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A phenomenological study of foster carers' experiences of formal and informal support

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A Phenomenological study of Foster Carers' Experiences of Formal and Informal Support

Tara Cavazzi

A report submitted in Partial Fulfilment of the Requirements for the Award of Bachelor of
Arts (Honours)

Faculty of Computing, Health and Science

Edith Cowan University

2008

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Abstract

Foster children are showing a higher prevalence of maladaptive physical and psychosocial issues than ever before. The presence of these issues is predictive of foster placement instability, which is compounded by the inability to recruit and retain foster carers. As placement disruption can have numerous consequences, the factors that influence placement stability have been reviewed. Carer strain is a widespread destabilizing factor, which is augmented by many factors including the perceived level of practical and emotional support from both formal and informal networks. Formal support is linked to placement stability, although carers generally feel undervalued and unappreciated by formal networks. Alternatively, informal networks enhance carer psychosocial wellbeing and improve placement stability. However from the literature reviewed, there appears to be a limited understanding of the influence that both formal and informal support networks have on a foster carers' ability to provide a nurturing foster home.

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Research has shown that in recent years home-based foster care has become the primary mode of providing a safe, secure and nurturing environment for children placed under a protection order in Australia (Australian Institute of Health and Welfare [AIHW], 2008; Butcher, 2005; McHugh, 2005). These children have often witnessed parental substance misuse and domestic violence, and/or been subject to neglect, abandonment, and physical, sexual and emotional abuse (AIHW; Cheers, Kufeldt, Klein & Rideout, 2007; Osborn, Delfabbro & Barber, 2008). Due to these significant disruptions in the formative years of development, children in care have multiple and complex issues (Hojer, 2007; O'Neill, 2000), although there is a concern that these issues are becoming even more complex.

Current research shows that when compared to foster children in 1970, foster children are exhibiting a much higher frequency of maladaptive physical and psychosocial issues than seen previously (Ainsworth, 1997; Crawford, 2006; Gilbertson & Barber, 2003; Klee, Kronstadt & Zlotnick, 1997; O'Neill, 2000; Thorpe, 2002). When compared to non-foster children, foster children are significantly more likely to have early development disruption evident in poorer academic outcomes (Klee, et al.), learning difficulties (Wise, 1999), physical disabilities (Crawford), developmental delays (Crawford; Klee, et al.) and mental disorders (Stanley, Riordan & Alaszewski, 2005; Tarren-Sweeney & Hazell, 2006; Minnis, Everett, Pelosi, Dunn & Knapp, 2006).

Furthermore, children in care are significantly overrepresented in disability, psychiatric and educational support services, and criminal justice systems (Briggs & Broadhurst, 2005; Cashmore & Paxman, 2006; Cheers, et al., 2007; Cuskelly, et al., 2005; Klee, et al., 1997; O'Neill, 2000). Foster children also show a high frequency of oppositional, hyperactive, aggressive, antisocial and violent behaviours which include animal torture,

lying, theft, destruction and damage to property, threats, pyromania, repetitive self-harm, inappropriate sexual behaviours, verbal abuse and physical abuse which, on occasion, has led to physical harm to the foster care family (Gilbertson & Barber, 2003; Hojer, 2007; Sallnas, Vinnerljung & Westermarck, 2004; Tadros, 2003).

To compound the concerns above, there is a recursive loop, where foster children who frequently display such maladaptive patterns of behaviour are significantly more likely to have unstable foster placements (also referred to as placement disruption), which can further exacerbate the child's pre-existing emotional and behavioural problems (Barber, Delfabbro & Cooper, 2001; Brown, Bednar & Sigvaldason, 2007; Crawford, 2006; Fernandez, 2007; Hojer, 2007; Osborn, et al., 2008; Stanley, et al., 2005; Sinclair & Wilson, 2003). Placement disruption often damages the child's attachments to significant others, such as their primary carers, school peers and other social networks, which is likely to have multiple repercussions throughout the child's life (Butler & Charles, 1999; Fernandez; Andersson, 2005; O'Neill, 2000; Lindheim & Dozier, 2007). Additionally, the child's continuity of physical and mental health service provision is often interrupted during a placement disruption, which can delay the attainment of positive physical, psychological and social health outcomes (Butler & Charles, 1999; Cashmore & Paxman, 2006; Pasztor, Hollinger, Inkelas & Halfon, 2006; Sallnas, et al., 2004; Schofield, 2002; Whiting & Lee, 2003).

Placement disruption in foster care can also have a negative impact on the child's psychosocial outcomes into adulthood (Stein, 2006). Australian adults who had multiple placement breakdowns while in foster care were significantly less likely to attain average education standards, and were more likely to be unemployed, dependent on welfare benefits, have a criminal history, be homeless and were more prevalent in psychiatric services when compared to non-fostered adults (Cashmore & Paxman, 2006; Gilbertson & Barber, 2003; O'Neill, 2000). Unfortunately, this has also been found in both British (Wade & Dixon, 2006;

Stein) and Swedish foster children who have aged out of the out-of-home care system (Andersson, 2005).

As foster children are exposed to multiple high-risk situations before being taken into care, they are already at a higher risk of experiencing lower psychosocial outcomes than non-fostered children; and if they experience multiple placement disruptions, this risk is further increased (Brown, et al., 2007; Cashmore & Paxman, 2006; Crawford, 2006; Stein, 2006). Hence, to improve both the short and long-term psychosocial outcomes of children in care, the out-of-home care system needs to promote more stable and long-term foster placements (Cashmore, Higgins, Bromfield & Scott, 2006; Cheers, et al., 2007; McHugh, 2005). It is the factors that critically affect the stability of foster placements which are the focus of the present review.

Carer Experiences of Fostering

To gain a clearer understanding of how the out-of-home care system can increase the stability of foster placements, researchers have begun to examine how foster carers experience the role of fostering. Research has shown that carers frequently report a sense of fulfilment from fostering (Brown & Calder, 2000; Wilson, Fyson & Newstone, 2007), and often describe altruistic and internal motivations to foster. The most frequent motivations to foster include: a desire to assist children less fortunate, protect children from harm and provide a nurturing home for children in care. However there are also other, less common, motivations to foster, which include providing companionship for other biological children, allowing carers to continue performing home duties and supplementing the household income (Baum, Crase, & Crase, 2001; Colton, Roberts & Williams, 2008; Rodger, Cummings & Leschied, 2006; Wilson, et al.).

Nevertheless, carers have also emphasised the considerable strain that often accompanies the role of a foster carer (Cole & Eamon, 2007b; Nixon, 1997; O'Neill, 2006;

Petrie, 2007; Wilson, Sinclair & Gibbs, 2000). This strain is frequently derived from the demanding needs of the fostering role, which include controlling the maladaptive behaviours displayed by the foster children while simultaneously attempting to ensure the child's physical, psychological and social needs are met. Carer strain is an accumulation of both physical and emotional exhaustion, which can reduce a carers' capacity to effectively cope with the foster child and continue to provide a nurturing foster home (Cole & Eamon, 2007b; Delfabbro & Barber, 2003).

Research has indicated that carer strain is often influenced by the fostering environment. Semi-structured interviews with 11 British foster children and their carers indicated that foster homes that were once peaceful and calm had, following the placement of particular foster children, become hostile environments with frequent aggression and violence (Butler & Charles, 1999). These environments can be detrimental to the stability of the placement, with foster children who frequently display such maladaptive behaviours more likely to experience placement breakdowns (James, 2004; Lindheim & Dozier, 2007). Furthermore, these factors within the home environment can have a negative impact not only on the primary carer and the foster child, but also the entire foster family unit.

Research concerning the psychosocial functioning of foster family members has indicated that fostering places a high level of responsibility upon all family members who live in these environments, due to the demanding nature of fostering (Hojer, 2007; Moslehuddin, 1999; Nixon, 1997; Osborn, et al., 2008; Rhodes, Orme, Cox & Buehler, 2003; Tadros, 2003; Wilson, et al., 2007; Younes & Harp, 2007). This research has also shown that a high level of strain often exists in both the primary caregiver and other family members, such as the biological children of carers, who often assume greater responsibility than is age-appropriate. This strain can have detrimental effects for the entire foster family, which

promotes further strain on the primary carer, and consequently can contribute to placement breakdown (Denuweleare & Bracke, 2007; Hojer; Moslehuddin; Tadros; Younes & Harp).

In addition to the strain that develops from dealing with both the difficult behaviours displayed by foster children and facilitating the positive development of both foster children and other family members; carers also report considerable strain from negative influences from outside the foster home. Throughout the research literature there are reports of carers who have recalled significant strain from false allegations of abuse from, hostile confrontations with, and harassment from the foster child's biological parents (Briggs & Broadhurst, 2005; Brown, 2008; Butler & Charles, 1999; Cole & Eamon, 2007a; Denby, Rindfleisch & Bean, 1999; Farmer, Lipscombe & Moyers, 2005; Gilbertson & Barber, 2003; James, 2004; Wilson, et al., 2007; Wilson, et al., 2000). The foster child's contact with their biological parents can also influence their behaviour patterns and psychological grounding within the foster placement, which can have a negative effect not only on the child's long-term psychosocial health, but also caregiver strain and the stability of the foster placement (Farmer, et al.; James).

In addition to the strain derived from trying to adequately meet the foster children's complex needs and the stress from dealing with their birth parents, carers also perceive pressure from general society to uphold a high quality of parenting. Carers have reported considerable hostility and criticism from the general public in response to their fostering role, without sufficient attention given to the unique and demanding needs of the fostering role (Buehler, Rhodes, Orme & Cuddeback., 2006; Cuskelly et al., 2005; Farmer, et al., 2005; Hojer, 2007; Maclay, Bunce & Purves, 2006; Wilson, et al., 2000). These negative reactions from others external to the foster placement can often leave carers feeling unappreciated and unsupported (Farmer, et al.). The external influences that can negatively affect the foster placement, such as the child's contact with biological parents and the general society are of

great concern and further research is needed to advance current understandings concerning the impact that external influences can have on a carer's ability to provide a nurturing home for foster children.

The Need for Foster Carer Support

Throughout the literature, it has been highlighted that carers have a variety of needs, such as regular respite, formal assessment and intervention during placement crises, adequate initial and ongoing training throughout the fostering role, specialist support for children with special needs, monetary remuneration and adequate pre-placement consultation with the entire foster family (Briggs & Broadhurst, 2005; Brown, 2008; Brown & Calder, 2000; Colton, et al., 2008; Denby, et al., 1999; MacGregor, Rodger, Cummins & Leschied, 2006; Nixon, 1997; James, 2004). When these needs are adequately met, carer strain is often reduced, which often improves placement stability (Brown, Moraes & Mayhew, 2005; Cole & Eamon, 2007b; Farmer, et al., 2005; MacGregor, et al.; O'Neill, 2006; Rhodes, et al., 2003; Wilson, et al., 2000). However, the primary need of foster carers consistently emphasised throughout the literature is their need for practical and emotional support (Brown, et al., 2007; Cole & Eamon, 2007b; Cusack & Orr, 1999; Denby, et al.; Farmer, et al.; Fisher, Gibbs, Sinclair & Wilson, 2000; James; MacGregor, et al; Maclay, et al, 2006; Nixon; Smyth & McHugh, 2006; Wilson, et al., 2007).

A review by O' Neill (2006) indicated that a common thread among the social network theory and social exchange theory was that support is essentially a dynamic and fluid relationship where people listen, acknowledge, affirm and understand another individuals' perceptions and personal understandings. Research has shown that when carers perceived themselves as being adequately supported by others, they felt a greater sense of satisfaction and fulfilment in the caregiver role than those who felt unsupported (Cole & Eamon, 2007b; Fisher, et al., 2000; O'Neill, 2001; Petrie, 2007). This sense of fulfilment within the caregiver

role has been related to reduced carer strain, and more stable and long-term foster placements (Denby, et al., 1999; Farmer, et al., 2005; James, 2004; Nixon, 1997; MacGregor, et al., 2006). Research has shown that carers need a variety of support services, which range from both formal and professional services to informal and personal support networks (Maclay, et al., 2006; O'Neill).

Formal Support Networks

Considerable research has focused on the influence of formal networks, such as child welfare agencies and associated child welfare workers, in providing support for foster carers (Brown, 2008; Brown & Calder, 2000; Cashmore, et al., 2006; Denby, et al., 1999; Maclay, et al., 2006; McHugh, 2005; Nixon, 1997; O'Neill, 2001; Rodgers, et al., 2006). Regular support from formal networks has been linked to positive outcomes such as: greater carer satisfaction (Denby, et al.; Nixon; O'Neill, 2006), a greater probability of continuation in the fostering role (Wilson, et al., 2000; Smyth & McHugh, 2006; Hojer, 2007; Denby et al.), and more positive and long-term placement outcomes (Brown, et al., 2007; Cuskelly, et al., 2005; Fisher, et al., 2000; James, 2004; Nixon).

However research of foster carers' experiences to date has indicated that this support is rarely adequately supplied (Briggs & Broadhurst, 2005; Cusack & Orr, 1999; Maclay, et al., 2006; McHugh, 2005; Smyth & McHugh, 2006). In particular, qualitative research of foster carers' perceptions of formal support services has indicated that carers generally feel unsupported by welfare agencies (Brown, 2008; Fisher, et al., 2000; MacGregor, et al., 2006; Maclay, et al.; Nixon, 1997; O'Neill, 2001; 2006; Sanchirico, et al., 1998; Wilson, et al., 2007; Wilson, et al., 2000).

Findings from phenomenological research with British foster carers showed that foster carers wanted greater and more frequent telephone contact with child welfare workers, greater recognition of their role in the child's life, greater equality within the working

relationship, and more empathic child welfare staff (Fisher, et al., 2000). This research also showed that those who perceived their child welfare worker to be more accessible when needed were less likely to want to leave the foster care system (Fisher et al.). These findings are consistent with other qualitative research of foster carers and their experiences with formal support networks (Gilbertson & Barber, 2003; Maclay, et al., 2006; Nixon, 1997; O'Neill, 2001).

Qualitative research that examined carer perceptions of formal networks through semi-structured interviews and carer focus groups has found that carers often feel deceived by child welfare agencies from inadequate pre-placement consultation (Brown, 2008; MacGregor, et al., 2006; Wilson, et al., 2000). It was frequently reported during semi-structured interviews with 19 Australian foster carers that minimal information about the child and his/her history was given before the placement, which carers felt compromised their ability to provide a sensitive and nurturing foster placement (Gilbertson & Barber, 2003). This issue has been noted throughout research with Australian (Barber, et al., 2001; Briggs & Broadhurst, 2005), British (Fisher, et al., 2000; Maclay, et al., 2006; Sinclair & Wilson, 2005; Wilson, et al., 2007) and American foster carers (Cole & Eamon, 2007b; Sanchirico, et al., 1998).

This inadequacy of disclosing crucial information about foster children has, on occasion, been to the detriment of the foster family's physical safety. To illustrate, research has described examples of carers who were uninformed of foster children who had a history of harmful behaviours, such as pyromania, physical assault and inappropriate sexual behaviours, before the placement and as a result, the foster family experienced both physical and psychological harm (Briggs & Broadhurst, 2005; Gilbertson & Barber, 2003; Wilson, et al., 2007).

Foster carers have also reported a sense of exclusion and a lack of recognition by formal networks of their special and unique knowledge of their foster children during decision-making processes (Brown, 2008; Brown & Calder, 2000; Denby, et al., 1999; MacGregor, et al., 2006; Nixon, 1997; O'Neill, 2001; Rodger, et al., 2005; Wilson, et al., 2000). Foster carer's feelings of inferiority during decision-making processes with child welfare workers and other formal networks has been found throughout research of fostering (Briggs & Broadhurst, 2005; Brown, 2008; Butcher, 2005; Butler & Charles, 1999; Farmer et al., 2005; Fisher, et al., 2000; Gilbertson & Barber, 2003; Golding, 2004; Macdonald & Turner, 2005; O'Neill).

Phenomenological research has found that carers often feel that child welfare workers perceive them as second-best parents, without giving adequate recognition of the strong emotional attachments shared between the child and the foster family (Butler & Charles, 1999). From this omission by child welfare workers, the emotional bonds between carers and children were weakened, as carers often felt inferior with regards to placement issues, visitation and other decision-making processes about the child. This led carers to reconsider their decision to foster, which led to a lack of stability and grounding for the foster child (Butler & Charles). Instability is a major issue within the out-of-home care system, as previous placement instabilities are cited as a major predictor of future placement breakdown (Butler & Charles), and future psychosocial issues for foster children (Cashmore & Paxman, 2006; Osborn, et al., 2008; Stein, 2006; Wade & Dixon, 2006).

Research by Butler and Charles (1999) also indicated that carers perceived child welfare workers as considering the foster home a temporary and transitional arrangement. Emerging from this, carers often felt inferior and unappreciated by formal networks. To further compound this feeling of inferiority, carers described how child welfare workers placed less importance on supporting the foster family, instead elevating the foster child's

birth family to an idealistic, and often unrealistic, superior state. This was perceived by most carers and their foster children to be a negative cause of instability within the foster placement (Butler & Charles).

Qualitative research of Australian foster carers has shown that the way child welfare staff respond to foster carers can either promote or hinder placement stability (Gilbertson & Barber, 2003). Many carers reportedly felt that child welfare workers often undermined them and the foster placement during arguments by emphasising that the foster child could be replaced at any time. This was perceived to be fundamentally different to disagreements in birth families, as many disagreements that occur within a birth family are expected to be resolved within the family, without external influences. This was seen by carers to have a negative impact on both the stability of the foster placement and also the foster child's sense of security within the foster family (Gilbertson & Barber). These results of perceived destabilisation of foster placements by child welfare staff has been replicated in phenomenological research with British (Wilson, et al., 2000) and Canadian carers (Brown, et al., 2005; MacGregor, et al, 2006).

Although research has examined the negative influence that formal support networks can have on foster carer perceptions and placement stability, there has also been some examination of the positive aspects of the relationship between child welfare workers and foster carers. Thematic analysis was used to analyse semi-structured interviews with 10 Victorian foster carers in research by O'Neill (2006). This research indicated that foster carers wanted to have a child welfare worker who had both the warmth of a friend and the knowledge of a professional (O'Neill). Furthermore, the relationship between a child welfare worker and a foster carer needed to be both nurturing and understanding, with a child welfare worker who expressed a high level of empathy, genuineness and responsiveness to the carers' situation (O'Neill).

As seen in previous research, the manner in which a child welfare worker responds to the needs and concerns of the foster family unit during placement disruptions has a considerable influence, and often crystallizes, carers' attitudes towards child welfare workers and the out-of-home care system (Gilbertson & Barber, 2003; Fisher, et al., 2000). It has been shown that carers who perceived their child welfare worker as more empathic, genuine and responsive felt most supported, which was related to carers' continuation within the foster care system, both during and beyond the current placement (O'Neill, 2006; Wilson, et al., 2000).

Thus, qualitative researchers have identified some of the key factors within formal support networks that promote placement stability as emphasised by carers. These include frequent and regular contact with the child welfare worker, a continuity of child welfare staff, greater recognition of the fostering role, inclusion of the carer during decision-making processes and a greater congruence between the needs of the carer and the support services offered by the agency (Brown, 2008; Brown & Calder, 2000; Farmer, et al., 2005; Fisher, et al., 2000; MacGregor, et al, 2006; O'Neill, 2001; Sanchirico, et al., 1998). However, current research has suggested that these aforementioned factors emphasised by carers as essential to promote more stable and long-term foster placements are not often adequately supplied by foster placement agencies (Briggs & Broadhurst, 2005; McHugh, 2005; Smyth & McHugh, 2006).

Although research has shown that formal support does promote placement stability by reducing caregiver strain, British, American and Australian researchers have all concurred that until a foster placement reaches crisis point, child welfare agencies and associated staff are unlikely to pay the necessary attention to the placement (Cashmore et al., 2006; Cusack & Orr, 1999; Golding, 2004; McHugh, 2005; Sanchirico, et al., 2005). This is not surprising considering that both Australian and International researchers have indicated that the out-of-

home care system is under resourced and unstable, with a high turnover of staff, increasingly demanding case loads, and child welfare workers who rarely have sufficient knowledge about child development and family dynamics (Briggs & Broadhurst; Butcher, 2005; Cusack & Orr; Holland, Faulkner & Perez-del-Aguila, 2005; Klee, et al., 1997; O'Neill, 2000).

In summary, it appears that although formal support is predictive of greater carer satisfaction, reduced carer strain, and more stable foster placements, carers frequently report feeling inferior and generally unsupported by both child welfare workers and the out-of-home care system. To improve the stability of the out-of-home care system, there is a need for greater investigation of the experiences of foster carers and their feelings, perceptions and experiences about the role of formal support networks, in order to develop more appropriate formal support systems in the future.

Informal Support Networks

Research has shown that formal support networks are important in the reduction of carer strain and the stabilisation of foster placements. However, foster carers often perceive a lack of support from formal networks, and frequently develop informal support networks to account for this deficiency (Maclay, et al., 2006; Nixon, 1997). Consequently, recent research has begun to investigate the influence that foster carers' informal support networks can have on their ability to provide a nurturing and safe environment for foster children.

When compared to formal networks, informal support networks, such as peers, family members and friends, are perceived by many carers to be more influential in decreasing carer stress and enhancing psychosocial wellbeing (Brown, 2008; Denuwelaere & Bracke, 2007). This has been attributed to a foster carers' perception that informal support networks accept, acknowledge and understand the carer as an individual, rather than primarily as a foster carer (Briggs & Broadhurst, 2005; Butcher, 2005; Denuwelaere & Bracke; Farmer, et al., 2005; Maclay, et al., 2006; O'Neill, 2001).

Informal support provided by peers, family members and friends can enhance an individuals' perception of a supportive sense of community (Brown, 2008; Denuwelaere & Bracke, 2007). Being a part of a supportive community is especially important for foster carers, as the disclosure of experiential knowledge by others can facilitate a variety of different interpretations on the fostering situation, which allows carers to adapt their perceptions of past situations and change their responses to future circumstances (Brown; Cuskelly, et al., 2005; O'Neill, 2006; Petrie, 2007).

Qualitative research that examined the experiences of British foster carers indicated that when supportive informal networks were present, carers felt less strained and more satisfied in the fostering role (MacGregor, et al., 2006; Nixon, 1997). They also reported that informal networks provided both practical and emotional support, by engaging both the foster child and carer in a supportive social network which reduced caregiver strain (MacGregor, et al.). Additionally, Australian research has shown that carers who reported a greater level of engagement with informal support networks reported a more sensitive care giving style, greater commitment to the foster child, and greater engagement with the child's everyday activities (Cuskelly, et al., 2005). Carers who had greater informal support were also significantly less likely to have a placement breakdown (MacGregor, et al.).

Although research has indicated that regular contact with informal support networks has a positive influence on a carer's psychosocial wellbeing and placement stability, both Australian and International research has shown that social isolation frequently accompanies fostering, with carers often marginalised from their extended families and social groups (Briggs & Broadhurst, 2005; Nixon, 1997; Wilson, et al., 2007; Wilson et al., 2000; Cuskelly, et al., 2005). This marginalisation is often attributed to the child-centred role of a foster carer, as a large part of a foster carers' time is spent meeting the needs of the fostering role, which often leaves little time for social experiences with informal support networks (Brown, 2008;

Butcher, 2005; Cuskelly et al., 2005). Consequently, carers have reported feeling a sense of restriction in their social experiences, and are less likely to maintain social networks due to the demanding needs of fostering (Brown, 2008; Cusack & Orr, 1999; Cuskelly, et al.; Nixon, 1997). This lack of support and contact with informal support networks frequently contributes to carer strain, and a loss of psychosocial wellbeing (Brown, 2008; Butcher, 2005; Cole & Eamon., 2007a; 2007b; Farmer, et al., 2005; O'Neill, 2006; Rhodes, et al., 2003).

Alarmingly, Australian research has shown that the longer a carer has fostered, the less likely they are to have regular contact with informal support networks (Cuskelly, et al., 2005). Furthermore, research has indicated that carers who reported less contact with informal support networks reported greater exhaustion, felt less effective, less satisfied and less fulfilled in their care giving role (Cole & Eamon, 2007b; Cuskelly, et al.; Farmer, et al., 2005; MacGregor, et al., 2006). Carers who had less informal support networks also had a reduced capacity to provide a sensitive and nurturing home environment, and were more likely to leave the out-of-home care system (Cuskelly, et al.; Denby, et al., 1999; Farmer, et al., 2005; MacGregor, et al., 2006; Nixon, 1997; Osborn, et al., 2008).

In summary, the presence of informal support networks has both emotional and practical advantages for carers, which reduce carer strain and enhance the carer's level of psychosocial health. Hence, regular contact with informal support networks improves placement stability, and can prevent carers from leaving the out-of-home care system. Critically, this review has indicated that although informal networks appear to be beneficial, currently there is an insufficient understanding of the influence that informal support networks of foster carers may have on their ability to continue to foster.

The Current Situation of Foster Care

The current review has highlighted that both Australian and International research has shown that the out-of-home-care system is in crisis (Baum, et al., 2001; Colton, et al., 2008;

McHugh, 2005; Sanchirico, et al., 2005; Smyth & McHugh, 2006; Thorpe, 2002; Wise, 1999). During the past few decades, foster care has become a more demanding and challenging task which requires the carer to possess advanced skills in both parenting and child therapy (Smyth & McHugh). Carers must be able to not only parent the child, but also attend case reviews, attend court proceedings, and monitor and formally record the child's physical, psychological and social development (Smyth & McHugh). This advanced level of skill necessary to fulfil the fostering role is noted as a major factor that often hinders the retention of current carers and the recruitment of potential carers (Keogh & Svensson, 1999; Smyth & McHugh).

Recruitment and retainment of foster carers is proving a significant challenge to child welfare agencies, which is compounded by the escalating physical, psychological, and behavioural problems that have become increasingly common in foster children (Baum, et al., 2001; Smyth & McHugh, 2006). In the period between 1997-2007, the number of Australian children currently in care in Australia rose by 102% to a peak of almost 22,000 (AIHW, 2008). In this same period, the number of foster children in Western Australia increased by 330% (AIHW). Child welfare agencies are showing signs of strain, and are unlikely to be able to provide for the high level of need for child protective services in the future (Cashmore et al., 2006).

To ensure that children in the out-of-home care system are provided with the best possible standards of care, child welfare agencies have a duty to ensure that all foster carers are suitably trained, prepared and supported to enable them to provide an environment that promotes the child's optimal physical, psychological and social development (Briggs & Broadhurst, 2005; Cuskelly, et al., 2005). To enable carers to provide quality placements for foster children, both formal and informal support networks need to have an active

involvement in supporting both the carer and the foster placement (Brown, 2008; Denby, et al., 1999; MacDonald & Turner, 2005; McHugh, 2005; Wilson et al., 2000; O'Neill, 2006).

However, there currently appears to be a lack of support for foster carers, as in the literature reviewed there are only two support programs specifically developed to address the unique and complex needs of foster carers and the children in their care (Golding, 2004; Macdonald & Turner, 2005). These support programs were both developed in the United Kingdom, and therefore, the current review has indicated that the need for carer support services in Australia does not appear to have been met adequately (Briggs & Broadhurst, 2005; Butcher, 2005; McHugh, 2005; O'Neill, 2006).

Conclusion and Future Research Directions

There is a large body of research that has investigated the experiences of foster carers and formal support networks (Briggs & Broadhurst, 2005; Butler & Charles, 1999; Cole & Eamon, 2007a; 2007b; Cusack & Orr, 1999; Denby, et al., 1999; Farmer, et al., 2005; Fisher, et al., 2000; Gilbertson & Barber, 2003; James, 2004; O'Neill, 2006; Sanchirico, et al., 2005; Smyth & McHugh, 2006; Wilson, et al., 2000; Wilson, et al., 2007), although there are only a few studies which have investigated the influence that informal support networks have on the fostering experience (Cuskelly, et al., 2005; MacGregor, et al., 2006; Maclay, et al., 2006). Furthermore, current research perspectives of fostering and informal support networks are derived from British research (MacGregor, et al.; Maclay, et al.), and there is a need to extend research to develop current understandings of foster carer experiences in the Australian setting.

Although it appears from previous research that both formal and informal support networks can reduce caregiver strain, little is known about how these support networks interact with one another and how they are perceived by carers. It is hoped that this review will encourage research to extend the current understandings of the intricacies of the

Australian out-of-home care system and enable the development of more comprehensive support services for Australian foster carers. A clearer understanding of how formal and informal support networks can potentially assist or hinder a foster carers' ability to provide a safe and nurturing environment can be used to facilitate the development and expansion of more inclusive formal support services and informal social networking opportunities for Australian foster carers to improve their capacity to provide a safe and nurturing foster home for children in foster care.

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A Phenomenological study of Foster Carers' Experiences of Formal and Informal Support

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A report submitted in Partial Fulfillment of the Requirements for the Award of Bachelor of

Arts (Psychology) Honours

Faculty of Computing, Health and Science

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Submitted: October 2008

Abstract

The number of children in foster care has increased significantly, which is compounded by the inability to recruit and retain carers. Previous research has shown that formal and informal support can improve carer retention, although little research has explored this in Australia. The present study used a phenomenological approach with seven carers through semi-structured interviews. Thematic analysis indicated that carers derived satisfaction from fostering, although this was hindered by child behaviour and biological parents. Carers also felt unsupported and unappreciated by formal networks, which manifested through issues such as: inadequate child-information, irregular contact, exclusion from decision-making and unacknowledged attachments during placement termination. With informal support, carers described feeling socially restricted and often received criticism, although some carers received positive responses from informal networks, and emphasised the need for contact with other carers. These findings highlight the importance of formal and informal support in reducing carer strain and improving carer retention.

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Submitted: October 2008

A Phenomenological study of Foster Carers' Experiences of Formal and Informal Support

When children are unable to live with their biological parents because of abuse or neglect, they are placed in the out-of-home care system, and predominantly in foster care (AIHW, 2008; Colton, Roberts & Williams, 2008). There has been a significant increase in the number of children coming into care, who appear to have more physical and psychosocial issues than seen in previous foster children (AIHW; Ainsworth, 1997; Crawford, 2006; Gilbertson & Barber, 2003; Klee, Kronstadt & Zlotnick, 1997). Additionally, children who have multifaceted physical and psychosocial issues are more likely to experience placement breakdown (Barber, Delfabbro & Cooper, 2001; Delfabbro & Barber, 2003; Gilbertson & Barber; James, 2004; Osborn, Delfabbro, & Barber, 2008), which can further exacerbate their pre-existing emotional and behavioural issues (Crawford; Minnis, Everett, Pelosi, Dunn, & Knapp, 2006; Tarren-Sweeney & Hazell, 2006), and have multiple repercussions throughout their life (Cashmore & Paxman, 2006; Osborn, et al.; Stein, 2006; Wade & Dixon, 2006). Hence, it is essential to understand how we can provide these children with safe and nurturing foster placements to promote the attainment of positive physical and psychosocial health outcomes.

However, a significant barrier to achieving these outcomes is the difficulty in recruiting and retaining foster carers (Briggs & Broadhurst, 2005; Colton, et al., 2008; McHugh, 2005). Fostering is often accompanied by considerable strain, which has been linked to placement breakdown (Farmer, Lipscombe & Moyers, 2005; Rhodes, Orme, Cox, & Buehler, 2003; Wilson, Sinclair, & Gibbs, 2000). This strain is often accumulated from the everyday difficulties inherent in providing care for children who have complex physical and psychosocial issues. Moreover, carer strain is also influenced by the foster child's biological parents, who often criticize carers about their provision of care (Briggs & Broadhurst; McHugh, 2007; Moyers, Farmer, & Lipscombe, 2006; Wilson, et al.). However, there does

not appear to be any published qualitative data of the lived experiences of Australian carers; hence further qualitative investigation is needed.

Extant research has indicated the major factor that influences carer retention is their perceived level of support from formal networks, such as child-welfare agencies and associated staff (Briggs & Broadhurst, 2005; Brown, 2008; Brown & Calder, 2000; Brown, Moraes & Mayhew, 2005; Butler & Charles, 1999; Cole & Eamon, 2007; Denby, Rindfleisch & Bean, 1999; Farmer, et al., 2005; Wilson, et al., 2000). Unfortunately, this support is rarely sufficiently supplied by formal networks, which can permeate through a range of factors including: inadequate disclosure of child information, infrequent contact, exclusion during decision-making processes, and being regarded as inferior when compared to biological parents (Briggs & Broadhurst; Butler & Charles; Gilbertson & Barber, 2003; Maclay, et al.; McHugh, 2007; Nixon; Sanchirico, et al.). Evidently, there appears to be a significant deficiency in formal support, although the majority of this research is quantitative and based on British carers, and as the out-of-home care systems of Britain and Australia vary (Colton, et al., 2008; McHugh, 2005; 2007), it would be beneficial to qualitatively investigate Australian carers' experiences of formal support.

Recent research has indicated that although foster carers often feel unsupported by formal networks, they frequently develop informal support networks to account for this deficiency (Maclay, et al., 2006). Informal support networks, such as family and friends, appear to have multiple benefits for carers, by increasing their satisfaction in the fostering role, reducing strain, improving psychosocial wellbeing, which have all been linked to an increased commitment to fostering (Brown, 2008; Cuskelly, et al., 2005; Denuwelaere & Bracke, 2007; MacGregor, et al., 2006). Consequently, it appears that informal support networks provide vital support for carers; although this finding is preliminary, and has not been explored qualitatively in the Australian setting.

Hence, the present research aimed to extend previous research and posit the following research questions:

1. What are the lived experiences of foster carers?
2. How do formal support networks influence the experiences of foster carers?
3. Do informal support networks have an influence on the fostering experience?

Method

Research Methodology

Phenomenology as a theoretical orientation was founded by Husserl (as cited in Crowell, 2002), who described phenomenology as the examination of an individuals' transcendental and subjective meanings and understandings derived from their relative experiences of a phenomenon (Crowell; van Manen, 2006). The descriptive form of phenomenology aims to capture the eidetic essence of a phenomenon, and express this with rich and illuminating descriptions, to allow for transcendental interpretations and understandings (Caelli, 2001; Lopez & Willis, 2004; Starks & Trinidad, 2007).

A phenomenological methodology was chosen for the present study as it allowed an insight into the private and subjective understandings and experiences of foster carers (Kopala & Suzuki, 1999; Lopez & Willis, 2004). Furthermore, as phenomenology invites subjective meanings, these were used to form an eidetic essence of fostering. As the formation of an essence extends beyond tangible concepts, it was anticipated that this research would extend previous conceptualizations of the fostering phenomenon.

Participants

During planning, it was intended that 8-10 participants would be recruited through a formal support network for foster carers. However, it appears that foster care is a highly political topic, as there was an inability to obtain such a network (see Appendix A for more information). Therefore, as the researcher was a registered foster carer, a snowball method of

recruitment was used through informal contacts of the researcher. Consequently, participants consisted of four carers who cared for unrelated children, two kinship carers who cared for biologically related children, and one respite carer who cared for children on a brief time-limited placement. These carers were all supervised by a government child-welfare agency.

Data Collection

The researcher initiated contact with potential participants via telephone through personal networks. Participants were given a verbal summary of the research and posted an information letter (Appendix B). If interested, participants were required to contact the researcher to arrange a suitable time and place for the interviews. Before the interviews commenced, the researcher re-iterated that participation was voluntary, and asked participants to read and sign the consent form (Appendix C).

The interviews were conducted using a semi-structured interview schedule (Appendix D), which allowed a natural pattern of conversation, where participants shared their experiences of fostering with minimal questioning by the researcher (Burgess-Limerick & Burgess-Limerick, 1998). The interview schedule was based directly on themes highlighted in previous research, with five main questions, followed by probes if further elaboration or clarity was needed. These questions covered topics such as everyday experiences of caring (Could you tell me about a typical day?); the main issues carers have (From your experience, could you tell me about the main issues that carers face?); formal support (Do you feel supported in your role as a carer?) and informal support (How do you feel others, such as family and friends, perceive your fostering?), followed by probes for elaboration or clarification (Could you tell me a bit more about that?).

The interviews were conducted over a period of two months, and each interview took between 45-60 minutes. All interviews were audio-recorded and later transcribed, allowing the researcher to focus on interview content, rather than transcription.

Transparency and Integrity

To show transparency of the current study, the researcher used a technique known as bracketing, which aims to hold in abeyance the researchers' theoretical orientation, pre-conceptions, judgments, assumptions and potential biases of a phenomenon and suspend these from the information disclosed by participants' (Crotty, 1996; Fossey, Harvey, McDermott & Davidson, 2002; Gearing, 2004; Kopala & Suzuki, 1999). By allowing for conscious acknowledgement and self-awareness of potential biases, this reduces the possible distortion of the analysis and interpretation of findings, and hence improves the trustworthiness of the data (Caelli, 2001; Cutcliffe & McKenna, 1999; Finlay, 2008).

The most common process of bracketing involves an audit trail, which was employed in the present research (Appendix A). The audit trail documented the continual evolvement of the researchers' understandings of fostering, which facilitated greater clarity and focus on the participants' experiences. By allowing for minimal influence from the researcher through reflexivity and critical analysis, an eidetic essence of fostering in its natural state was developed without externally imposed interpretations (Gearing, 2004).

Although an audit trail is widely used in phenomenological research, it needs to be acknowledged that bracketing is a complex process, and total objectivity is not possible due to the researcher being inherently embedded in the social world (Ahern, 1999; Cutcliffe & McKenna, 1999; Finlay, 2008; Gearing, 2004). However, an audit trail does provide greater transparency, and hence trustworthiness, of the research process (Gearing).

Ethical Considerations

Participants were informed at initial contact that participation was voluntary, and they could withdraw from the study at any time and all accompanying information would be excluded from the analysis. Furthermore, it was stated that participation was confidential, with all recorded data erased following transcription, and transcripts de-identified. Following

this, participants were required to read and sign the consent form (Appendix C) before the interviews. Although unlikely, this research may have surfaced some unresolved issues, hence participants were all provided with a list of professional support services (Appendix E). Participants were also able to obtain a copy of the final research report following revision.

Data Analysis

The analysis of the present data follows a thematic analysis style similar to DeMol and Buysse (2008). Firstly, each interview transcription was read several times, and analysed for salient quotes, which were then organized into sub-themes. Once each transcription was individually analysed, the sub-themes were collated into a single document, where sub-themes were then clustered to form main themes. Following this clustering, each transcription was revised, and further amendments were made to the themes to ensure accurate reflection of raw data. The process of continual modification and amendment of the themes was documented in the audit trail (Appendix A), which also describes the researchers' responses and reflections of modifications made to the analysis.

Recursive and repetitive examination of the raw data and subsequent interpretations were used with direct quotes embedded to increase the integrity of interpretations (Watson & Girard, 2004). Furthermore, to demonstrate authenticity and capture the complexity of the fostering experience, any divergence between participants was included in the analysis (Whittemore, Chase & Mandle, 2001).

Findings and Interpretations

The following section contains three major themes, which each include a number of sub-themes, where each is described with quotes embedded to illustrate, and compared to previous research. The conceptualization of themes and concepts are presented in Table 1.

Table 1.

Summary of themes and sub-themes of Foster Carers' experiences and perceptions of support.

Theme	Sub-theme
Experiences of Fostering	The positive aspects of fostering
	The negative aspects of fostering
Formal Support Networks	Disclosure of child information
	Contact and crisis response
	Decision-making processes
	Acknowledgement of attachments during placement termination
Informal Support Networks	Social restriction and isolation
	Responses from informal networks
	Contact with other carers

Carer Experiences of Fostering

The Positive Aspects of Fostering

Deriving a sense of satisfaction from fostering has been reported in previous Australian (Delfabbro & Barber, 2003; McHugh, 2007), Canadian (MacGregor, et al., 2006; Rodgers, et al., 2006), American (Denby, et al., 1999; Tyebjee, 2003) and British research (Fisher, et al., 2000; Maclay, et al., 2006; Wilson, Fyson & Newstone, 2007). Consistent with this, carers reportedly enjoyed the fostering role, as it allowed them to positively help others “...I feel like I'm adding to the community...” and “...I feel like I'm doing good for someone, like I'm saving someone from being on the streets...” They also discussed the sense of satisfaction derived from positively helping children in a safe and nurturing environment:

...you sort of feel I've rescued those kids and they're going to have a better life because of it... We sort of gave the kids a chance at normal life, if they stayed where they were; god knows what would have happened to them. So you know that was pretty rewarding.

In addition to helping others, carers also described the benefits that fostering had on their own lives “...it gives me a bit of purpose” and “...it gives you a sense of achievement.” They also described how they were quite amazed at the resilience of some of the foster children “... it's amazing just how resilient these kids are...”, and also felt that foster children added to, and taught them about, life “...[these kids], although at a young age, can teach you something as well as add something to the rich tapestry that life is.”

The Negative Aspects of Fostering

The difficult and challenging behaviours often displayed by foster children can have a negative impact on carer strain and placement stability (Barber, et al., 2001; Briggs & Broadhurst, 2005; Delfabbro & Barber, 2003; Denby, et al., 1999; Farmer, et al., 2005; Gilbertson & Barber, 2003; James, 2004; McHugh, 2007; Sallnas, Vinnerljung & Westermark, 2004; Wilson, et al., 2000). This was evident in the present study, as although the carers reported the positive aspects of fostering, they also simultaneously had negative feelings, making the fostering role complex. Carers reported the negative aspects, such as foster children, who had a variety of negative behaviours “...swearing and abusing you, spitting at you and telling you all sorts of foul things...”, which often caused carer strain “...it's hard and it's wearing, and people don't want to do that...”

They also described how the challenging behaviours displayed by foster children impeded on their provision of a safe environment for other children “...you often have to neglect the other children, because of the child who is being violent, aggressive and hurting

themselves; so you have to control that situation, and sometimes the other children are neglected."

In addition to the stress accumulated from child behaviour, the child's biological parents can also exacerbate the carers' level of stress (Briggs & Broadhurst, 2005; Butler & Charles, 1999; Farmer, et al., 2005; McHugh, 2007; Moyers, et al., 2006; Wilson, et al., 2000). Consistently, carers in the study described the stress derived from the influence from the child's biological parents "*the major problem you've got when you have foster kids is that you've got to deal with their parents...*"

Contact with biological families also increased their level of stress, by having a detrimental effect on the placement "*...so it's not just settling them [foster children] in, but it's all the other baggage to, such as the parents...*" Parents often had a negative influence on the child "*...often tells him [child] you don't have to listen to the carer, you don't have to do what they tell you...*" and their behaviour following visitation "*the kids are more destructive once they've seen their parents...*"

The Influence of Formal Support Networks

Across research of Australian (AFCA, 2001; Briggs & Broadhurst, 2005; Gilbertson & Barber, 2003; McHugh, 2007), British (Butler & Charles, 1999; Maclay et al., 2006; McDonald, Burgess & Smith, 2003; Wilson, et al., 2000) and Canadian foster carers (Hudson & Levasseur, 2002; MacGregor, et al., 2006), there appears to be a consistently inadequate level of support from formal networks, such as child-welfare agencies and associated staff.

In the present study, the carers indicated that the main issue that negatively affected their role was a lack of support from formal networks "*they're [the child-welfare agency] not up-to scratch... I think they're completely useless. I just find the department let us [carers] down...*" When they began fostering, many carers expected support from formal networks, although soon learnt that this support was unlikely to be supplied:

The main thing that has made fostering negative for me is not having that support from the department, because when I went into fostering, I thought I would get that support, you know, you could ring somebody and they would help you, but it's not like that...

Throughout the interviews, it was evident that the carers felt generally unacknowledged and unappreciated by formal networks for their provision of a safe and nurturing home for children in care “*You don't get any sort of appreciation from DCD [child-welfare agency]...*” They also described that although they tried to show appreciation, child-welfare staff rarely achieved this “*...they try to say that we really appreciate you and all that. But no I don't really think that they do, not like they should...*”

For example, one carer encapsulated the lack of acknowledgement when she described the inadequate understanding that formal networks had of the everyday struggles carers faced and the inadequate respect for this role.

...they have no idea how unbelievably hard this job can be, and how it takes over your whole life, because from the minute you get up till the minute you go to bed, it's all about the kids, it's not like when you have an office job where you can switch off and go home. When you're a carer, you can't do that, you have to deal with it all the time, sometimes I don't feel people give you enough respect for the work you do...

This finding lends further support for previous research of foster carers who felt unsupported, unacknowledged and undervalued by formal networks (Briggs & Broadhurst, 2005; Butler & Charles, 1999; Denby, et al., 1999; Fisher, et al., 2000; Hudson & Levasseur, 2002; MacGregor, et al., 2006; Maclay, et al., 2006; Smyth & McHugh, 2006; Wilson, et al, 2000).

Through further analysis, it appeared that being unacknowledged underpinned more tangible issues with formal networks. These issues often began before the foster placement, through inadequate disclosure of child information; then during the placement with irregular contact, inadequate crisis response and exclusion from decision-making processes. During placement termination, a lack of acknowledgement of the child's attachment to the foster family also appeared to provide the carers with tangible examples of the child-welfare agency's lack of acknowledgement and respect for the fostering role. Hence, these issues have been discussed in detail below.

Disclosure of Child Information

A major problem reported by carers is when formal networks' provide inadequate information of foster children's histories of abuse, neglect and behaviour to carers both before and during the placement (Briggs & Broadhurst, 2005; Brown & Calder, 2000; Butler & Charles, 1999; Fisher, et al., 2000; Gilbertson & Barber, 2003; Hudson & Levasseur, 2002; MacGregor, et al., 2006; Nixon, 1997; Wilson, et al., 2000).

In contrast, the respite carer in this study described feeling satisfied with the provision of child information given:

"...so I asked for some more information about them [foster children] because I was worried about a few things- you know, the influence they could have on [biological child]. So they're [child-welfare agency] very open and honest about any concerns you have when it comes to information..."

This finding lends support for a study which found that many respite and short-term carers had positive perceptions of the information and support provided to them (O'Neill, 2006).

However, other carers in the present study, who provided full-time care, felt that child-welfare workers did not disclose specific details about the foster child in fear of the carer not agreeing to accept the child into their home:

...When the children arrive, you don't know anything about them, they [the child-welfare agency] don't give you any information... sometimes I think they don't tell you certain things, like they hold back information because they're worried if they tell you [about the child], you won't take them...

One carer described the frustration of not receiving sufficient information:

...They should have told me he was developmentally delayed, because I was treating him like a 14 year old- and he just couldn't handle it... I didn't have any information on him... they really should have told me before I took him on...

In addition to inadequate information provided both before and during the placement, carers also reported being uninformed about vital developments, such as placement termination. This often left carers feeling angry and resentful towards child-welfare staff, for example:

... we had a little boy who was 18 months, and we had him for a month, and I rang up the case manager in the morning, and he said, oh we forgot to ring you, but he's going home today... I always remember that they just came and took him, and my kids didn't get to say goodbye or anything. I think things like that, it makes you feel used.

From this quote, it is evident that many of the carers felt used and unappreciated due to a lack of insufficient information disclosed about the foster children. This appeared to reinforce their feelings of being unacknowledged for their frequently challenging and

difficult role, as seen previously (Butler & Charles, 1999; Fisher, et al., 2000; Gilbertson & Barber, 2003; Maclay, et al., 2006; McHugh, 2007; Nixon, 1997; Wilson, et al., 2000).

Contact and Crisis Response

Previous research has shown that the Australian out-of-home care system is in crisis, with a shortage of child-welfare workers, which impacts on a child-welfare worker's capacity to have regular contact with carers (Delfabbro & Barber, 2003). A lack of regular contact with child-welfare workers has been associated with carers' perceptions of being unsupported and unappreciated (Briggs & Broadhurst, 2005; Fisher, et al., 2000; Hudson & Levasseur, 2002; MacGregor, et al., 2006; Maclay, et al., 2006; 2006; McHugh, 2007; Nixon, 1997; O'Neill, 2001).

Consistent with this, carers identified that agency resources are stretched, with child-welfare workers having a large number of demanding caseloads *"I know they're busy and I know they're overworked."* However, they also suspended their needs for support due to this, and reported frustration at the inability of child-welfare workers to contact them within a reasonable time *"I'll ring them up and they won't return my messages for weeks"*.

For them, a lack of contact with child-welfare workers indicated that the child-welfare agency was generally unconcerned about the foster child or their level of care *"...I felt like I was a built in baby-sitter sometimes, because they wouldn't return my calls... as long as they know that kid is in a warm house and is getting fed, they really couldn't care less..."* As seen in the following quote, this inadequate response time was most pertinent during placement crises:

...I sent emails to our case workers, and he never even responded....In the end you have to sort it out yourself because you can't get a hold of anyone. You know you're not supposed to do anything without their consent but sometimes you just have to...because you can't get a hold of anyone...

To illustrate, many carers also discussed the inadequacy of Crisis Care (a 24-hour crisis response phone line) to give emotional support to carers during difficult and challenging fostering experiences “...they [Crisis Care] didn't really care, they didn't give me much support at all.” and “...whenever I have rung them [Crisis Care] they seem totally disinterested, it's like you're an inconvenience...”

Several carers felt Crisis Care was an inappropriate support service for foster carers “I wouldn't ring them up for support...”, and reported that this could be due to the perceived inexperience of Crisis Care staff “The people at Crisis Care... have no understanding of what it feels like to be a foster carer in a very high stress situation...” This often led carers to feel unsupported during non-business hours “...I mean on the weekends, it's extremely difficult, because there is no support.”

However, the disillusionment with the care system was not global, as some carers in the present study reported that other child-welfare staff, such as psychologists, demonstrated a greater appreciation for carers and their role than child-welfare workers “...The psychologists were more appreciative and understanding of what I was trying to accomplish with the kids than my case manager...” Psychologists were also perceived to provide more emotional and practical support to the foster family “...makes in-home visits regularly, which helps the kids, and it also makes me feel like somebody from the department [child-welfare agency] cares about us...” This form of regular in-home consultation and support was perceived to be beneficial in reducing carer strain and isolation “I think that there needs to be ongoing in-home services available for carers to help them with their foster child. By providing those services, you make the carer feel more valued, and less isolated...”

Regular contact with staff from child-welfare agencies has been associated with greater satisfaction and improved placement stability (Brown & Calder, 2000; Farmer, et al., 2005; Maclay, et al., 2006; O'Neill, 2006). Hence, this may explain why some carers in the

present study felt more supported and appreciated by the visiting psychologists than their child-welfare workers. It suggests that although not apparent globally across the foster care system, when support is offered, it can provide many benefits for both carer and child, and can improve placement stability and carer retention.

Decision-Making Processes

Research has shown that exclusion from decision-making processes about foster children damages the working relationship between child-welfare workers and carers (Gilbertson & Barber, 2003), and often exacerbates carers' perceived lack of acknowledgement from formal networks (Bullard, 2007; Denby, et al., 1999; Fisher, et al., 2000; Gilbertson & Barber; Hudson & Levasseur, 2002; MacGregor, et al., 2006; Maclay, et al., 2006; Wilson, et al., 2000).

This was evident in the present study, as carers reported feeling excluded from decision-making processes, and it was this sense of exclusion that led carers to feel they were a 'babysitting service', rather than an integral part of the child's life "*... You're just there babysitting and they can come anytime and take them [the foster children] and you just don't have a say in anything that goes on...*" In addition to feeling like a baby-sitter, many carers also reported feeling a lack of control over decisions made about the foster placement "*They would make decisions that affected us quite a bit, and we had no say at all, and they [child-welfare agency] knew they could do it, because as I said, we would have lost the kids...*" This made some carers want to cease fostering:

...Once their mother had gotten her act together and they were planning to send them back to her, they weren't really interested in anything we've got to say... it made me feel like throwing in the towel on a number of occasions...

Ironically, experienced carers reported that although they felt excluded during decision-making, over time, they became more assertive and confident when dealing with the

welfare agency “...because I’ve been doing fostering for a while now, I say a lot more things...” They also described that because of their intricate knowledge of the child’s physical and psychosocial health care, they were more confident in their ability to tell the child-welfare agency about health care issues “...it’s me who does all the hard work and understands why he needs it done- If you wait for them [child-welfare agency], it will never happen...” They also discussed how changing their approach to working with the child-welfare agency had benefits for both the foster child “If it’s long term planning they can ask your opinion, because you know the child better than anybody else, how that decision might affect the child...”, and the carer “...You feel more valued and supported when you know about the decision making process...” This finding of increased assertiveness and improved working relationships with child-welfare workers over time is consistent with international research (Fisher, et al., 2000; Maclay, et al., 2006; Rodgers, et al., 2006).

When asked about what kind of relationship they would prefer to have with child-welfare staff, carers in the present study wanted a greater level of inclusion during decision-making processes, and greater equality with child-welfare workers. As reflected in the following quote, carers believed that a partnership with child-welfare workers would improve their fostering experience.

...I think they need to make it so you’re in a partnership, you know, that I guess in a way you’re a colleague rather than their client...it would make me feel a lot better about doing it [fostering], yeah, you would think you’re a part of it, rather than thinking that you’re just babysitting a child for them...

This finding is consistent with previous research (Fisher, et al., 2000; Gilbertson & Barber, 2003; MacGregor, et al., 2006; O’Neill, 2006; Rodgers, et al., 2006; Sanchirico, et al., 1998) which indicated that partnerships between child-welfare workers and carers improve carer satisfaction, perceptions of support and placement stability.

Acknowledgement of Attachments during Placement Termination

The carers also reported feeling that formal networks did not adequately acknowledge or appreciate the attachments and emotional ties the child shared with the foster family.

Rather, they felt formal networks were more focused on the bonds the foster child had with their biological parents.

...They [child-welfare agency] were more interested in rightio, we've set a date they're [foster children] going back [to their biological parents] hell of high-water sort of thing... yeah it was mixed emotions... because after 4 years, we got really, really close, so they were sort of like our children after that length of time...

For example, one carer reported a difficult time when the emotional ties shared between the child and her family were not taken into consideration during placement termination “...of course he [biological son] didn't have time to say goodbye [to the foster child]... we were quite attached to him, and yeah, they never got to say goodbye to him...”

Carers also described the anger and disappointment they felt when their attachments with foster children were not taken into account. This exclusion often left them feeling that this was enough for them to reconsider fostering.

...the foster kids are here all the time, and you build up quite an attachment to them, and when they don't really take that into consideration it makes you really upset and angry, you often think whether it is worth it...

This lack of acknowledgement of the child's attachment to the foster family was perceived to be harmful to both the child and the foster family, and often reinforced the carers' feeling of being unappreciated of formal networks. These unacknowledged attachments precipitated some carers' re-evaluation of fostering.

A lack of consideration and recognition of the attachments shared during placement termination is evident in previous literature (Butler & Charles, 1999), which found British carers often felt like 'second-class' parents when compared to the child's biological parents, notably during placement termination.

The Influence of Informal Support Networks

Social Restriction and Isolation

Frequent contact with informal support networks, such as family and friends has been linked to reduced carer strain and greater placement stability (Farmer, et al., 2005), and more adaptive parenting styles (Cuskelly, et al., 2005). However, quantitative research of Australian (Cuskelly, et al.) and British carers (Farmer, et al.) has indicated that carers are often socially restricted and feel isolated.

Throughout the interviews, many of the carers reported a sense of social restriction since they began fostering. From this restriction, many described feeling overwhelmed and exhausted, which often made them question whether they wanted to continue fostering "... yeah you are very restricted when you have foster children, and yeah I mean it does sometimes make you think do I really want to be doing this?"

This was further compounded if children displayed socially maladaptive behaviours, as they were difficult to obtain respite services for "...the hardest thing, is to get respite, especially for children who are difficult..." This further exacerbated the carers' exhaustion and social restriction, which often left them feeling isolated and impacted on their perceived ability to provide a safe and nurturing foster home "...the isolation is huge when you are dealing with children who are out of your control... yeah you get isolated, you feel insecure, inefficient, and you question why you're doing it..."

The present findings appear to be consistent with available literature of foster carers and social isolation (Cuskelly, et al., 2005), which indicated that social restriction is often the

result of the continually demanding carer role. Moreover, the present findings will extend the limited understanding of the importance of informal networks in providing support independent of formal networks.

Responses from Informal Networks

Previous research with carers has indicated that support from family and friends often substitutes for the deficiency of formal support (Farmer, et al., 2005; Maclay, et al., 2006). Furthermore, informal support can be beneficial to the retention of carers, as Australian research has found that carers who had reported greater informal support were more likely to continue fostering (Cuskelly, et al., 2005).

However, in the present research many of the carers battled with, and described the negative responses and criticism they received from their own friends “...*most of my friends find it quite difficult to understand why I'm still doing it...*” and family members on their decision to foster:

... why don't you just give them back, there wasn't that support there, like if it was you own [biological] child you would have people saying oh I'll give you a hand and that, but their [family members] attitude was quite negative about fostering.

As there has been little research of foster carers and their informal support networks, these findings are preliminary. However, research of British carers (Farmer, et al., 2005) described the negative responses from neighbours, which supports the current findings.

Conversely, the kinship carers in the present study both reported a positive response from their friends “...*mostly positive sort of response from 99% of people...*” and described their family as “...*very supportive...*” during fostering. This has been seen in research of Australian kinship carers, as kinship carers are often perceived by society more positively as

they cared for their “...*own flesh and blood...*”, rather than those who cared for unrelated children (Spence, 2004).

Moreover, some carers reported receiving practical support from their informal networks, particularly their close friends, who often included and engaged the foster children in social activities with other children “...*I've got friends with families, and they used to come around and play with them [foster children] and they were always invited to birthday parties and stuff, so yeah, they [friends] definitely got involved.*” Contact with informal networks was also perceived to be beneficial for carers “...*helped me relax, it made it a lot easier having that time with another adult....*”, and was often cited as a factor that reduced carer strain, which is consistent with previous research (Cuskelly, et al., 2005).

Contact with Other Carers

The process of sharing experiences and stories of fostering with other carers was perceived to be beneficial by American (Denby, et al., 1999), Australian (O'Neill, 2006), British (Maclay, et al., 2006), and Canadian carers (MacGregor, et al., 2006). Phenomenological research by Maclay and colleagues found that carers who did not receive sufficient formal support often developed greater relationships with other carers to substitute for this deficiency.

In addition to contact with family and friends, carers in the present study emphasized the need to have greater contact with other foster carers “...*I feel sometimes like I'm isolated from other carers...*”, and specifically to share stories and provide and receive practical and emotional support during difficult times “...*you don't really have access to other carers... Sometimes it's just wanting to express these things that you feel to reduce the stress load...*” The carers also described the practical benefits of having contact with other carers who had knowledge of how to deal with children who have complex physical and psychosocial issues:

...Yeah I definitely got more advice from other carers than from the department [child-welfare agency], because they know what it's like to be a carer, because they live with it every day as well. You know, other people who aren't carers really have no idea, you know, and they often feel sorry for the kids, but they don't realize that it's not always like that, they don't have to deal with the tantrums and all of that...

This provides further evidence for the growing body of research which has shown that having contact with other carers is important in reducing carer strain and improving carer psychosocial wellbeing (Cuskelly, et al., 2005; Denby, et al., 1999; O'Neill, 2006).

Conclusions

The purpose of the present study was to explore the experiences of foster carers and their perceptions of formal and informal support networks. The findings indicated that carers' experiences of fostering included both positive and negative aspects, consistent with previous Australian (Delfabbro & Barber, 2003; Briggs & Broadhurst, 2005) and international research (MacGregor, et al., 2006; Rodgers, et al., 2006; Tyebjee, 2003; Moyers, et al., 2006). Hence, foster care is a complex role that has both challenges and rewards.

In relation to formal networks, carers generally felt unsupported and unacknowledged for their role. This lack of acknowledgement appeared to manifest through inadequate disclosure of child information, inadequate contact and crisis response, exclusion from decision-making processes and inadequate recognition of attachments shared between the child and foster family during placement termination. This lack of acknowledgement of the fostering role often led carers to feel like a babysitter, and precipitated their reassessment of fostering. This provides further support for research which indicated that formal support is essential to retain carers, and if not adequately provided, can be detrimental to carer strain,

placement stability and carer retention (Briggs & Broadhurst, 2005; Butler & Charles, 1999; Gilbertson & Barber, 2003; Maclay, et al., 2006; McHugh, 2007; Nixon, 1997).

With regards to informal support, carers often felt socially restricted and received negative responses from informal networks, which often left them to re-evaluate their decision to foster. However, other carers reported positive responses from informal networks, and described the benefits of this for both themselves and the child. These findings do show support for research by Cuskelly and colleagues (2005), who found that informal support networks provide benefits for both carer and child, although if absent, can negatively impact on carer strain, placement stability and carer retention.

Limitations and Future Research Directions

However, as with any study, the present research does have some limitations. Firstly, the carers in the present study were obtained through snowballing, which may make the present findings somewhat specific to the participant group. However, in the future it is anticipated that a similar study will be conducted, and draw data from a wider sample of Australian foster carers recruited through both formal and informal support networks.

Furthermore, the participants comprised of unrelated, kinship and respite carers, which may have influenced results. To date there does not appear to be any research that examines the differences between these carer groups, hence, future research may benefit from comparisons between unrelated, kinship and respite carers to investigate whether there are differences between their fostering experiences and perceptions of formal and informal support networks.

Additionally, the participants were all overseen by a government child-welfare agency, and hence their experiences and perceptions of support are likely to be different to those supervised by non-government child-welfare agencies. As there appears to be limited data of carers from the non-government sector, future research may benefit from examining

the differences of government and non-government supervised carers' experiences and perceptions of formal and informal support.

As the impact that informal support networks can have on fostering has only received recent research attention, it is crucial that future research investigate the relationship between formal and informal support networks. Future research that investigates the roles that both formal and informal support networks have in improving carer retention and placement stability could clarify current conceptualizations of the importance of support networks, and facilitate continued development of more inclusive support services for foster carers.

Practical Implications

Consequently, it appears that to reduce carer strain, and potentially improve placement stability and carer retention, and short and long-term psychosocial outcomes for foster children, there is an obvious need for greater carer support from both formal and informal networks. It appears that carers need greater acknowledgement and appreciation from formal networks through: increased provision of foster child information, more regular communication, more frequent in-home support, and greater acknowledgement of the attachments shared between the child and foster family. Furthermore, there appears to be a need for greater interaction and support from informal networks, to provide both emotional and practical support for carers during the demanding, and often challenging, fostering role.

In conclusion, the present research has indicated that fostering is a complex role, which can be negatively influenced by a lack of support from both formal and informal support networks, which can exacerbate carer strain, reduce placement stability and precipitate a reassessment of fostering. However, when formal and informal support is present, it can reduce carer strain; improve placement stability and carer retention. These findings have demonstrated the importance of supportive formal and informal networks to

ensure foster carers' continued provision of a safe, secure and nurturing foster home to improve the short and long-term psychosocial outcomes for children in out-of-home care.

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Appendix A

Audit Trail

History:

I am a general foster carer with the Department for Child Development. I feel quite proud to be a carer, as I feel I am providing foster children with a chance to improve their level of psychosocial function in a healthy and happy environment. I do enjoy fostering, and I have a fairly good relationship with our case managers and also my friends and family who are quite supportive of our fostering. Overall, I feel I have quite a positive experience of fostering, and am interested in this research because I want to explore whether other carers feel this way.

February 2008

- Met with supervisors, and decided to go through the Foster Care Association of WA to obtain participants, as they have access to a number of carers, and aim to provide support and advocacy to carers. Will contact them in the near future.
- Having reviewed the literature, it appears that a significant amount is concerned with the relationship between formal support and foster carers. Although I admit I am influenced by the negativity of these writings, I feel quite critical about these studies, as they all appear to focus on the lack of formal support, and do not observe the presence or lack of informal support.
- I have found many of the findings of previous studies surprising and disturbing, especially Cuskelly and colleagues (2005) article which indicated that foster carers have significantly less reported informal support networks. I had not thought of this previously, instead wanting to examine the benefits of informal supports. Hence, I am hoping to explore this further in my research.

March 2008

- Had meetings with supervisors- have decided to include a support services brochure in my research proposal
- Further collection and synthesis of research literature. I am finding that most of the research is international, with not much on Australian carers. Furthermore, the research of Australian carers is predominantly quantitative. I feel that qualitative analysis of this topic would be beneficial in this area, especially considering the current climate of foster care in Australia.

April 2008

- Have started exploring a bit more thoroughly the foster care studies. Most appear to be based around British carers, little of American carers and even less on Canadian carers. I am querying whether this is due to the structure of the care systems in these countries.
- Have made amendments to the proposal as indicated by the examiners, and have sent this off to the ethics committee for approval.
- Have contact the Foster Care Association, and they have indicated that they would be interested in being affiliated with this research, although will need to check with their manager before going ahead. I am hoping that this goes well, as it looks quite promising.

May 2008

- Have read the research which examined the influence of foster care on foster children and the impact this has on later life. I have found this to be quite disturbing, as many children become socially maladaptive, and often are not able to function within general society even when they have aged out of the care system. This is concerning. I have also read information about children's thoughts while they were in care, some were positive about the experience but some were very negative. From this, I am concerned about whether foster care really does help children become better functioning adults- maybe some of these children would be better off with their biological parents? From the research, it suggests that the biological parents become psychologically damaged, the children become psychologically damaged, and the foster carers end up becoming psychologically damaged. I am wondering whether the foster care system really does benefit anyone. It is making me consider my own position, before I felt that I was doing something worthwhile, helping these children, but looking at the research, it appears that maybe foster care is inflicting psychological pain on people. I am currently wondering who the care system benefits?
- I have again contacted the Foster Care Association via email, and am awaiting their reply. I have sent a summary of my research as well as my Information letter.

June 2008

- I have been waiting 2 weeks for a reply from the Foster Care Association. This is concerning me, so I will ring up tomorrow and see whether they are still going to distribute my letter as previously indicated.
- I have contacted the Foster Care Association, and they have told me they will get their manager to call me back later today.
- I have waited 2 days, and have not received a return phone call from the manager, so I have decided to go into the Association and see whether I can meet with her.
- Today I went into the Association and met with the manager, who told me due to a 'Conflict of Interest', they would not be able to support my study. I am quite frustrated about this, considering they previously indicated that they would happily distribute some information letters for me, and would be happy to receive the final report. They have indicated that because I am asking specifically about formal networks, they would not support this study, because they are funded by the Department for Child Protection (DCP). This is very frustrating, because they have set up online surveys of foster carers in the past that examine their perceptions of formal networks, which is exactly what I am interested in. Furthermore, I feel my research would benefit their continued efforts in the field of supporting foster carers. Although they explicitly state that their main aim is to support and advocate for carers, I am wondering whether they actually do, or are provided to keep DCP looking like they are supporting carers by having this half-hearted service.
- This is very unfortunate, as I am unsure about where I will get my participants from.
- I have contacted my supervisors and they have suggested contacting one of the private fostering agencies, as they may be able to help me find participants. I have contact both WANSLEA and Mercy care, and am hoping to receive a reply within the coming days
- It has been almost 2 weeks, and I have not had any reply from either WANSLEA or Mercy care. I am beginning to become quite disillusioned with this research, as it appears to be just too political for anyone to support.

- I have contacted my supervisors and they have suggested that I go through informal networks to obtain participants. However, I am hoping that I can obtain 8-10 participants for the study like previously intended.

July 2008

- Although I was first apprehensive about gathering participants via informal networks, I feel that my own personal networks have a familiarity with me, and may feel more comfortable in expressing certain experiences or perceptions than if they did not know me beforehand. Hence, I am hoping that it will benefit the research data.
- I have been successful in obtaining a few carers, and am looking to do their interviews within the next few weeks.

Interview 1

I have finished my first interview, which was very conversational, and I feel I got an in-depth understanding of this carer's experiences. First she explained what an average day is like for her, and how she feels about fostering. However, following this, she began to discuss what motivated her to foster, and I grasped a sense that although she described a very stressful and difficult home environment, she felt very satisfied as a carer, and she described that she found pleasure and comfort by seeing her foster children succeed in schooling and other areas. This has made me want to look further into the reasons that many carers foster, and whether they derive a sense of satisfaction from fostering.

She also described the considerable strain from dealing with child-welfare workers, and how she felt that she received very little respect for her work. She also described that she received inadequate respite services, and that the training provided was insufficient, and did not provide her with the skills to cope with children with such high physical and psychological demands. Although my interview schedule has asked specifically about formal networks and their level of support, I feel that training may also be an issue for other carers, so I will ask other carers about this area, and if they feel it is adequate.

Surprisingly, when I asked her about her informal support, she reported how since she had began fostering, many of her family and friends didn't understand why she was doing it, and continually criticised her for choosing to foster. She also described the feeling of 'isolation', which made a considerable impact on my understanding of fostering.

Previously, I had not thought of fostering as isolating, I considered it to be something which would allow you to connect with the wider community, but this carer did not feel this way. She also described that she felt isolated from other foster carers, and not having this support from people in a similar situation made her wonder why she continued to foster. From this interview, I have decided to investigate whether the other carers feel this way.

Interview 2

This interview I found was quite different from the first. Firstly, this carer was a respite carer, which I feel may make her experiences different from the first carer. This carer described her reasons to foster as more to benefit her other children, although, as with the first interview she did derive a sense of pleasure and satisfaction of fostering. She also described how the child-welfare agency was very supportive, and gave her a lot of in-depth information about the foster children she would have on respite. However, she did report that the agency did not take her requested ages into consideration, and she described the considerable frustration of saying no to children out of the age bracket set by her during carer intake. She also described that from discussions with other carers, there is a lack of adequate carer matching, as child-welfare workers were more concerned with the urgency of finding a

placement. Carer matching is something that has not been brought up before, and is something I will investigate further.

In relation to informal networks, the respite carer felt that although her family were initially quite unsupportive of her decision to foster, they had become more accustomed and have since embraced the foster children. In contrast to the first carer, the respite carer also expressed how her friends had embraced her foster children, which she felt benefited both her and the children. From these contrasting experiences, I am eager to understand the experiences and understandings of other carers formal and informal support networks.

Interview 3

Concurrent with the other carers interviewed, the 3rd carer described that he derived pleasure and satisfaction from fostering. However, his familiarity with me as a carer became apparent, and he began to critically discuss the inadequacies and inabilities of formal support networks. He described the considerable lack of support, the exclusion, and the lack of respect as all major reasons that made him reconsider fostering. He also described how they failed to see him as a person, and rather as a babysitter who was not considered during decision-making. He gave examples of times when the emotional attachments he shared with his foster children were not taken into consideration, and where child-welfare agencies rarely contacted him, even during crises. I found this to be quite disturbing, especially considering this carer has quite a positive approach to his fostering.

I found the conceptualisation of a carer as a babysitter as quite a shock, that someone as crucial as a primary carer to not feel that they were considered as having a unique and special understanding of their foster child. This made me look through the previous interviews, and this lack of acknowledgement and respect for the fostering role and all it entails came through. All carers reported that they often felt they were a number, rather than a person who could make a considerable and important contribution to decision making processes. This conceptualisation has given me a deeper level of understanding and empathy towards the role of a carer.

- I am very happy with the data I have got so far, I feel I have begun to 'tap' into the eidetic essence that I have been looking for in my research. I also feel I have got some varied experiences between the carers, which is interesting, and will allow me to further examine and compare these.
- Interestingly, I have been in contact with one carer who is very concerned about the research and confidentiality. Although I have assured her that any audio-recordings will be erased following transcription and analysis, this carer is extremely concerned about the potential impact the information divulged may have with her current dealings of DCP.
- Today, although being reassured, the carer I have been in contact with has decided not to participate. She indicated that this was because she had some very negative opinions of DCP, and did not want them to know she had said those things. Although I reassured her that this would not happen, she was still very concerned about her foster children being removed from her. I found this extremely disconcerting, that someone who is a carer feels unable to liaise with DCP about her concerns. I queried the power hierarchy between carers and DCP, and looking back at the data, there is this underlying feeling that carers are 'less than' case managers and biological parents. I have not had this during my experiences, and I have found this has opened my eyes to some of the bureaucracy that goes on the DCP, which is something I previously have not had exposure to.

August 2008

- I am liaising with a few carers, whom have all indicated interest in the study, so I have sent them an information letter and I hope to hear back from them.
- I have analysed the transcripts further, and am wondering why the respite carer has brought up different issues to the general carers. I am wondering whether this may be to do with significantly less dependency, if you could call it that, on the department. As the general carers report how they have to wait for approval, that they aren't informed of visits et cetera, whereas as a respite carer you would only have them for a short period of time so that wouldn't be a concern.
- Although initially they showed interested, some of the carers I previously contacted have contacted me back and indicated that they didn't feel they had anything that was worthwhile to add to the study. I reassured them and indicated that I was interested in their experiences, and they said that they were quite negative about DCP and the fostering process, and were likely to cease fostering in the near future anyway. This has concerned me, as I feel like there is this hidden population of people who are providing homes for foster children, and who are not satisfied with the job, and feel like what they have experienced has been a waste of time.
- I have contacted some kinship carers, who have indicated that they would be interested in the study, so I conducted these over the same day, although they covered different topics, and shone a different light on fostering and what it means for them.

Interview 4

The fourth interview was with a kinship carer, who although not willingly volunteering to become a carer, had made a decision to care for his own grandchildren. Interwoven in the questions that I asked him, I felt a sense of sadness towards the fostering experience for him. He described how he felt he was a 'babysitter', echoing those of previous interviews. He also described the considerable difficulty contacting child-welfare workers, exclusion from decision-making processes, and a lack of respect for his role.

He had quite a negative experience with formal networks, and he gave numerous examples of how he felt the child-welfare workers did not make him feel that he was crucial to the safety of his grandchildren. He described how he felt that the attachments he had with the children were not considered, as reunification with the children's mother became a very quick process, during which time he felt very considerable discomfort. This carer's experiences with formal networks echo those of the 3rd carer.

He also described the considerable difficulties being a kinship carer, with no formal training over the 4 years he fostered, and very little support. As kinship care is something I have not looked at in the literature in any depth, it is something I feel will be secondary to the underlying understanding and meaning I derived from this carer, that he felt unappreciated and unsupported.

In contrast to some previous carers, the present carer reported how he felt informal networks were very supportive and responsive to his fostering, and he described how they praised him for looking after his own biologically related children. He found this support to be very important, considering he had considerable difficulties with formal support networks.

Interview 5

This again was a kinship carer, and she described very similar feelings and experiences to that of the other kinship carer, and also similarities to that of the other carers who reported a general lack of support and acknowledgement from formal networks. She described many experiences of being unable to contact welfare workers, having difficulties organising parental visitation, and she described feeling that she was a volunteer who was

essentially doing much of the work of a welfare worker without being paid. She described the considerable strain that fostering put on her lifestyle, and was very resentful about the lack of support given by the agency.

With regards to informal support, she, like the other kinship carer, reported considerable support from family and friends, which she also felt buffered her lack of support from the department.

- I have been contacted by a general carer through word of a previously interviewed carer. I am quite pleased about this, as it looked like I would have to extend my research project as I only had 5 participants. This carer seemed like she had reflected a great deal on her experiences, and also had many examples of these experiences. She seemed to have thought quite deeply about the process, and I found this very beneficial for the interview.

Interview 6

This carer has had considerable experience as both a short-term and long-term foster carer, so I was eager to hear her experiences. She gave rich descriptions of the times she felt the department did not include her in decisions, did not give her adequate information about foster children, and made her feel like a babysitter. With such rich information, I found myself really questioning whether fostering is a positive experience.

Interview 7

Similar to the carer recently interviewed above, this carer had considerable experience as a carer, although again felt quite frustrated about the whole process of fostering, and described how she felt unappreciated. She discussed how she was frequently uninformed, how she didn't receive adequate respite, and how the welfare workers often didn't contact her. This carer appeared to reiterate most of what the other carers had indicated.

- *Reflections on the interviews*

What I found through interviewing was that many carers went into fostering to help others, but often came out feeling that they were incapable of providing foster care to children with such difficult backgrounds and complex issues. Although not expecting it, I found that many carers described that fostering was a negative experience, and something they were unlikely to continue with. I found this confronting, as many of these carers appeared very committed to their role. But that was the point, these carers were committed to their role, they just didn't feel they were supported well enough to be able to perform their role properly. From hearing these stories of sadness and despair, I really was amazed at the resiliency of some of the carers and their ability to overcome obstacles and issues surrounding fostering, especially difficult child behaviours and the seemingly lack of support and acknowledgement from formal networks.

September 2008

Analysing the data

- I have looked at a number of studies that have used thematic analysis, and have decided to use a style similar to DeMol & Buysse (2008), as I feel it is more reflexive, and revisits the transcripts on a number of occasions to ensure that the themes and quotes used accurately reflect the meanings of the carers.

Reintegrating bracketed data

- Through analysing the data, and looking through previous literature, I have found many consistencies over many studies of carers- A considerable lack of support from formal networks, and an inadequacy of formal networks to provide optimal placements for children. All the literature appears to be in line with this, including both Australian and International research. Commentators may have indicated that the foster care system is in crisis, with more children coming into care and more carers exiting the system, but it was not until I heard the stories of unnecessary strain, frustration, and disappointment with formal support systems that you fully realise the often negative impact that fostering has on carers.

1st draft

- I have sent the first draft of my report. Looking at the comments made by both supervisors, I think I need to look considerably more at the underlying assumptions of phenomenology, what does it mean, why is this the best choice? I have also decided to revise some of the themes- for example, there was some discussion in the interviews of the inadequacy of carer training, but I feel that this doesn't answer my research question, rather confuses the process of analysis. I have hence decided to remove this.

Oral Presentation

- Preparing my presentation, I have begun to realise the reason I am doing this study, what my research questions are, and the important issues that this study has raised. This has given me a greater appreciation of what this study means in a more global and real world sense. It also makes me feel a bit less 'flat' about this research, as from listening to the interviews, it made me feel quite disillusioned by the whole process of fostering.

October 2008

Oral Presentation

- Listening to the presentations from other students about their research, I have realised that my study is fundamentally at the 'ground level' of research- it is practical, and can have many real world applications beyond the purpose of completing Honours.
- Listening to another qualitative study, I realised that I was missing the point of what my participants were trying to tell me- they weren't just talking about the immediate issues of not being informed or being excluded. Underneath all of this, there was a sense of being unacknowledged and unappreciated. This is something which permeated throughout many the issues they discussed, but it was something that was evident across all of the interviews, being unsupported, being unacknowledged. This is something I must explore, this I feel, is the core essence of fostering, this is what I need to describe in my analysis.

2nd draft

- I have significantly revised all the structure of my analysis section- considering that I have read that there may only be 1 'theme' in the data, but it is a thread that strings many of the 'sub-themes' together. Hence, all of the data of informal networks appear to fall under this 1 theme of acknowledgement, and primarily a lack of acknowledgement.
- Looking at the data concerning the respite carer-I am concerned at the inability of this quote as representative of the participant- because this carer did feel like the agency

was supportive, but it was more to do with giving over information about the foster children, rather than an actual perception of adequate support. Hence, I have reanalysed the transcripts and decided to place this quote in the lack of adequate information sub-theme, as it seems to fit better.

Final Conclusions

To conclude this trail, I want to mention how much my perceptions of fostering have changed over the course of this research. Although I enjoyed researching this topic, I have found this to be a very disheartening experience, which does not appear to be improved without a considerable amount of drastic changes to the formal support networks of foster carers. This is making me question what it means in our society to look after children who have a number of complex issues- what does this invaluable contribution to society mean? I think this is something that needs to be addressed by formal networks, especially if they wish to continue providing foster care.

Appendix B

Information Letter

Thank you for your interest in this research. My name is Tara Cavazzi and I am currently completing my Bachelor of Arts (Honours) in Psychology at Edith Cowan University.

The purpose of this research is to explore the experiences of foster carers, particularly with regards to their perceptions of support. It is hoped that the information collected will add to current Australian and International research and enhance the further development of support services to assist foster carers in providing a safe, secure and nurturing environment for children in care. The Faculty of Computing, Health and Science Human Research Ethics Committee at Edith Cowan University has approved this research.

All participants in this research are foster carers living within the metropolitan area. Please note that any participation or contact you have with the researcher will be confidential. Participation in this study will involve completing an interview that is expected to take approximately 1-1 ½ hours, however this time is flexible. Interviews can be arranged to fit in at a time that is suitable for you in a public setting. It is envisaged that 1 interview will be needed to collect all necessary information. However, with your permission, you may be recontacted via phone, e-mail or an alternative method during the data analysis to ensure that my representation of your experiences is accurate. Furthermore, if you are interested, I can provide you with a copy of the summarised research report.

I hope to audio-record the interviews; however I need your written informed consent to do so. Once transcribed and analysed, all recordings will be destroyed and the de-identified transcription will be stored in a locked storeroom at Edith Cowan University. If you choose to participate, please note that it is voluntary and you may withdraw consent at any time. If you do withdraw, there will be no penalty and any information collected will be erased and not included in the analysis. If you do participate, please note that a summarised research report will be given to the Foster Care Association of Western Australia, although will not contain any identifying information. It is anticipated that this research will further enhance support services for foster carers. Furthermore, this study may be published, although no identifying data will be incorporated.

- In summary, your participation in this research is completely confidential, voluntary and you may withdraw at any time.

If there are any questions or queries about the present study, please contact myself on (08) 9250 1605 (H) or 0412 347 959 (M), or alternatively at tcavazzi@student.ecu.edu.au. If you wish to speak to my primary supervisor, Dr Andrew Guilfoyle, he can be contacted on 6304 5543 or via e-mail at a.guilfoyle@ecu.edu.au. Alternatively, if you wish to contact someone independent of the research, please do not hesitate to contact the Fourth Year Co-ordinator Dr Justine Dandy via telephone on 6304 5834 or through e-mail at j.dandy@ecu.edu.au

Thank you for your interest and valuable time.

Kind Regards,
Tara Cavazzi.

Appendix C
Consent Form

I _____ agree to participate in the Research study about the Experiences of Foster Carers conducted by Tara Cavazzi of Edith Cowan University. I give written consent that;

- I have read the information letter and understand the purpose of the research.
- I have asked any questions or queries that I have about any part of the research, and I consider that these have been answered adequately.
- I understand that all information disclosed will be confidential, and any identifying information will not be revealed without my written permission.
- I am voluntarily participating in this research.
- I understand that any information given will be used in a research report given to official markers at Edith Cowan University, with summarised copies provided to the Foster Care Association of Western Australia and interested participants, I understand that all information will be de-identified to ensure my confidentiality.
- I accept that this report may be published, under the provision I am not identifiable.
- I give consent to be audio-recorded during the interviews, and understand that these recordings will be destroyed following transcription and analysis.
- I understand that I have the right to refuse to answer any questions asked by the researcher
- I understand that I may be re-contacted by the researcher if further clarification is necessary. I also understand that I can obtain a copy of the preliminary analysis if requested.
- I understand that I can, at any time, withdraw my participation and any information disclosed will be removed from the research. I also understand that there will be no penalty in withdrawing.
- I understand that I can obtain a signed copy of this consent form on request.

Participant's Signature

Date

Contact Number

Researchers' Signature

Date

Appendix D

Interview Schedule

I wish to thank you for your participation in this research. I have five main items that I would like to ask you about, however you have a right to refuse to answer any of the questions. Although, I am very interested in your thoughts about the issues raised.

I first was hoping to gather a brief history of your fostering, for example, how long have you been a carer?

1. Could you first tell me about a typical day?
 - Can you give me some examples about how being a carer affects your day-to-day life?
 - How would your life be different if you weren't a carer?
 - Does fostering add to your life, interrupt it or both? Can you describe this?

2. In your experience, what do you think are some of the main issues carers face?
 - How do you think that these issues/concerns could be reduced/ addressed?

3. Do you feel supported in your role as a carer?
 - Can you give me examples of times when you did or did not feel supported?
 - What was this like for you during that time?
 - What sort of support, if any, would have made it easier for you?

4. How do you feel others perceive your role as a carer?
 - What is your perception of the experiences your friends and family have had with your fostering?
 - Do your family and friends get involved with your foster children?
 - Can you give me examples?
 - Is that involvement helpful for you?
 - How does this involvement allow you to have a break when necessary?
 - How does this impact on your ability to take time out or relax?

5. Do you feel you play a key role in the decisions made about the foster child?
 - Do you feel the welfare agency and employees acknowledge and appreciate your role?
 - Do you feel the decision making process of the agency takes into consideration your needs as a carer?

Appendix E

Support Information for Foster Carers

After discussing your experiences of fostering, you may have brought up some unresolved issues. It is important that if you do feel this, that you seek help to ensure you continue to provide a safe and nurturing environment for children in care.

This leaflet has been created to provide you with a list of available support services that you may wish to contact if you want to further discuss any issues.

Telephone support

- | | |
|---|-----------|
| <i>Crisis Care</i> | 9223 1111 |
| <ul style="list-style-type: none"> • 24 hour emergency line. • Provides support and links with the Department for Child Protection. | |
| <i>Family helpline</i> | 9223 1100 |
| <ul style="list-style-type: none"> • 24 hour confidential counseling and advice. | |
| <i>Salvo care line</i> | 9442 5777 |
| <ul style="list-style-type: none"> • Confidential counseling line. | |

On-site support

- | | |
|--|-----------|
| <i>Foster Care Association of WA</i> | 9388 1911 |
| 89 Hensman Road, Subiaco | |
| <ul style="list-style-type: none"> • Provides advice, support, information and Advocacy specifically developed for foster carers. | |
| <i>Fostering services</i> | 6380 5900 |
| 91 Hensman Road, Subiaco | |
| <ul style="list-style-type: none"> • Organises training and workshops for carers. | |

Psychological Support Services

- | | |
|---|-----------|
| <i>PrimePsych</i> | 9492 8900 |
| 461 Scarborough Beach Rd, Osborne Park | |
| <ul style="list-style-type: none"> • A confidential psychological service specifically designed for foster carers. • For Dept. for Child Protection carers, this service is free of charge. | |
| <i>ECU Psychological Services Centre</i> | 9301 0011 |
| Joondalup House, 8 Davidson Terrace, Joondalup | |
| <ul style="list-style-type: none"> • Provides counseling, psychological assessment and treatment. | |
| <i>Relationships Australia Inc.</i> | 9394 9000 |
| 2232c Albany Highway, Gosnells | |
| <ul style="list-style-type: none"> • Provides individual counseling and workshops. | |
| <i>Centrecare</i> | 9440 0400 |
| 12 Brewer Place, Mirrabooka | |
| <ul style="list-style-type: none"> • Provides individual counseling, workshops and in-home visiting support services for parents and carers with children under the age of 6. | |

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