child in care (Gardner, 2004). This increase is welcomed, and helps us distinguish between the perceptions of children and those of adult carers (birth/ foster/ kin/ adoptive parents) and professionals (Ryan & Nalavany, 2004).

Limitations of the review

Research on children in care is more developed in the United Kingdom (UK) than in Australia and there is less research on care settings in the United States (USA). Hence, a large proportion of the literature reviewed here is based on international studies from the UK, some from the USA and the rest from Australian research. This review has relied heavily on literature post-2000 and is not a comprehensive review of all studies on children's perspectives, which may have changed over time and under different child protection policies and systems.

The literature discussed here is unlikely to present a representative sample of the voices of children in care. In sourcing the voices of children in care, it can be difficult to access those who are most troubled, have experienced several placement changes, and/or are not engaged in open communication with supportive carers. Similarly, in studies with children who have been adopted, it is the carers who engage in open communication with their adoptee(s) that are most accessible, comfortable and willing to be involved in research about children's care settings. They are also the carers more likely to support the children in their care to participate.

Foster care

After reviewing a number of studies, Gardner (2004) and Selwyn (2010) both found that the majority of fostered young people who had participated in these studies were happy with their care arrangements. Gardner (2004) concludes that this is particularly the case for younger children and those children who have been in their foster families for more than a year. Selwyn et al. (2010) tell us that this is more the case for children

³ Hereafter, 'children' will be used to refer to children and young people.

who have not changed carers. It seems that as duration and stability in care increases, children are more satisfied with their care arrangements.

The UK-based longitudinal study conducted by Selwyn et al. (2010) found that all participants experienced difficulties in peer relations. The study showed that, although 52 per cent of the child participants living in foster care said they were happy with school, many said making friends was “difficult” or “scary”, and 15 per cent (n= 54) said they were bullied about their family circumstances. Experiences like these occur frequently as children are often involved in several foster placements. The child must then manage a number of ‘adjustments’ to a new school environment, new carers, new foster siblings and, most importantly, new friends (Quest et al., 2012). Changes such as these, and the uncertainty of when a placement might end, impact the sustainability of children’s friendships. Concurrent planning involves placing a child or young person with foster carers who are also approved adoptive parents. These research findings support the introduction of concurrent planning into NSW child protection legislation to reduce the occurrence of multiple placements. Concurrent planning could potentially reduce the frequency with which children are required to abandon peers with whom they have built relationships. It is reasonable to assume that this in turn may help reduce the number of difficult experiences at school that result from their care circumstances.

Children’s views on the significance of placement stability are related to the desire of children to find a permanent care arrangement. However, the probability, frequency and opportunities for children to exit foster care to permanent arrangements (adoption, guardianship, and reunification) rely on individual demographics, clinical needs in terms of disability or mental health, and connection characteristics such as kin placements, siblings placements, how stable their placements have been and the number of times they have run away from a placement (Akin, 2011). These findings indicate the need for improved practices around contact with birth family members and stable placements because they are intrinsic to permanency outcomes (Akin, 2011, p.1010). There is evidence for an increased focus on early and objective permanency planning with children who are removed from their birth parents to reduce the reliance on care history as a permanency planning variable.

Children in care express feelings of difference from other young people and being frustrated by this difference (Tilbury et al., 2009, p.484). They “...indicate that despite a strong sense of identification with their foster families, they remain aware of structural differences between their “family” and intact families... This qualification appears to become articulated more fully after children leave foster care.” (Gardner, 2004, p.173). A 2011 survey found that more than a third of foster care children in Queensland were bullied because of their care circumstances (33.6%) (CCYP and Child Guardian, 2012, p.9). The connection to family who is seen by children as the ‘same’, is a key element in the development of their identity.

Family connection is of particular importance for Aboriginal and Torres Strait Islander children, who emphasise that remaining connected, not only to family but to the local community and their culture, helps them develop their Indigenous identity (Higgins et al., 2006, p.43). Aboriginal and Torres Strait Islander children emphasised reunification and re-connection with ‘people and place’ as critical. Sibling ties were also very strong as a result of the compelling feelings of responsibility towards

family. Aboriginal children tell us they need more carers from within their own communities to enable these bonds to endure into the future (Higgins et al., 2006, p.48). Processes for maintaining children's connection with birth families and communities should be embedded in changes that encourage increased permanency for children in care.

Relationships for children in care are complex and linked to a number of long-term wellbeing outcomes. For example, young people tell us that the "...absence of consistent, caring relationships" (Baidawi & Mendes, 2010, p.28) is one of the systemic factors that contribute to problematic substance abuse. Elsewhere it has been reported that relationships with supportive people assist children in achieving educational and work goals (Tilbury et al., 2009). Young people in care receiving special education services say that a consistent and committed adult provides them with the support, guidance and opportunity for reflection needed to make decisions about their future (Quest et al., 2006, p.1615). Children's views on the need for caring adults to avoid lifelong difficulty are strongly supported by the literature (Freundlich et al., 2006, p.743).

Children in care who have supportive adults in their lives have adequate access to information about their care circumstances. However, many young people in foster care do not know why they are in care and subsequently feel a lack of control over their lives (Quest et al., 2012). A 2011 survey of children in care in Queensland showed that over thirty per cent (31%) of children in care 'never' or 'not very often' have a say in decisions about their life, and almost one third do not usually have decisions explained to them. However, conversations with children are part of children discovering and negotiating "...who they are and their place in the world" (Fitzgerald & Graham, 2011, p.498). Children who are stressed about having inadequate information about their care may suffer from 'relationship ambiguity' at the point of transition. Mitchell and Kuczynski (2010, p.443) conclude that if children are aware of the support they will be provided in care, the negative effects of entering care can be mitigated.

Adoption

Adoption comes with mixed feelings for children: "...adoption can be a scary, sad and happy experience" (child quoted in Morgan, 2006, p.37). Morgan (2006) reports that many adopted children in the UK see the best thing about being adopted as joining a new family and being picked by their adoptive parents. They state the three worst things are: leaving their old family, that the adoption took too long with too much waiting and, lastly, "not knowing enough about the family" (p.8). Survey responses from 208 children aged between 6 and 22 years of age were concerned about the information they received about their adoptive family and how they participated in the process of adoption. They wanted to be involved, supported, and contribute to the final decision. The benefits of children's participation in decisions that affect their lives are clearly articulated in legislation and extensively supported in the literature (Fitzgerald & Graham, 2011; Lansdown, 1995; Alderson & Montgomery, 1996; Schofield & Thoburn, 1997). Evidence of this kind suggests that due diligence should be afforded to encourage children to engage in adoption processes. This means commitment to providing the child with all the information they need to make an informed decision, allowing them the time to think about their choice and providing

them with adult support to make the decision. This child-centred practice should underlie adoption processes that are conducted in a timely manner.

Once adopted, and despite strong connections with their adoptive parents, children speak about a lack of contact with their birth family as the most unpleasant aspect of their adoption. In the study by Morgan (2006, p.31), 85 per cent of adopted children said that it is “very important” or “fairly important” to be given news about their birth families. In a study of 288 adoptive families, Raynor (1980, quoted in Watkins & Fisher, 1993) found that “...fewer than 40 per cent of the adoptive parents have given the adoptees all the information they had. In another study, more than 25 per cent admitted having falsified or omitted information, even to their adult children” (Watkins & Fisher, 1993 p.3). Folman (1998) concludes that a lack of information to the child is a risk factor for poor adoption outcomes.

Nonetheless, adopted children also want increased attention from their adoptive parents, especially their adoptive father (Ryan, 2004). The need for this increased attention and information on both birth and adoptive parents corresponds with research around the developmental nature of understanding that children go through in relation to their care circumstances (Watkins & Fisher, 1993; Sherrill & Pinderhughes, 1999). This process of ‘differentiation’ means that children gradually learn over time the nature of their adoptive family relationship. This knowledge is really only established from early to middle adolescence. In order to meet the child’s gradual development of understanding about their family story, the child needs to have details of their adoption repeated “ad infinitum”, and for carers “...to talk with him across developmental stages throughout childhood”, about their care circumstances (Watkins & Fisher, 1993, p.4).

The research literature tells us that the ongoing provision of information, and conversations and discussions with children about their birth families and their adoption, are essential elements of their positive integration into the adoptive family. The proposed child protection legislation reforms within NSW should ensure a spirit of partnership, where children are involved in decisions that impact their lives, including the appropriate provision of information about their birth families and their adoptive family. To ensure that all adoptive parents know how to provide this information, appropriate training on the sharing of knowledge about family relationships with their adopted children is recommended.

In the same way that children in foster care experienced difficulties with their peers over their care arrangement, Morgan (2006) found similar percentages of adopted children (13%, n=208) were bullied or teased about their family circumstances. While, on the whole, adopted children felt they were quite happy in their adoptive families, 94 per cent said they were concerned about the ramifications regarding treatment by others outside the family, mainly their peers at school (Morgan, 2006). This is similar to findings on the peer relations of foster children discussed earlier. Adopted children also mirrored comments made by children in foster care, communicating a desire for their social worker not to change, to not be separated from their siblings, and wanting only one foster placement before their adoption.

Children suggest that meeting up with other adopted children mitigated some of their anxiety about being the only person in a care situation. They said it gave them a way of comparing their family circumstances to that of other children (Morgan, 2006). Ryan (2004) discusses adoption support groups guided by adopted children. The UK Office of the Children's Rights Director provides each adopted child with a written guide about adoption. Three quarters of children surveyed said this document gave them all or most of the information they had wanted (Morgan, 2006). Some of these suggestions may be pertinent to the proposed child protection reforms in NSW and taken up as implementation strategies during the transition to new policies.

Kinship care/Guardianship

Kinship care involves a relative or a person who is emotionally close to the child (kith) taking responsibility for raising the child. This can be a formal or informal arrangement. The nature of the kin relation means there is a high level of carer commitment and, as Farmer et al. (2013) found, can contribute to kinship placements lasting longer than unrelated foster care. Kinship care placements also last longer due to foster care involving planned moves from one carer to another (for example from short-term to long-term foster carers) based on changes in the family or court orders. This is surprising, as formal kin carers are usually more disadvantaged than unrelated foster carers, both financially and in terms of carer health (Farmer et al., 2013).

Messing (2006) describes some distinct differences to foster care and adoption for children in kinship care. Firstly, despite being cared for by family, children in kinship care seek to be legally tied to their carer(s), not just through love and the kin relation that initiated the care. They express their wish to "sign papers" to make the placement official and permanent. Messing (2006, p.1432) concludes that "... the option of legal guardianship is a viable one from the child's standpoint and, in fact, seems to lessen confusion about their place in the family." Therefore, the literature supports the proposed reforms introducing long-term guardianship orders for children living in kinship care and should be considered for these children on a regular basis.

Secondly, in focus groups conducted with 40 children living in kinship care, most reported feeling "good", "happy" or "okay" with their living situation (Messing, 2006, p.1427) and feeling comfortable talking about their living arrangements with others. However, children in kinship care still report feeling markedly different from peers who live with their parents (Aldgate, 2009, p.62). In another study, 36 per cent report receiving hurtful remarks because relatives were raising them (Farmer et al., 2013, p.28). The mixed literature indicates that there may be less stigmatisation associated with kinship care than other types of care, but is still of concern to some children.

Children verbalised their desire to care for the family members with whom they lived (Freundlich et al., 2006) and others described how they could often spend a great deal of time caring for their kin if they are elderly (Farmer et al., 2013, p.32; Messing, 2006, p.1432). There is an increasing use of kinship care within NSW, especially of grandparents becoming carers. These findings indicate that there are risks to children becoming young carers because of their care arrangements. The process of conferring long-term guardianship orders should consider this risk and put resources in place to mitigate children becoming young carers.

Conclusion

The literature reviewed here suggests that children's concerns regarding their wellbeing differ slightly based on their care setting. Children in foster care are mainly concerned about managing peer relations, placement stability, remaining connected with their birth families, having an adequate level of information about their birth families and foster situation, and having supportive adults in their life. Adopted children are mainly concerned about remaining connected with their birth families, their adoption being processed in a short timeframe, and being provided with information when it is required and on an ongoing basis. They are also concerned about managing peer relations. Children in kinship care are mainly concerned about making their care arrangement permanent, managing peer relations and the health and wellbeing of their carers.

However, there are five broad and common themes that are apparent across each of these care settings. They include: the stigma involved with being in care; the pivotal role of relationships with key adults in their life; maintaining contact with birth families as a strategy for developing a sense of identity; the importance of information provision throughout the care experience, but particularly at the point of transition; and working towards a permanent care arrangement that provides a stable environment, supportive individuals, a commitment to continuity, a sense of belonging and social/legal status.

The literature supports a move to permanency planning. However, in implementing any policy reforms it is important to draw on research that presents children's perspectives on these five main concerns of the care and transition process that have the greatest impact on their wellbeing. There is dire need for research on children's perspectives in NSW and Australia as part of any reform process, given the dearth of research in this country and globally within the last five years.

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