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Placement disruption in long-term kinship and nonkinship foster care



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ABSTRACT

The purpose of this study was to explore factors related to placement disruption in long-term kinship and nonkinship foster care in a Nordic country.

The study included 136 children aged 4–13 years in kinship and nonkinship foster care in Norway in the year 2000, with updates for the year 2008. Placement and demographic information and the Child Behavior Checklist (CBCL) were collected from foster parents and youths. Generalized linear mixed model analysis was undertaken. A thorough literature review was done in order to study association between disruption and relevant variables.

None of the predominant variables from previous literature were significantly associated with disruption for this sample of children in long-term foster care.

Since long-term stable foster care (rather than adoption) is the preferred option in Nordic as well as some other European countries, there is a need to explore the processes of inclusion that give children a lifelong commitment to their foster families.

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1. Introduction

This article presents findings from a longitudinal study on factors associated with disruption in long-term kinship and nonkinship foster care. Kinship foster care as one alternative type of placement is here defined as children being cared for by non-parental relatives within child-protection jurisdiction.¹

The need to secure stability and prevent the breakdown of foster families is grounded in theory, policy and practice. The basic understanding within the literature of child welfare is that the negative effects of maltreatment on children's mental health and their wellbeing can be healed by placement in a stable family (Berger, Bruch, Johnson, James, & Rubin, 2009; Carlson, 2002; Harden, 2004). When children needing care because of neglect and abuse are required to move from one foster family to another, earlier social relationships might be lost. The child must also learn new family values and rules and get accustomed to a new physical and social environment.

In quantitative studies with children and youths in foster care, placement instability has been seen to have an impact on self-esteem, delinquency (Ryan & Testa, 2005), educational achievement, behavior problems, social network disruption and drug use (Berger et al., 2009; Carlson, 2002; Harden, 2004; Rubin et al., 2004). Qualitative studies with youths in foster care and young adults leaving foster care have found themes of loss and loneliness as well as a lack of the sense of belonging due to placement disruptions (Stott & Gustavsson, 2010). Of the cited references above, Berger et al. (2009) and Carlson (2002) refer to studies where both kinship and nonkinship foster care were included. The other references do not specify the type of foster care placement.

Theories from psychology, social sciences and jurisprudence have influenced thinking about child welfare. Within psychology the attachment theory developed by Bowlby has been recognized as applicable to children in foster care, on both social and legal grounds (NOU:5, 2012; Oosterman, Schuengel, Wim Slot, Bullens, & Doreleijers, 2007). This theory claims that children placed in foster care lose access to persons to whom they had become attached, and this can only be resolved by relating to alternative caregivers (Bowlby, 1973/1998). From sociology, theories of family have been used in order to study relationships between child and foster family (Thørnblad & Holtan, 2011b) and social integration of foster children (Holtan, 2008). Theories on power have been used to study the relationship between child and family on the one hand and between child and child-protection system on the other (Thørnblad & Holtan, 2011a). Koh and Testa (2008) relate placement in kinship foster care to altruism and family duty.

Since the Convention on the rights of the child was adopted by the United Nations (UN) in 1989, social theories that see children as social

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¹ The term "nonkinship foster care" will refer to placements with others than relatives. "Foster care" will refer to both kinship and nonkinship foster care placement where type of placement is not specified.

actors and not merely as objects of socialization have come to the fore. Although there is little empirical evidence of a link between child collaboration in the placement process and subsequent placement disruption, it has been suggested that greater stability in foster care is achieved when the child participates in the matching and preparation process (Altshuler, 1999). In many agencies in western countries, however, a limited pool of available foster carers limits participation by children in "choosing" a caregiver.

The underlying goal of foster care is that children should avoid multiple moves between different kinship and nonkinship foster homes and group homes. This goal may be seen either as "permanence" or "stability." Permanency refers to reunification, adoption or guardianship (Winokur, Holtan, & Valentine, 2009). Stability refers to number of placements, re-entry and length of placement (op. cit.). As there are essential differences among countries concerning childwelfare policy, legislation and practice, the relevance of these two terms will vary between countries. Within Nordic countries, the Netherlands, Spain and Australia, long-term stable foster care is preferred, and adoption is seldom an option (Sallnäs, Vinnerljung, & Kyhle Westermark, 2004; Strijker, Zandberg, & Van Der Meulen, 2003). Stability is therefore a relevant measure in the evaluation of foster care in these countries (Sallnäs et al., 2004). The aim in these countries is to maintain continuity of family relationships while the child is in state custody. In the US, in contrast, the 1980 Adoption Assistance and Child Welfare Act requires that public child-welfare agencies pursue legal permanence (adoption, guardianship) for children in out-of-home care (Shlonsky, 2006). Permanency thus is in line with US policy and legislation.

Although child-welfare policy has emphasized stability, research indicates that placement disruption is a major problem of child welfare in western countries. Rates of prematurely terminated placements vary from 30 to 37% in a Swedish sample, the exact number depending on whether a narrow or wide definition of breakdown was applied (Sallnäs et al., 2004), and is 39% in a Norwegian sample of 70 children during a period of 7.5 years (Christiansen, Havik, & Anderssen, 2010). Half of all children in the US experience at least one placement change while in care (Connell et al., 2006). A longitudinal study from Spain, however, reports that only 15% of children in foster care (in a sample of 649) experience two or more placements (del Valle, López, Montserrat, & Bravo, 2009). The authors state that stability emerges as a dominant trait in Spanish foster care.

The research literature differs in terminology and definitions of placement disruption, e.g., breakdown, instability, number of placement changes, unplanned removal. We define placement disruption in this article as the phenomenon when a foster-home agreement is terminated and a child in state custody (on care orders) must move to another foster family or residential care.

1.1. Purpose and aim

The purpose of this study was to explore factors associated with placement disruption in long-term nonkinship and kinship foster care in a Norwegian sample of 136 foster children. The study sought to identify the child and placement characteristics associated with disruption. The aim was to place the findings in the context of current child-protection policy in a Nordic country and discuss the implications of the findings for further research in order to create stable placements.

2. Research on factors associated with disruption

There are several studies and systematic reviews on factors related to stability versus multiple placements. In the following section we will give an overview of the significant factors.

2.1. Factors associated with children's background

2.1.1. Age at placement

In their systematic review, Oosterman et al., 2007, examine risk and protective factors associated with placement breakdown across 26 studies (dating from 1960 to 2005) of 20,650 children in foster families. Of these, six studies of 11,390 participants compared kinship and nonkinship foster care in relation to placement disruption (Berridge & Cleaver, 1987; Iglehart, 1994; James, 2004; Usher, Randolph, & Grogan, 1999; Webster, Barth, & Needell, 2000; Wulczyn, Kogan, & Harden, 2003).

Results from the analysis of the total sample indicate that children placed at an older age experience more placement breakdown (Oosterman et al., 2007). Meta-analysis shows significant but small effect sizes, and smaller effects in multivariate studies when controlling for other factors (op. cit.). Their findings also indicate that age was a more important factor in non-US studies and in more recent studies. Recent studies further show that risk of disruption increases with a child's age (Akin, 2011; Connell et al., 2006; Strijker, Knorth, & Knot-Dickscheit, 2008).

2.1.2. Behavior problems

The systematic review by Oosterman et al. (2007) showed a significant association between behavior problems and disruption in several studies. These studies found that children and adolescents with behavioral problems were the least likely to achieve placement stability. For example, James (2004) found that 20% of all placement changes were behavior related and 70% of all placement changes were the result of system or policy mandates. The remaining 10% were caused by events occurring in the lives of the foster families (sample size = 1084). The highest risk of behavior-related moves occurred during the 100 days after placement (associated with older age and evidence of externalizing problems). Findings from the study suggest that behavior-related problems could serve as a critical marker for targeted intervention.

Newer studies are confirming an association between placement disruption and behavior problems (Akin, 2011; Chamberlain et al., 2006; Eggertsen, 2008; Hurlburt, Chamberlain, Degarmo, Zhang, & Price, 2010). However, there are studies that demonstrate no association between the number of placements and mental health (Berger et al., 2009; Chew, 1998). These studies indicate that other demographic or environmental factors may contribute to behavioral outcomes. They emphasize a need to understand the complexity of foster-care moves. Some moves might in fact be fruitful for children (Berger et al., 2009; Chew, 1998). For example, if the foster parents cannot nurture a close relationship with a foster child, and if the child is allowed to play an active role in the placement process, the child may choose to break off the relationship (Andersson, 2005). In such cases, breakdown might not be a bad outcome for the child (Andersson, 2005).

2.1.3. Placement history

Results suggest that children with previous placements in foster care experience more placement disruptions, although there is doubt whether number of placements is an independent predictor (Oosterman et al., 2007:66). Oosterman et al. (2007) cite Webster et al. (2000), for instance, and claim that children with more than one placement move in the first year of foster care were more likely to experience placement instability over the long term than if they did not move or were moved only once during their first year in foster care. In their review, Oosterman et al. (2007) found that the first six months of placement carry the highest risk of disruption. Subsequent studies also have found that early stability is an important predictor of foster-care permanency (Akin, 2011; Koh & Testa, 2008; Lernihan & Kelly, 2006; Strijker et al., 2008).

2.1.4. Reasons for out-of-home placement

It appeared in the review of Oosterman et al. (2007:64) that children in foster care for reasons of abuse had more placement breakdown than children who were in foster care because of neglect. Eggertsen (2008) also found that children who had experienced sexual abuse were slightly more likely to experience multiple placements than children placed for other reasons.

2.2. Placement-related factors

2.2.1. Kinship foster care

In the United States and Australia, legislation over the last 20 years has preferred kinship placement as the placement of choice, when appropriate (Ainsworth & Maluccio, 1998; Geen, 2000; Hegar & Scannapieco, 1999). In some European countries as well, there has been a shift in policy toward giving priority to kinship placements (Broad, 2004). In Norway, regulations from 2004 were incorporated saying that child welfare "shall always consider whether any of the child's family or close network can be selected as foster parents" (The Ministry of Children, 2003).

A systematic review of safety, permanency and well-being outcomes compared kinship foster care to nonkinship foster care (Winokur et al., 2009). Sixty-two studies published from 1991 to 2006 were included. Children in nonkinship foster care were 2.6 times more likely than children in kinship foster care to experience three or more placements. A research review of stability for children in foster care in general reported evidence in favor of kinship foster care (Holland, Faulkner, & Perez-del-Aguila, 2005) (not cited in Oosterman et al., 2007). In their systematic review of disruptive placements, however, Oosterman et al. (2007) found no significant association between kinship foster care and breakdown. A research review of foster care in Nordic and other European countries 1980–2009 found that there were fewer placement movements among children in kinship foster care than among children in nonkinship foster care (Backe-Hansen, Egelund, & Havik, 2010:19–27).

Studies published later than 2005 (and not included in the three reviews cited above) found that kinship foster care is a predictor of stability. These are from the US (Akin, 2011; Hurlburt et al., 2010), Ireland (Lernihan & Kelly, 2006), the Netherlands (Strijker et al., 2008), and Spain (del Valle et al., 2009).

Several studies find that kinship placements are more stable than nonkinship placements but that the advantage diminishes as the duration of care increases (Lernihan & Kelly, 2006; Testa, 2001). In their matched samples of children in kinship and nonkinship foster care, Koh and Testa (2008) still found that kinship placements were more stable, in the sense that children in kinship foster care were less likely to experience an initial placement disruption than were children in nonkinship foster homes.

2.2.2. Inclusion and sense of belonging

The quality of foster caregiving is described in a number of studies as a protective factor with respect to placement disruption (Oosterman et al., 2007). In their narrative review of the literature on family contact for children in kinship, nonkinship and residential placements, Sen and Broadhurst (2011) conclude that quality contact with family members, in conjunction with positive professional interventions, promotes successful family placement stability or reunification.

Similar findings by Palmer (1996), based on theories of attachment, found that inclusive practices, such as treating parents as an important part of their children's lives, promoted stability. In her longitudinal qualitative study from Sweden, Andersson (2005) concluded that inclusive practices by foster parents influenced the social adjustment and well-being of foster children as they became adults. Leathers (2006) found that the sense of belonging in the foster home was highly predictive of placement stability. Integration in the foster home mediated the association between behavior problems and the risk of

disruption. It should be noted that Palmer (1996), Andersson (2005) and Leathers (2006) did not include kinship foster care in their studies.

2.2.3. Presence of biological children of the foster parents and sibling placements

According to Oosterman et al. (2007), there was a reasonably consistent association between the presence of biological children of the foster parents and placement disruption (referring to studies mainly prior to 2000). However, other factors in play were age and gender of the children, as well as the motivation of foster parents.

Most of the studies cited by Oosterman et al. (2007) showed that placement with siblings was associated with less breakdown. Akin (2011) and Holland et al. (2005).

2.2.4. Contact between biological parents and child

Studies on the role of biological parents and disruption included in Oosterman et al. (2007:26) focused on visitation patterns and amount of contact. They found no conclusive evidence that the amount of contact affected the disruption rate. The included studies were mainly based on univariate analysis, and the authors recommended a multivariate model to examine this topic (Oosterman et al., 2007). Exploratory qualitative study of kinship foster care placements, however, revealed that contact with biological parents was a stressor (Terling-Watt, 2001).

2.2.5. Child-protection support and professionalism of workers

Oosterman et al. (2007:71) referred to six studies dating from 1983 to 2001 on the practices of agencies and the professionalism of social workers. All but one study found that placements with case worker contact, support and training were less likely to disrupt. The research review concerning stability for children in foster care reported evidence in favor of individualized, multidimensional support (Holland et al., 2005). Their review included both kinship and nonkinship foster care placements. The number of caseworkers as well as their tenure of employmentwere positively associated with placement success (Eggertsen, 2008). This study did not specify type of placement (kinship or nonkinship).

2.2.6. Demography of caregivers

Studies on the demography of caregivers associated with disruption cited by Oosterman et al. (2007) refer to factors such as the caregiver's age, length of marriage, income, religion and occupation. Kinship and nonkinship status were not specified. The studies date mainly between 1970 and 1980, and there were few findings of association between the factors studied and placement disruption. Exploratory qualitative analyses in the study of Terling-Watt (2001) revealed that health limitations of relatives were stressors. However, there is a gap in the literature on the association between socioeconomic variables of foster parents and disruption.

In summary, research indicates that the dominant factors in placement disruption seem to be:

- Child background variables such as child behavior, child age at placement, previous placement breakdown.
- *Placement-related factors* such as type of placement, quality of foster care, demographics and relationships within the care system.
- Service-provision factors.

3. Methods

3.1. Participants and procedures

This article presents findings from a longitudinal study of 136 children aged 4–13 years in kinship and nonkinship foster care in Norway. Data were first collected in 2000, and then again in 2008. In year 2000 (T1), a total of 246 children (in 214 foster homes) in state

custody, aged 4–13, with a minimum stay of one year in kinship and nonkinship foster care, participated in the quantitative study (Holtan et al., 2005).

3.1.1. T1 participants and recruiting process

Kinship placements were not registered at the state level in Norway, thus information had to be collected from local municipalities. From a total of 436 child-protection authorities, 238 kinship foster families were found within 104 municipalities. Of these, foster parents from 234 placements were asked to participate in the study. The final sample of kinship foster children at T1 consisted of 135 children in 124 foster homes, representing a response rate of 57.7%. Child Behavior Checklist (CBCL; see 3.2.1 below for details) information on 122 of these children was obtained.

For the sample of nonkinship foster children at T1, all nonkinship foster parents (192) in three of Norway's 19 counties, geographically spread, were asked to participate in the study. The foster parents of 111 children in 90 foster homes participated, representing a response rate of 57.8%. CBCL information was obtained from all 111 children.

At T1, the unit of analysis was one child per foster home, with 124 in kinship and 90 in nonkinship foster care. There were no differences between the kinship and nonkinship samples with regards to age, gender, duration in present care and age at first removal. The mean age of the kinship sample was 8.9 years (SD = 2.7) and of the nonkinship sample 9.5 years (SD = 3.0). The mean duration in present care of the kinship sample was 5.1 years (SD = 2.9) and of the nonkinship sample 5.7 years (SD = 3.0). The mean age at first removal into foster care for both samples was 3.1 years (SD = 2.7 in kinship, SD = 2.8 in nonkinship).

In both the kinship and nonkinship samples, the child-welfare authorities sent written information and a letter of consent to the foster parents. The foster parents sent their consent to the researchers, who administered the questionnaires.

In 2000 an additional qualitative sample was available with interviews with children (17), parents (14) and foster parents (16) (Holtan, 2008). In 2008 all T1 participants were asked to participate in a follow-up study (T2).

3.1.2. T2 recruiting process and participants

As a condition for approval of the study, we had to ask participants at T1 whether we could ask them again for participation at T2. Foster parents of 233 foster children (in 200 foster homes) gave their consent to be asked for participation at T2. Because we also included youths 16 years or older at T2, foster parents were asked to forward a letter of consent to the foster children. Forty-four youths filled out the questionnaire, and 12 were interviewed.

Information at T2 was obtained from 58.4% of the T1 children, including 56.5% kinship children and 60.6% of the nonkinship children.

3.2. Material

3.2.1. Data provided by foster parents

The main source of data for this article is the questionnaire filled out by foster parents at T1 and T2. Questions at T1 included: (1) Care experiences of children placed in care (e.g., age at first removal, number of moves, duration in care); (2) Children's family contact (e.g., visits to biological parents and siblings, location of foster home and birth home, parental appeal against placement decision); (3) Caregiver characteristics (e.g., age, marital status, education, income, health, degree of relatedness between child and caregivers); and (4) Social services received (type and number of professional support services). At T2, questions about placement history between T1 and T2 were added. Some of the questions were open-ended, asking the foster parents to describe relational aspects, e.g.: "How would you describe your relationship with the foster child today?"

When data were collected by interview instead of questionnaire, the interview covered the same topics as the questionnaire.

The CBCL was completed by foster parents if the child was below the age of 18 years. The CBCL is a 120-item questionnaire which reflects the parent's view of the child's behavior during the previous six months (Achenbach, 1991). It provides a Total Problem score and two broadband scales (Internalizing, Externalizing). In this study we only use the Total Problem score in the analysis.

3.2.2. Data provided by foster youth

Data were collected from foster children at T2 through questionnaire, interview and Adult Self-Report (for those above 18 years old). Both questionnaire and interview asked questions about foster care and history, relationship to family and foster family, education, work and child protection support.

3.2.3. Overview of data and participants

The main sources of data for this article were the questionnaire (or interview) and CBCL from foster parents at T1 and again at T2 (129). We supplied the analysis with T1 foster parent questionnaire and T2 youth interview and questionnaire (n=5) for those where foster parent data were missing on T2. In addition, because the foster parent questionnaire was missing for T1 and T2 in two cases, analysis of these two cases is based on the T1 foster-parent interview and a T2 youth interview. See Table 1 for complete details about data sources at T1 and T2.

The reason for including data other than the foster parent questionnaire information was to report data about foster-care disruption in as many cases as possible (in order to decrease the drop-out/attrition rate).

Participants at T2 were 136 children from 117 foster homes. Their mean age was 17.7 years (SD = 2.8). There were 77 boys and 59 girls, with placement experience from kinship foster care (n = 74) and nonkinship foster care (n = 62).

The Regional Ethical Committee and the Norwegian Data Inspectorate approved the study. A decision by the Norwegian Data Inspectorate forbade questions concerning reasons for placement, since biological parents had not been asked for consent.

3.3. Statistical analysis

Participation/non-participation at T2 was evaluated using generalized linear mixed model analysis using the GLIMMIX procedure in SAS, using a logit link. Since there are 30 families in this sample with two or three foster children, some dependency is introduced in the participation status. This might affect the results of the attrition analysis.

All of the following variables were entered as fixed effects in the attrition analysis: age at first placement, number of years in this foster placement, number of earlier placements, child gender, mother's education and whether or not the foster parents had their own children.

None of the predictors were significantly associated with participation status. For 28 of the 30 families with more than one child included in this investigation, the same participation status prevailed for all children. However, it is likely that the reason for this is related

Table 1Data source and participants at T1 and T2 within kinship and nonkinship placements.

Type of data at T1 and T2			Type of placement			
T1 data	T2 data	Kin	Nonkin	Total		
Foster parent questionnaire	Foster parents questionnaire	63	66	129		
Foster parent questionnaire	Foster youth interview	3	0	3		
Foster parent questionnaire	Foster youth questionnaire + interview	2	0	2		
Foster parent interview Youth interview Final sample (including foster parents and youth)			0 66	2 136		

to motivation or opportunity to participate, and not the selected predictors of participation at T2.

Associations between disruption and explanatory variables were studied by the generalized linear mixed model analysis, taking the predictors one by one. Probable within-family dependency in the disruption status is handled by the generalized linear mixed model analysis. The selection of variables for the analysis was based on previous research findings.

4. Results

Of a total of 136 placements, 17 disrupted (12.5%). In the generalized linear mixed model analysis, the predominant variables from the literature review were included. These were: *children's background variables* such as age at first placement, length of stay within the T1 foster home and number of placements prior to the T1 placement. Among *placement-related factors* we included type of placement, presence of foster parents' own children, biological sibling in foster home and whether foster home and birth home were located in the same local community at T1. The variable visits to biological parents was set to monthly or more, as the qualitative study of Terling-Watt (2001) revealed that contact with biological parents was a stressor. Among caregiver demographics we included marital status. In addition to predominant variables from the literature review we added two variables of our interest: child gender and educational level of foster home.

Associations between disruption and explanatory variables are presented in Table 2.

In this generalized linear mixed model analysis, no variables were significantly related to disruption. Mean stay in the foster home for the disrupted group was 8.9 years (SD = 3.6 years). Mean age at first placement in out-of-home care was 4.6 (SD = 3.3), and mean age at placement in the T1 foster home was 5.1 (SD = 0.5). Mean number of placements before T1 was 0.5 (SD = 0.5). The mean score for CBCL Total Problem was 28.6 (SD = 22.9) compared to 28.1 (SD = 22.4) for the stability (i.e., non-disrupted) group.

At T1, the foster parents were asked where they believed the child would reside during their adolescence. Of the disrupted cases, seven kinship foster parents and six nonkinship foster parents answered "in their home until adulthood."

As Table 3 shows, most foster children from disrupted placements moved to residential care. Within the disrupted *kinship* placement group, the children moved equally to other relatives, to nonkinship foster families and to residential care. Most children from the *nonkinship* group moved to residential care, and only a few to another nonkinship foster family.

Of the disrupted kinship placements, four were placed with the mother's side of the family and two with the father's side, with grandparents (3), aunts (2) and mother's cousin (1).

The result of the formal disruption of the foster care arrangement differed according to the relationship between foster family and foster child. For some, the formal disruption did not influence the social relationship; the child maintained a relationship with the foster family. For others, the social relationship ended totally, while for some the content of the social relationship changed and the durability became uncertain.

An example of the maintenance of family relations after formal disruption and removal was a young girl moving from her grandmother's home to that of her aunt and uncle in order to attend high school. The relocation served multiple purposes. First, it involved moving from a remote area to a town with access to a high school and leisure activities. Second, it provided respite for the grandmother. The grandmother describes the young girl's family position:

"The family has agreed on giving her as good upbringing/childhood as possible (...) I am, and we were grateful that we succeeded after

Table 2Predictors associated with disruption. Results of generalized linear mixed model analysis.

			Bivariate analysis		
	N	%	OR	95% CI	
Children's background					
Gender			0.89	(0.22, 3.66)	
Boys	9	11.7			
Girls	8	13.6			
Age at first placement			1.21	(0.99, 1.47)	
(Age at placement T1)			1.17	(0.97, 1.41)	
Length of stay T1 foster home			0.89	(0.71, 1.12)	
Number of placements prior to T1			1.20	(0.59, 2.46)	
Earlier placements			1.26	(0.39, 4.07)	
Yes	9	13.6			
No	8	11.4			
Behavior problems (CBCL) T1			1.00	(0.98, 1.03)	
Placement related factors					
Placement					
Kinship	7	9.5	0.55	(0.18, 1.66)	
Nonkinship	10	16.1			
Foster parents have their own children			1.33	(0.44, 4.01)	
Yes	8	14.5			
No	9	11.1			
Biological sibling in foster home			0.37	(0.09, 1.50)	
Yes	3	6.5			
No	14	15.6			
Visits to biological parents (monthly or more)			0.62	(0.16, 2.47)	
Yes	4	8.7			
No	11	13.6			
Foster home and birth home in same local community			0.71	(0.24, 2.09)	
Yes	6	10.2			
No	10	13.7			
Caregiver demographics					
Marital status caregivers			1.96	(0.56, 6.81)	
Single	5	19.2			
Married/cohabitation	12	10.9			
Max. education caregivers			0.35	(0.11, 1.13)	
≤12 years	7	8.2			
>12 years	9	19.6			

OR = Odds Ratio.

95% CI = 95% Confidence Interval

^a Estimated by logistic regression because of empty cell (disruption, same community, and sibling).

some controversy with child welfare to keep X in the family. She has thus been able to have normal contact with her mother's family: uncles, aunts, cousins etc. ... Moreover, she has had contact with her mother as much that it was safe for the period she was ill. She has been a great pleasure for Grandpa and me and the rest of the family over the years."

The formal disruption of this placement was a relocation which did not change the social relationships or the position of the child within a family network.

For others the formal disruption caused a breakdown of social relations. A boy moved to his nonkinship foster family at the age of seven, staying there until he was 17 years old. He then moved to another nonkinship foster family. There was no contact with the first

Table 3Where did they move after disruption?

	Kin		Nonkin			
	N	%	N	%	Total	
Kinship foster home	2	28.6	0		2	11.8
Nonkinship foster home	2	28.6	2	20.0	4	23.5
Residential care	3	42.9	8	80.0	11	64.7
Total	7	100.1	10	100.0	17	100.0

family after the removal. The first foster father describes the reason for the disruption:

"The child's relationship to the mother always made unbearable situations with untruths. This developed the last nine months after we got a new caseworker. (...) The child protection caseworker destroyed the relationships. She was inexperienced and should never work in child protection. She took side with his mother and believed all the stories, large and small."

When asked "what do you think the boy thinks about his relationship to the foster family?" the family answered that they thought he believed that he was part of the family. Their perspective, however, was that he was completely outside the family, with no family relationship. For this youth the formal disruption ended his social and family relations with the family he had lived with from the age of seven to age 17.

An example of formal disruption where the social relationship became unpredictable and uncertain was a boy placed in nonkinship foster care at age one. At the age of 15 he moved to residential care. After removal, contact between the young boy and the foster parents occurred about once a month. The foster parents stated that they had wanted the removal. They thought the boy both felt them to be his closest family and yet felt himself to be completely outside the foster family. For them, however, he was "a little off" their family due to

"threatening and negative behavior at home that created fear and distance (...) Sad that he has made some bad choices, hope it changes in the future. It is very dependent on the choices he makes now, if he manages to refrain from drug addiction and violence."

The formal disruption caused uncertainty in the content and the durability of the social relationship between the youth and the foster family. Future family relations might depend on the resources of the foster child, which may be poor.

5. Discussion

Our sample consists of placements that have "survived" through previous challenges. The specific character of the sample studied is long-term placements that disrupted after a mean length of 8.9 years within the foster home. The disruption rate of 12.5% is low compared with findings from previous research. The reason for the low incidence of disruption compared to research findings might be the fact that samples of research on stability generally are composed of children placed for a shorter time, as the highest risk of disruption is during the first six months of placement (Oosterman et al., 2007).

A main principle of child-protection policies in Norway is the best interest of the child. Maintaining stability and preventing disruption is a major aim within foster-care policy and practice, believed to be in the best interest of the child (Barth, 1998; Berridge & Cleaver, 1987; Bullock, Little, & Millham, 1993; Marsh & Triseliotis, 1993; Millham, 1986). In our analysis of children with long-term placement in kinship and nonkinship foster care, none of the predominant variables from previous literature were significantly associated with disruption.

Although we found no significant association between child behavior and disruption, the mean score of CBCL Total Problem was 28.6 compared to 14.4 found in a Swedish sample of schoolchildren (6–16 years) N = 1314 (Larsson & Frisk, 1999).

Some studies find that the stability of kinship foster care is linked to the stability of the initial placement (Holtan et al., 2005; Koh & Testa, 2008; Lernihan & Kelly, 2006; Strijker et al., 2008). Kinship placement appeared more stable than nonkinship placement at T1, as children in kinship foster care had fewer previous placements than children in nonkinship placements before the T1 placement (Holtan et al., 2005). However, at T2, stability did not differ between types of placement. When kinship placements broke down after

several years, the stability rate between kinship and nonkinship placements did not differ. In accordance with our finding, Koh and Testa (2008) report from their study of matched samples in kinship and nonkinship foster homes that the initial placement was more stable in kinship placement even after controlling for a range of characteristics. They suggest that kinship placement seems to be associated with factors related to altruism and family duty. Pointing in the same direction as our study, they found that the two types of placements were similar in their risk of more than two placements within a year, meaning that children in nonkinship foster homes were more likely to move out of their first placement but had no higher risk of experiencing a third move within a year. It might be suggested that when children remain with the foster family over time, a similar pattern of relationships seems to develop in nonkinship foster families as the initial kinship bonds and relationships. However as our examples from the qualitative data have shown, a variety of social relationship patterns exist between foster child and foster family after the formal foster care disruption. Kinship foster care implies a network based on cultural values of solidarity, confidence and durability (Holtan, 2008), which may facilitate the maintenance of relationships after formal disruption.

Our study revealed no relational pattern within kinship placements that disrupted. We cannot confirm the findings of Lutman, Hunt, and Waterhouse (2009) from the UK, which indicated that placements with aunts and uncles were more likely to disrupt than those with grandparents.

In their systematic review, Oosterman et al. (2007) reported that the findings were contradictory when univariate and multivariate results were compared. The authors conclude that this might suggest that more insight into the processes leading up to placement disruption may be explored through causal models. As our study of long-term foster care placements did not replicate any of the previous research findings, we will add that there is a need for qualitative approaches in order to explore the process of inclusion or exclusion of children in long-term kinship and nonkinship foster care. At T1, all kinship foster parents believed that the child should grow up in their family, as did most of the nonkinship foster parents. Several years later, something might have gone wrong, leading to the dissolution of the foster family. This "something" might be unique for the actual placement, about which we lack information.

Although stability in foster-care placements is generally assumed to protect children from developmental and social problems later in life, we need to point out that this is based on the premise that foster caregivers are able to meet the current needs of that particular child. This may not always be the case. In our study we lack information about the reasons for disruption. We know from studies from Norway (NOU: 23, 2004), Sweden (Statens offentliga Utredningar, 2011) and the UK (Waterhouse, Clough, & Le Fleming, 2000) that abuse and neglect of children in state custody occur. Findings from studies of maltreatment in foster care show that children in nonkinship foster care were more likely than children in kinship foster care to experience maltreatment (Benedict, Zuravin, Somerfield, & Brandt, 1996; Winokur, Crawford, Longobardi, & Valentine, 2008; Zuravin, Benedict, & Somerfield, 1993). There might also be situations other than maltreatment in which a change in placement represents an improvement of care. In a Norwegian study, Christiansen (2011) in fact found that disrupted placements in most cases had actually been developmentally beneficial for the child and that a lasting relationship with the foster family members persisted after the child had moved out of the family.

Change in foster care is also sometimes requested by the child. Because children are increasingly likely to play a part in the decision-making process leading to changes in foster-care placement, future studies should also take children's views into account when trying to explain why some placements disrupt.

The strength of the study is both its longitudinal design as well as the geographical area of the study. Since there is not much research on the stability of long-term placements within the Nordic welfare state model, the study is needed. As this study did not find any significant explanatory factors other than those known from the literature, it contributes to the field by calling attention to a need for other study designs as well as the need to consider other factors when trying to understand the phenomenon of stability and disruption.

5.1. Limitation

One major limitation is that the study was designed to analyze long-term effects of kinship and nonkinship foster care and was not set up especially to analyze stability and disruption. Because these data were not collected around the time of disruption, and because there was rather large variability in time lapse from T1 to disruption, the scores may not reflect the children's behavioral and social problems at the time of disruption. The rate of attrition at T2 was 41.6%. From the attrition analysis, we do not know whether data are missing at random or not. However, no significant differences between participants and non-participants were found, nor were any variables found that may be assumed to influence disruption status. Although no significant differences between participants and non-participants were identified, it is likely that some unknown factors associated with disruption also affected participation at T2.

For 129 children and youths, the foster parents were the only source of information, and their information could not be controlled for by second informants. However, since we asked the respondents twice (T1 and T2), information about placement history, placementrelated factors (e.g., type of placement and siblings) and social demographics of foster parents were controlled for.

5.2. Conclusions

Even if the disruption rate of 12.5% in this study seems low at first glance, it is important to add that the context of this study is a Nordic country, where long-term stable foster care rather than adoption is the goal for children in foster care. For children who have remained in foster care for many years, like the children in this study, relationships with the birth family might have been loosened, making the loss of a relationship with the foster family network more dramatic. There is nothing in the child-protection regulations in Norway that secures a relationship between a child and the disrupted foster family. These children might be "lost" in care. There is a discussion in Norway now to allow adoption for young children who will need care throughout their entire childhood (NOU:5, 2012).

Current research on disruption has major limitations. We need research that explores the quality of care, the process leading to disruption, the relationships between foster-family members and the foster child, the role of the child-protection services and the association between disruption and caregiver demographics. We suggest analysis grounded in the experiences of those involved. There also is a need to analyze stability and disruption within kinship placements across subgroups (e.g., grandparents, aunts, maternal or paternal placements).

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