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What can agencies do to increase foster carer satisfaction?

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Keywords: foster care, foster carers, satisfaction, retention, education and training

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INTRODUCTION

In Australia, there are currently over 46,000 children in out of home care, with 39% of these (over 18,000) being cared for in foster care households (Australian Institute of Health and Welfare, 2017). The number of children requiring out-of-home care in Australia continues to increase, rising 17% between 2012-2016 (Australian Institute of Health and Welfare, 2017). The increasing demand for foster care is not limited to Australia, with recent figures indicating upward trends in numerous countries including the United States (Department of Health and Human Services, 2015) and England (Department for Education, 2014). However, in Australia there is evidence that the number of individuals willing to be a foster carer has decreased (McHugh & Pell, 2013). As a result, the challenge of finding enough foster carers has been stated as a high priority Australia wide (Council of Australian Governments, 2009).

Children placed in foster care have commonly been the victims of abuse or neglect (Australian Institute of Health and Welfare, 2017). Exposure to these risk factors makes foster children more likely to experience physical, mental and emotional health problems, as well as social and developmental difficulties when compared to other children (Leslie *et al.*, 2005; Stanley *et al.*, 2005; Zlotnick *et al.*, 2012). These risks can be minimized if children are placed in nurturing and stable environments that enable them to build resilience and improve their social and developmental outcomes (Harden, 2004).

Repeated studies have shown that placement stability, which necessarily requires foster carers to continue in the role for as long as the child needs a home, is an important factor in optimizing outcomes for foster children (Andersson, 2009; Egelund & Vitus, 2009; Rubin *et al.*, 2007). Children in stable placements are likely to require fewer mental health services (Rubin *et al.*, 2004), have less severe behavioral problems (James, 2004), better educational outcomes (Aldgate *et al.*, 1992) and improved psychosocial development (Harden, 2004). Retaining foster carers also offers benefits for the foster care agency because it reduces costs associated with marketing and recruitment and decreases the pressure to continually find new foster carers (Chamberlain *et al.*, 2006; Randle *et al.*, 2016).

One of the key factors associated with foster carer retention is their overall satisfaction with foster caring (Denby *et al.*, 1999; Sinclair *et al.*, 2004). Many factors influence levels of carer satisfaction, including having a desire to care for children in need, parenting self-efficacy, the foster carer—child relationship, being recognized for a job well done or simply getting enjoyment from the role (Denby *et al.*, 1999; Rodger *et al.*, 2006; Sinclair *et al.*, 2004; Whenan *et al.*, 2009). However, many aspects of the complex foster care arrangement are beyond the control of the foster care agency. For example the particular characteristics and needs of the children entering care, the circumstances under which they were removed from their homes, the occurrence of significant personal events in the lives of carers, and the requirements of government departments administering state-level support.

Yet there are a number of factors impacting the placement over which agencies do have control. Prior to having a child placed with new carers, agencies must decide how they will prepare new foster carers for the role, which could include different types of training and development. Following placement, agencies again decide which types of support are offered to carers. This may include, for example, caseworker support, access to professional services, respite services and financial support. Such support services incur costs so agencies must decide which types and what levels of support to allocate resources to (MacGregor *et al.*, 2006). However, while it is known that support is a key contributor to foster carer satisfaction and retention (Butcher, 2005; Triseliotis *et al.*, 2000), at present there is little evidence to

guide agencies regarding which aspects of support are likely to have the greatest relative impact on carer satisfaction.

The present study aims to fill this knowledge gap by investigating which agency factors have the greatest impact on foster carer satisfaction. The study addresses the following research questions: (1) To what extent do agency factors affect foster carers' overall satisfaction?; and (2) Does pre-placement training contribute to greater foster carer satisfaction in the longer-term? Theoretically, this study contributes by providing new insights into drivers of foster carer satisfaction, a key construct known to affect the duration of foster care placements. As such, findings from this study form a building block for the development of a more comprehensive theoretical framework of foster placement success. Practically, results provide guidance to foster care agencies regarding which aspects of support to focus on in order to maximize foster carer satisfaction.

FOSTER CARER SATISFACTION

Satisfaction with foster caring has been found to be a key factor affecting carer retention. Among the first to recognise this was Leckies *et al.* (1997) who used data from a sample of 48 female foster carers to develop a scale to measure foster carer satisfaction. Participants were presented with a series of statements regarding satisfaction with various aspects of foster caring. Exploratory factor analysis using principle components and varimax procedures revealed three factors integral to foster carer satisfaction. These were labelled "role demands" (e.g. training, balancing other family demands, legal issues), "social service support" (e.g. assistance from the foster care agency, opportunity to meet other foster carers) and "personal needs" (e.g. monetary assistance, relationship with biological family, recognition and appreciation).

Denby and colleagues (1999) furthered this line of inquiry using a sample of 539 foster carers to examine a range of factors relating to the characteristics of foster carers and those that contribute to higher levels of satisfaction. Findings revealed various foster carer characteristics associated with higher levels of satisfaction, including having a desire to provide a home for children in need, feeling competent in their ability, having no regrets about taking on the role of foster carer, and the age of the foster mother. They also identified two aspects of the agency's involvement that contributed to higher levels of satisfaction: being provided with enough information by the caseworker and being acknowledged by the agency. The authors conclude that agencies cannot afford to focus only on recruitment efforts in order to increase foster placements. Equally important are agency factors such as training, support and the esteem provided to foster carers on an ongoing basis.

Rodger, Cummings and Leschied (2006) went on to use Denby's (1999) Foster Parent Satisfaction Survey (FPSS) in their study of 652 Canadian foster carers. Factor analysis of the 65 FPSS items identified a five factor solution which included statistically and conceptually different factors labelled "Perceptions about agency and child workers", "Challenging aspects of fostering", "Perceptions about foster home support workers", "Confidence and Satisfaction", and "Training". Using these five factors a discriminant function analysis was undertaken to classify carers in terms of whether they had considered quitting their role as foster carer before, and was able to correctly classify 65% of cases. A further discriminant function analysis of the 13 items included in the factor "Challenging aspects of fostering" revealed that it could correctly classify 75% of carers, and that conflict with support workers, dealing with difficult behaviors, and the impact of red tape were the most important components of this factor (Rodger *et al.*, 2006). In relation to satisfaction, the authors

conclude that communication and teamwork with agency staff were key components of satisfaction with the foster caring role.

In their large-scale study of over 900 foster carers in the UK, Sinclair, Gibbs and Wilson (2004) reported that a key reason carers continue in the role, despite the challenges and disadvantages it may present, is that "most of them gain great satisfaction from it" (p.64). Higher levels of satisfaction were attributed by carers to their own personality and temperament, wanting to help people, doing something worthwhile and feeling useful, being able to use their skills, or them simply gaining enjoyment from being a foster carer. Importantly, many attributed their higher levels of satisfaction to their having realistic expectations about the role before they started and they were therefore able to avoid disappointment (Sinclair *et al.*, 2004).

More recently, the importance of foster carer satisfaction was highlighted in an Australian study conducted by Eaton and Caltabiano (2009) which involved 185 foster carers. A series of regression analyses revealed that higher satisfaction predicted foster carers' intention to continue fostering within the next 18 months, and that both social support and locus of control significantly predicted higher levels of carer satisfaction.

Whenan, Oxlad and Lushington (2009) similarly examined the influence of foster carer characteristics on foster carer satisfaction but also took into account the impact of child characteristics. Specifically, child and carer sociodemographic characteristics, child behavioral and emotional problems, foster carer parenting self-efficacy, carer-child relationship quality were examined in relation to their impact on foster carer satisfaction. Results of univariate analysis showed that the foster child-carer relationship and foster carer self-efficacy were predictors of foster carer satisfaction.

While the work conducted to date (e.g. Eaton & Caltabiano, 2009; Whenan *et al.*, 2009) presents insights in to the carer and child characteristics that predict greater satisfaction, equivalent insight is not available in relation to factors associated with third major party present in a foster placement – the foster care agency. Some studies allude the importance of the foster care agency in preventing dissatisfaction (which is thought to account for up to 60% of all carers who cease to foster, Triseliotis *et al.*, 1998), for example in terms of including carers in decision making about the child and respecting and recognising carers for the important job they do (Blythe *et al.*, 2013; Sebba, 2012). However, few studies focus specifically on the role of the foster care agency and the importance of the supports offered in increasing carer satisfaction.

A few of exceptions are worth noting. The first is MacGregor *et al.*'s (2006) study which adopted a qualitative approach to understand the motivations and satisfactions of 54 Canadian foster carers. Their study investigated various supports and deficits that facilitate their role as foster carers and how they relate to foster carer satisfaction and retention. Key areas of support from agencies included emotional support from caseworkers, trust and good communication between agency workers and carers, recognition as primary carer for the child, resource support (e.g. specialists, education and medical support), crisis intervention, financial support and occasional respite and training (MacGregor *et al.*, 2006).

Another study focused more specifically on foster carer training, which was the only agency-related factor included as a covariate as part of the foster carer characteristics (Whenan *et al.*, 2009). While univariate and multivariate analysis revealed a positive relationship between the amount of training undertaken by foster carers and their wellbeing, no such relationship was found with training and carer satisfaction. This was the only significant covariate and the authors recommend that future research examine the effectiveness of training in improving the foster caring experience. Further research also seems warranted given that while the studies above indicate that training is important in increasing foster carer satisfaction, other

studies (e.g. Rodger *et al.*, 2006) raise questions regarding the relative importance of training compared to other factors in terms of influencing foster carer satisfaction.

The present study responds to calls for research in the area of foster carer training, but also expands investigation to include other agency-related factors that impact on an individual's experience as a foster carer to examine the relative impact each factor has on foster carer satisfaction. The agency-related variables included in this investigation of carer satisfaction are those identified in prior literature as critical to the provision of high quality foster care and positive outcomes for children, and identified as important in foster carer retention. These were the adequacy of staff and support from the agency (Butcher, 2005; Davidson-Arad & Benbenishty, 2010; MacGregor *et al.*, 2006; Maclay *et al.*, 2006; Sellick, 2006; Triseliotis *et al.*, 2000), financial remuneration (Kirton, 2001; Kirton *et al.*, 2007) and training (Butcher, 2005; Geiger *et al.*, 2014; Herbert & Wookey, 2007; MacGregor *et al.*, 2006; Whenan *et al.*, 2009).

METHODS

Context

This study was conducted in Australia where, similar to many other countries, children identified as at serious risk of harm or neglect within their own home are removed by authorities and placed in alternative care arrangements, one of which is foster care. In Australia, foster care placements are funded by Government but are delivered and managed by both government and non-government agencies. Day-to-day management of the placement and the supports and conditions associated with it are largely determined by the managing agency. Most agencies assign a caseworker to each placement who is responsible for overseeing it, including supporting the child and monitoring their wellbeing and also supporting the foster carer.

Fieldwork

This study is based on a longitudinal data set collected between May 2011 and January 2013. The data collection extended over this period because it took numerous recruitment efforts to achieve a sufficient sample size to conduct the analysis required to answer the research questions. Foster carers were recruited through multiple local agencies (i.e. caseworkers invited foster carers to participate in the study) and advertisements in the newsletter of the Australian Foster Care Association. The sample was designed to include carers from a range of different types of foster care agencies, including larger and smaller organizations and government and non-government agencies. The baseline survey included questions about participants, their foster caring experience and some psychological test batteries. Each participant completed the baseline survey (Wave 1) and then they also completed a second shorter survey (Wave 2) four months after completion of the baseline questionnaire. The baseline survey was longer than Wave 2 because some constructs (e.g. amount of training received prior to commencing as a foster carer) required measuring only once as the answers would not change over time. The second survey included questions about how the placement was going and carers' level of satisfaction with a range of aspects of their role. Participants were given a retail voucher to thank them for their contribution. The procedure was approved by the university's Human Research Ethics Committee.

Measures

Dependent variable. The key dependent variable of interest is satisfaction with foster caring, which was measured in both waves of data collection. Development of a measure of foster carer satisfaction for the purposes of this investigation followed the C-OAR-SE procedure for scale development in the social sciences (Rossiter, 2011). Using this procedure the construct (foster carer satisfaction) is defined and then items are developed to represent the identified components of the construct. Based on a review of relevant literature and qualitative interviews with foster carers. 13 of the original 22 items in the Satisfaction with Foster Parenting Inventory (Leckies et al., 1997) were identified as relevant components of the foster carer satisfaction construct for the purposes of this study. Some language of items was altered to make them more meaningful to Australian respondents and one item focusing on social service agencies was split into three items to reflect the differing tiers of support available to carers (agency, caseworker, and government service). Two additional items "The progress your child has been making in their overall development" and "Your confidence in your ability to be a good foster carer" were included because they were identified during the qualitative phase as being relevant to foster carers' level of satisfaction with their role.

From these modified and new items a satisfaction measure was constructed which included a range of aspects of foster caring. Items were selected in order to avoid overlap with the content of the independent variables of this study and eliminate the possibility of artificially inflated relationships between variables – that is, items specifically associated with the caseworker and agency support including respite care, financial support, and training were omitted. Legal and government administration items were also removed as these are areas in which agencies have limited control, and the primary concern was with how agencies could improve areas of caring that are within their area of influence. For each item participants indicated how satisfied they were using a five-point scale from "very dissatisfied" to "very satisfied". The internal consistency coefficients was acceptable (see Table 1), and produced a test-retest coefficient of r(113) = .72.

Independent variables. Pre-placement training. In the baseline wave of data collection only, carers indicated whether they had received training from their agency relating to different aspects of their caring role before they commenced as a carer (training can vary by individual agency). These topics included understanding the foster caring role, understanding the background and past experiences of foster children, understanding coping behaviours of foster children, managing foster children's difficult behaviours and promoting positive behaviours, managing children's physical health, managing children's mental and emotional health, caring for children who have experienced abuse, working as a team with a foster care agency and the support available to foster carers and foster carer self-care. The quantitative measure of pre-placement training was formed by summing the number of training topics each respondent endorsed. Participants were also asked whether any training was particularly useful and they answered in a free-form text box. This qualitative component of the pre-placement training measure was included such that greater insight (regarding what aspects of training were particularly valuable) could be obtained than if only quantitative data was collected (Mackay, 2012).

Placement match. In both waves of data collection participants rated the perceived match between themselves and the oldest foster child in their care on a five-point scale from "very bad" to "very good".

Financial support. In both waves of data collection participants rated the adequacy of the payment received in the last four months to cover expenses relating to fostering the child using a four-point scale from "a lot less than needed" to "more than enough".

Adequacy of contact and support by the foster care agency. In both waves participants responded to five questions asking about training opportunities, caseworker support, home visits from the caseworker, respite care provided and support from the agency as a whole. Responses ranged on a five-point scale from "a lot less than needed" to "a lot more than needed".

Perceived caseworker need. In both waves carers responded to a single item to assess how often they needed to make urgent contact with their caseworker on a six-point scale from "less than once per month" to "almost every day".

An additional question relating to foster carers' satisfaction with the government department administering children's services (e.g. government child protection service) was asked in both waves of data collection. This item was included to acknowledge that foster carers may have direct contact with government which could influence their satisfaction beyond their agency's control. The question was also taken from the Satisfaction with Foster Parenting Inventory (Leckies *et al.*, 1997). Participants rated on a five-point scale the satisfaction with their working relationship with the government department administering children's services in their state or territory. This measure was used as a covariate in the analyses to control for generalised effects of interacting with government on foster carers' satisfaction.

Analysis

Data was first analysed using a hierarchical regression model with baseline satisfaction as the dependent variable and pre-placement training, satisfaction with government child protection service, money to cover placement expenses, perceived placement match, adequacy of support provided by the agency and perceived need for the caseworker as independent variables. To answer the second research question a serial mediation model was performed which examined the chain of mediating relationships between pre-placement training and satisfaction with foster caring four months after the baseline measurement that included the effects of the adequacy of agency support and satisfaction with foster caring at baseline.

Free-form text responses to the qualitative component of the pre-placement training measure were analysed using directed content analysis (Hsieh & Shannon, 2005). This involved reviewing all comments provided by participants and identifying descriptions of training that fit within the specific categories included in the quantitative measure of pre-placement training. These qualitative comments for each category are useful for providing greater insight into the quantitative data collected (Mackay, 2012).

The statistical analysis was also supported by the qualitative comments provided by study participants that provided insight regarding the aspects of pre-placement training they found particularly valuable. Qualitative data were analysed using directed content analysis (Hsieh & Shannon, 2005). This involved reviewing all qualitative comments and identifying descriptions of training content that fit within each of the categories (from the quantitative data) identified as contributing to higher ratings of agency support. Examples of such training descriptions can be used to illustrate the training content that participants found particularly useful, and inform the development of foster carer training programs that include such elements.

FINDINGS

Sample description

The initial sample included 212 foster carers. As the sample included responses from foster carer couples as well as individual carers, the survey responses of one partner from each couple was randomly selected and excluded to ensure the analysed data set satisfied the assumption of independence of observations. A further six carers were excluded because they had received no pre-placement training with their current agency, although they had previously been carers elsewhere and could therefore be assumed to possess knowledge and experience of the caring context, independent of pre-placement training. This led to a sample of 137 independent study participants from 28 different government and non-government agencies. Table 1 presents a summary of the demographics of the carers in this study. Participants had experience in all types of foster care, including emergency care: 47%, respite care: 61%, short-term care: 58% and long-term care: 80% (note that percentage values do not add to 100% because many carers had performed more than one type of care). The sample was mostly female (66%) and middle-aged (median 47 years, range 23-70) with a median time as a foster carer of between 3-4 years.

Table 1. Sample characteristics (N = 137).

Sex	
Male (%)	46 (34)
Female (%)	91 (66)
Age	
Median	47
Range	23-70 years
Relationship status	
Single (%)	37 (27)
Partnered (%)	100 (73)
Time caring	
Median	3-4 years
Range	Less than 4 weeks $-25-30$ years
Caring experience (multiple response)	
Emergency (%)	64 (47)
Respite (%)	84 (61)
Short-term (%)	79 (58)
Long-term (%)	110 (80)
Preferred care type	
Emergency (%)	4 (3)
Respite (%)	12 (9)
Short-term (%)	16 (12)
Long-term (%)	105 (77)
Education	
High school	35 (26)
Trade Certificate	23 (17)
Diploma / Advanced Diploma	23 (17)
Bachelors Degree	31 (23)
Graduate Diploma / Graduate Certificate	13 (9)
Postgraduate Degree	12 (9)
Employed	
Working full-time (%)	50 (36)
Working part-time or casually (%)	29 (21)

Unemployed but looking for work (%)	4 (3)
Homemaker (%)	30 (22)
Retired (%)	11 (8)
Student (%)	9 (7)
Student (%)	4 (3)
Household income	
Below median	62 (45)
Median	29 (21)
Above median	46 (34)
Area of residence	
Metropolitan	57 (42)
Regional	55 (40)
Rural	25 (18)
Has own children	
Yes	101 (74)
No	36 (26)
Number of current foster children	
Median	1
Range	1-6

Hierarchical Multiple Regression Analysis

Table 2 presents the descriptive and reliability statistics and correlations of the study measures. A hierarchical multiple regression was performed on those cases with complete sets of measures (N = 137). The hierarchical regression analysis provides an assessment of the amount of incremental variance in the dependent variable (satisfaction at baseline) that is being explained by the independent variables, when these are added to the model in a number of steps. This analysis determines whether any or all of the nominated variables make a contribution to foster satisfaction. On step 1 pre-placement training was entered into the model and this accounted for 12.7% of the variance in foster carer satisfaction, $R^2 = .127$, F(1,135) = 19.56, p < .001. On step 2, satisfaction with the government child protection service was entered into the regression equation and accounted for an additional 6.5% variance in satisfaction, $\Delta R^2 = .065$, $\Delta F(1.134) = 10.73$, p = .001. On step 3, perceived match with the foster child and money received for caring were entered into the model, explaining a further 14.6% of the variance in satisfaction, $\Delta R^2 = .146$, $\Delta F(2,132) = 14.49$, p < .001. Finally, on step 4, adequacy of agency support and perceived need for the caseworker explained an extra 5.7% of foster carer satisfaction variance, $\Delta R^2 = .057$, $\Delta F(2.130) = 6.06$, p = .003. In total, these variables explained 39.4% of the variance in foster carer satisfaction, R^2 = .394, adjusted R^2 = .366, F(6,130) = 14.09, p < .001. This can be considered a large combined effect (Cohen, 1988).

Table 2. Descriptive statistics, reliabilities and correlations of the dependent and independent variables (N = 137).

Measure	Mean	SD	α	Items	1	2†	3	4	5	6	7	8
1. Satisfaction with foster care at baseline	55.89	7.33	.76	15	-							
2. Satisfaction with foster care at four months [†]	56.15	8.22	.71	15	.72**	-						
3. Pre-placement training	7.87	3.06	.92	10	.36**	.33**	-					
4. Satisfaction with government administration	2.81	0.96	-	1	.32**	.32**	.18*	-				
5. Placement match	3.48	0.68	-	1	.25**	.13	08	00	-			
6. Money received in the last four months for foster caring	2.60	1.01	-	1	.25**	.37**	.03	.06	14	-		
7. Adequacy of agency contact	13.36	3.43	.79	5	.47**	.57**	.33**	.43**	01	.29**	-	
8. Perceived need of caseworker	1.60	1.07	-	1	14	15	08	02	.14	11	19*	-

 $^{^{\}dagger}N = 115. ^{*}p < .05, ^{**}p < .01.$

Table 3 gives the unstandardized (B) and standardised (β) regression coefficients, and the squared semi-partial correlations for each predictor on each step of the model which indicates the unique amount of variance explained. As identified in Table 3, the measures that significantly predicted foster carer satisfaction in the final model were the match with the child ($sr^2 = .09$), pre-placement training ($sr^2 = .06$), adequacy of agency support ($sr^2 = .04$) and money received for foster caring ($sr^2 = .03$).

Table 3 Unstandardized and Standardised Regression Coefficients, and Squared Semi-Partial Correlations for Each Predictor Variable on Each Step of a Hierarchical Multiple Regression Predicting Foster Carer Satisfaction at Baseline.

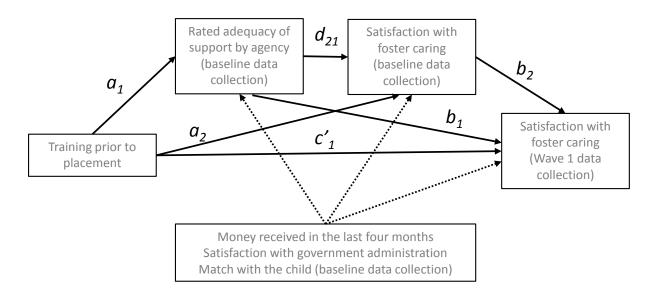
Measure	В	β	sr^2
Step 1			
Pre-placement training	0.85**	.36	0.13
Step 2			
Pre-placement training	0.74**	.31	0.09
Satisfaction with government administration	1.98**	.26	0.06
Step 3			
Pre-placement training	0.79**	.33	0.10
Satisfaction with government administration	1.84**	.24	0.06
Placement match	3.39**	.31	0.10
Money received in the last 4 months for foster caring	1.94**	.27	0.07
Step 4			
Pre-placement training	0.618**	.26	0.06
Satisfaction with government administration	1.13	.15	0.02
Placement match	3.37**	.31	0.09
Money received in the last 4 months for foster caring	1.40**	.19	0.03
Adequacy of agency contact	0.54**	.25	0.04
Perceived need of caseworker	-0.59	09	0.01

Mediation Analysis

From the hierarchical analysis it was observed that a number of variables were related to both the rated adequacy of agency support and satisfaction with foster care at baseline; preplacement training, satisfaction with departmental administration and the money received for foster caring. Plausibly, these factors could influence carers' ratings of agency support that could, in turn, be a key factor that determines satisfaction with foster care. While agencies are constrained in how much they can alter monetary subsidies and departmental administration of foster care, pre-placement training is one area where they have greater control (agencies decide how much and what type of training is offered to foster carers, both prior to and during the placement). Therefore, to investigate the relationship of pre-placement training to satisfaction with foster care (at baseline and four months later), a serial mediation model was tested (see Figure 1). This model tested the possibility that the relationship between preplacement training and foster carer satisfaction after four months can be explained as a chain of effects including an indirect path through the rated support from the agency and satisfaction with foster caring at baseline. The presence of a reliable indirect path is consistent with the argument that sees pre-placement training establishing a good, supportive relationship with carers that affects carer satisfaction longer-term. Accordingly, if training could be shown to be related to satisfaction longer term it is likely that it represents a malleable factor agencies can control in order to enhance both the relationships with their carers and carers' sense of fulfilment in the role. The model controlled for the additional

variables of money received for caring, satisfaction with government administration, and match with the child, and accordingly the results for pre-placement training are over and above any effects that these variables have on adequacy of agency support and satisfaction with foster caring.

Figure 1. Mediation model of the relationship between pre-placement training and foster carer satisfaction



PROCESS (Hayes 2012) was used to conduct the mediation analysis. PROCESS is based on bias-corrected bootstrapping for the testing of significance of indirect model effects. A total of 10,000 bootstrap samples form the basis of the bootstrapped confidence intervals.

Foster carer satisfaction data at four months post the initial survey was available for 115 of the original participants. The results of the path analyses are summarised in Table 4. Controlling for the effects of financial remuneration for foster caring and satisfaction with government administration, pre-placement training was a significant predictor of the rated adequacy of agency support in placement ($a_1 = 0.20$), such that more training was associated with greater rated adequacy of agency support. Training ($a_2 = 0.74$) and the level of agency support ($d_{21} = 0.63$) both predicted the satisfaction with foster care at baseline, with greater levels of training and rated agency support being associated with greater carer satisfaction in the role. The level of agency support ($b_1 = 0.62$) and satisfaction with foster care at baseline ($b_2 = 0.57$), but not training ($c'_1 = 0.21$), predicted satisfaction with foster care at four months post baseline. Once more, greater rated agency support and greater baseline satisfaction was associated with greater satisfaction four months later.

Table 4. Mediation model: Adequacy of agency support as a mediator between pre-placement training and satisfaction with foster caring

		M_1 (adequacy of agency support)				M_2 (satisfaction at baseline)				Y (satisfaction at four months)			
Antecedent		Coeff.	SE	p		Coeff.	SE	p		Coeff.	SE	p	
X (training)	a_1	0.20	0.09	<.05	a_2	0.74	0.18	<.001	c '1	0.21	0.18	.24	
M_1 (agency Support)		-	-	-	d_{21}	0.63	0.19	<.01	b_1	0.62	0.19	<.01	
M_2 (satisfaction at baseline)		-	-	-		-	-	-	b_2	0.57	0.09	<.001	
Money		1.04	0.26	<.001		1.63	.58	<.01		1.38	0.55	<.05	
Satisfaction with government		1.24	0.28	<.001		0.63	0.62	.31		0.80	0.58	.17	
Match with child		0.01	.40	.98		2.92	0.81	<.001		1.20	0.79	.13	
Constant	i_{M1}	5.69	2.00	<.001	i_{M2}	25.53	4.21	<.001	i_Y	3.75	4.51	.41	
		$R^2 = .29$			$R^2 = .39$ F(5,109) = 13.86, p < .001				$R^2 = .62$				
		F(4,110) = 11.40, p < .001								F(6,108) = 29.02, p < .001			

The effects in the model are summarised in Table 5. Pre-placement training is found to be a predictor of satisfaction with foster care after four months when the mediators are omitted from the model (total effect). However, when the mediators are included as predictors, pre-placement training becomes nonsignificant (direct effect). This suggests that the variance in longer term satisfaction with foster care that is explained by pre-placement training is captured by the mediators of rated adequacy of agency support and satisfaction with foster care at baseline. In addition, all indirect effects are found to be significant, revealing that each pathway makes a reliable contribution to the explanation of longer term satisfaction with the foster caring role, although the indirect effect through pre-placement training and satisfaction with foster care at baseline is significantly larger than the other two indirect pathways (as determined by indirect effect contrasts). Accordingly, this pattern of results is consistent with the effect of pre-placement training on foster carer satisfaction at four months being realised by its effects on the adequacy of agency support and concomitant satisfaction with foster caring.

Table 5. Summary of effects in mediation model

Effect	Estimate	95% confidence interval
Total effect		
Pre-placement Training c	0.82^{**}	[0.41, 1.23]
Direct effect		
Pre-placement Training c'	0.21	[-0.14, 0.57]
Total Indirect effect		
$a_1b_1 + a_1d_{21}b_2 + a_2b_2$ Indirect effects	0.61**	$[0.34, 0.94]^{\dagger}$
a_1b_1	0.12^{*}	$[0.01, 0.32]^{\dagger}$
$a_1d_{21}b_2$	0.07^*	[0.01, 0.19] †
a_2b_2	0.42^{**}	$[0.22, 0.67]^{\dagger}$

^{*} Significant at p < .05, **significant at p < .01. † Bias corrected bootstrap confidence interval.

Post hoc analysis

Post hoc analysis examining the specific forms of training identified that some types of training were more strongly associated with rated adequacy of agency support (see Table 6). Using Bonferroni correction to control for Type I error, training modules that were consistent with higher ratings of agency support were those focusing on the past experiences of foster children, behavior management, management of mental and emotional health, teamwork with the agency and support and self-care.

Table 6. The relationships between specific forms of training and carers' appraisal of the adequacy of contact provided by the agency.

Adequacy of agency contact	
Training on role	.204

Training on background/past experience of foster children	.231*
Training on coping behaviors of foster children	.196
Training on managing behavior	.289*
Training on managing physical health	.201
Training on managing mental and emotional health	.315*
Training on abuse	.196
Training on teamwork with agency	.270*
Training on support and self-care	.259*

p < .006 (Bonferroni adjustment).

The statistical analysis presented in Table 6 was supported by the qualitative comments provided by study participants. For example, in relation to understanding the experiences of foster children, carers found it useful to learn "that their behaviors are a result of their past experiences" and "the different needs of children coming into care". It was clear that effective training had the potential to leave a lasting impression on carers: "there was an activity about understanding the child's experience that I still remember vividly".

In relation to understanding and managing the health concerns of foster children, carers noted it was useful to learn "how abused children perceive their surroundings, and how their brain is 'wired' differently as a result of abuse" and also about "drugs and drug abuse". Regarding behavior management, foster carers found it useful to learn that "discipline for foster children is largely different than for your own children". They appreciated training on more practical issues such as working with a range of stakeholders: "we were not alone and were working as a part of a team", and also the realities of being a foster carer: "it was very good for getting us to think realistically about what we were getting into - taking off the rose colored glasses so to speak".

DISCUSSION

Foster care agencies rely on foster carers' long term availability to be able to provide safe and nurturing homes for children who are unable to stay with their birth families. It is known that retention of foster carers depends largely on their level of satisfaction with being a foster carer (Eaton & Caltabiano, 2009; Sinclair *et al.*, 2004). Many factors that influence foster carer satisfaction have been studied in the past and have provided critical insights into how to increase satisfaction. The present study investigated an aspect that – to date – has received relatively less attention: factors related to the foster care agency. This gap in knowledge is particularly important given that agency-related factors (for example formal support mechanisms, training, financial assistance and relationships with agency workers) have been found to be some of the areas of lower foster carer satisfaction (Eaton & Caltabiano, 2009; Randle *et al.*, 2016).

The results of hierarchical regression analysis indicated that training, adequacy of agency support, money to cover placement expenses and a good match with the child were predictive of foster carer satisfaction measured at the same time. Results also pointed to associations between some of these predictors in a way to suggest possible mediating effects between them. One effect considered the link between provision of pre-placement training and foster carer satisfaction at four months through the adequacy of foster agency support and baseline satisfaction with foster care. On the basis of responses to two questionnaires four months apart, the influence of the level of pre-placement training and the adequacy of agency support on foster carer satisfaction (measured in the two waves of data collection) have been tested in a serial mediation analysis. This analysis revealed that pre-placement training was fully mediated through this chain of mediators, suggesting that the amount of pre-placement training positively contributes to both the level of agency support and the concurrent satisfaction a carer experiences. This finding supports previous research which emphasises the importance of training and preparation of foster carers such that they develop realistic expectations of the role, and the link between preparedness and higher levels of foster carer satisfaction and retention (Butcher, 2005; Geiger et al., 2014; Rhodes et al., 2001; Sinclair et al., 2004). Further, the level of agency support also determines, to some degree, a carer's level of satisfaction. These results not only extend knowledge about factors that drive foster carer satisfaction, but also provide guidance to foster care agencies about how important the support measures offered by them are, and which of those support measures are of particular value. Pre-placement training emerged as particularly critical, possibly not only because it provided practical information which was relevant to the upcoming start of a placement, but also because it served as a strong sign of commitment to support foster carers by the foster care agency.

Training modules found to be associated with higher ratings of agency support included those focusing on behavior management, past experiences of foster children, management of mental and emotional health, teamwork with the agency and support and self-care. The importance of these types of carer training are consistent with those advocated by researchers who have focused on foster carer training as a means of professionalization of the role (Butcher, 2005), and also those focused on particular populations of foster children (e.g. teenagers, Geiger *et al.*, 2014) or specific aspects of the foster placement (e.g. familial or parental factors, Buehler *et al.*, 2003). These training topics contribute to the carer's understanding of the caring context, promote skills and knowledge to build confidence and a greater sense of control within the caring context, and outline the relationship between carer and the agency.

Results point to tangible ways in which foster carer satisfaction can be increased though factors that are potentially within the control of foster care agencies: pre-placement training is one of the key factors associated with foster carer satisfaction. Pre-placement training plays a role not only in teaching future foster carers how to successfully perform in their role; it also allows agencies to shape the expectations of foster carers and potentially avoid disappointment, thus directly impacting levels of satisfaction.

A second aspect is perceived agency support which can be increased not only by offering a range of support services beyond visits by caseworkers, but also by being proactive in communicating these support services. Such services could involve little more than setting up platforms for foster carers to exchange experiences online, thus making it a very cost-effective measure which may be useful to some carers, especially if they feel they are dealing with their challenges in isolation. It would also increase perceptions of agency support amongst foster carers. Another agency factor that impacts foster carer satisfaction is the financial support offered to help cover placement expenses. This may be more difficult for

agencies to change, but it may be possible to investigate sponsoring or corporate social responsibility arrangements where businesses donate shopping vouchers or other items that indirectly reduce costs for carers and increase perceptions of financial support.

Finally, a good match between the foster carer and the child plays an important role in foster carer satisfaction. This finding is not new (Berridge, 1997; Sinclair & Wilson, 2003), but it does reinforce the need for thorough assessment of the match before placement. Importantly, results of this study highlight the importance of the foster care agency and the various ways it can contribute to the success of foster placements. Findings of this study offer numerous ways in which this might be achieved.

A limitation of this study is the relatively small sample size which precludes some forms of data analysis. For example a larger sample would allow for more sophisticated segmentation studies which analyse differential outcomes or impacts for specific groups of foster carers. This could include, for example, studies of relative/kin carers – a carer group which now represents the largest proportion (49%) of all out-of-home care placements in Australia (foster care placements are currently around 39%, Australian Institute of Health and Welfare, 2017). Relative/kin carers may face particular challenges or have specific needs that differ from those of foster carers. Researching this group may provide insights similar to those revealed in this study and enable agencies to support them more effectively. Furthermore, although this study utilised a longitudinal dataset which measured carer satisfaction four months after completing the baseline survey, future studies could extend to include longer-term measures of satisfaction, or indeed track foster carer satisfaction levels at regular intervals over an extended period of months or even years. Such a design, of course, is challenging to implement given that access to foster carers is difficult to obtain and long-term commitment to the study is hard to secure.

While the results of analysis have been interpreted as a series of effects operating in a more-or-less causal chain, it is important to acknowledge that the basis of this investigation is correlational, and therefore a causal explanation of the effect of pre-placement training to the adequacy of agency support and concurrent and delayed foster carer satisfaction cannot be fully supported at this time. However, given the types of training modules found to be most strongly related to agency support, and the assertion that supported carers are more likely to be satisfied (all other things being equal), this explanation would appear to be an acceptable one.

Our study involved individuals with differing lengths of time as carers who were engaged with differing placement lengths. Consequently, the time since pre-placement training was not controlled in this study¹. Retrospective report is not without issues regarding reliability of data, and the variability of time since training took place may have compounded effects on the accuracy of the training data obtained. These considerations aside, this study offers practitioners and researchers alike with new insight into the ongoing influence of the agency on the foster caring experience that may guide future carer preparation for optimal retention.

¹ To explore the possibility that the length of time caring had some bearing on the results reported, the mediation analysis was re-run using an ordinal measure of the length of time caring as an additional covariate (as captured in the baseline survey). However, did not influence the pattern of results reported here.

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