

ONCE IN CARE Young adults recall their story in foster care

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The presentation

- Backgroud and research design
- Group of study
- Quantitative and qualitative results
- Discussion

Background

- "The right of each child to live in a family" (National law 149/2001)
- "Each child in care should have his/her own care plan" (Guidelines Child and Family Care, Veneto Region, 2008)

BUT

- there is no common way of assessing and planning intervention (difficulty in descriptive assessment and measurable plan)
- services are dominated by a culture that does not support professionals in documenting the care process

Predictive Factors

(Maluccio 2000; Pecora, 2007; Ghate, 2008)

Positive outcome of care process is related to:

- •Stable cooperation between social workers and family;
- •Family (parents and kin) can **keep the relationship** with the child;
- Constant and involving relationship and shared responsibility among social workers, residential care social workers and family;
- •The **family** is the **centre** of the care process;
- •Placement length is proper to the child needs and to the achievement of the goals of the care project
- Low number of external placements

Within the Italian child protection system data on outcome in life of children once in care are lacking

- → is placement in foster care a protective or a risk factor for children and their family?
- → is foster care an intervention empowering or worsening the relationship between children and their parents?

PURPOSE

to retrospectively research the care paths of a group of former children out-of-home (foster family) in order to inquire how this experience has impacted their present life and to improve today's work effectiveness with looked after children and their vulnerable families.

Funding: Veneto region "Regional Observatory New Generations and Family"

GOAL

To qualitatively collect the trajectories of life of a group of 50 foster children alumni once they have become adults (at least 20 y.o.) in order to comprehend:

- -their personal representation on their care path and the family reunification process
- the impact of the role of social workers and the impact of foster family on their wellbeing and the one of their birth family.

GROUP OF STUDY

50 former fostered children (28F – 22M) once in care in the 8 Districts of Veneto Region who:

- lived out of home for at least 3 months between 1998-2008;
- have never been considered for adoption;

- were not "non accompanied immigrant children" and Roma

children;

- are at least 20 years old.



The random selection of the sample population was based on the database of the Veneto's Regional Observatory.

METHOD

Using a quanti-qualitative narrative approach, data were collected (2009-2010) through a questionnaire and semistructured audio-recorded face-to-face interview (about 1 hour) focussing on:

- the feelings and thoughts about the children's personal story
- the experience of life in foster care
- the relationship with the birth family
- the end of their care process and the present life wellbeing level.

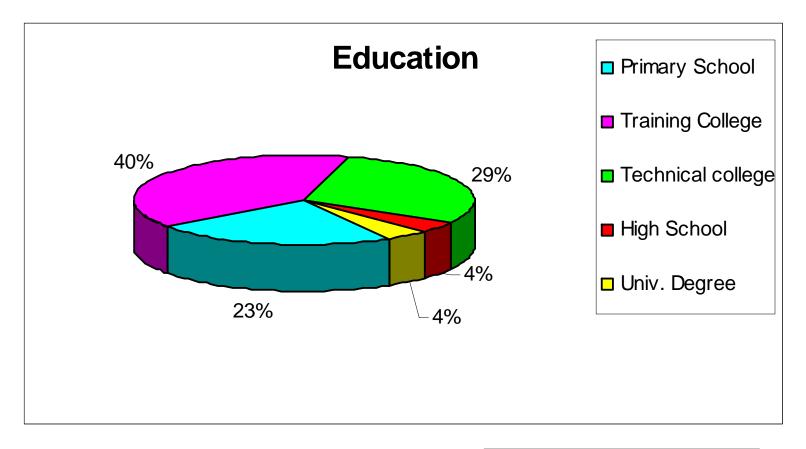
After transcription, the textual material content-analysed through Atlas.ti.

Description of the Group of the Inverviewee and Main Results

Avarage length of placement out of home: 9 years

Number and type of placements:

- 19 one placement in F.C.
- 3 two placements
- 16 from Residential Care to F.C.
- 9 three F.C. and R.C.
- 2 four
- 1 six placements (R.C., R.C. for drug rehabilitation and F.C.).



Training college	2
High School	1
University	6

Employment (%)				
Work 83%		manual labour	49	
	83%	both	36	
		intellectual labour	15	
No work	17%			



Family unit:

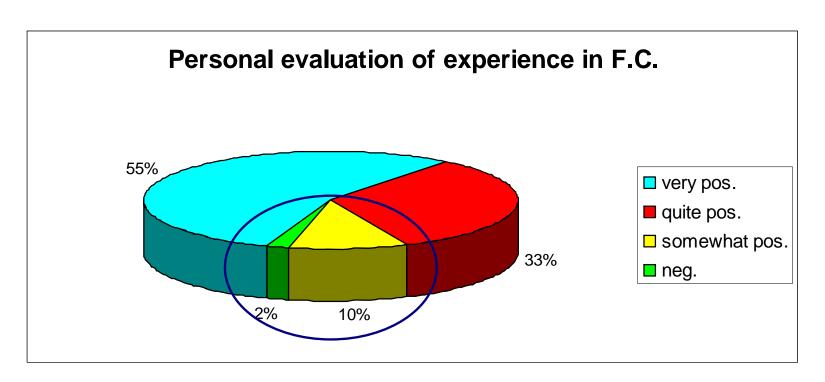
On av. 2,7 people

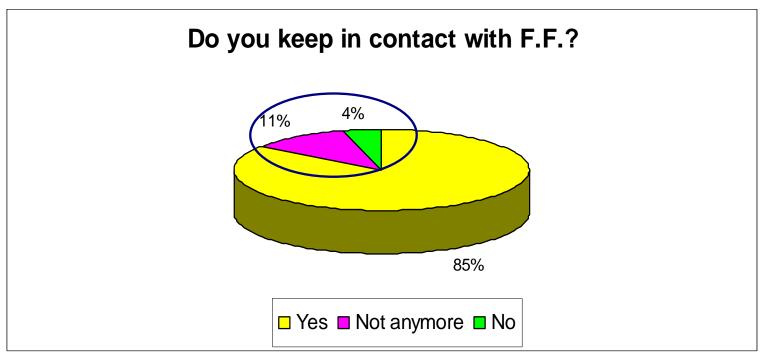
On av. 3,2 people (not including who lives alone)



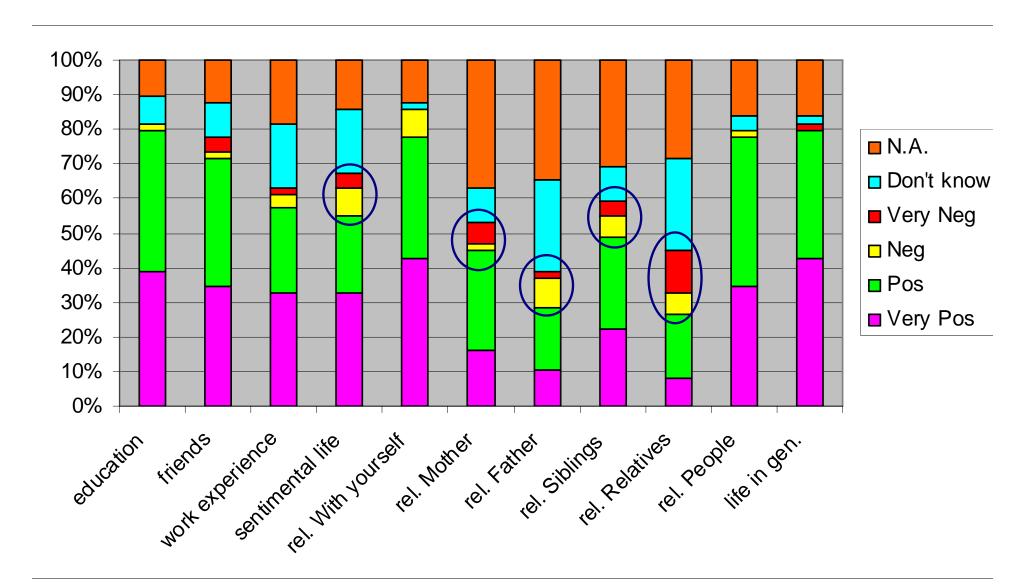
Currently they live with (%):		
parents	20	
siblings	22	
alone	17	
partner	27	
children	9	
F.F.	3	
friends	2	



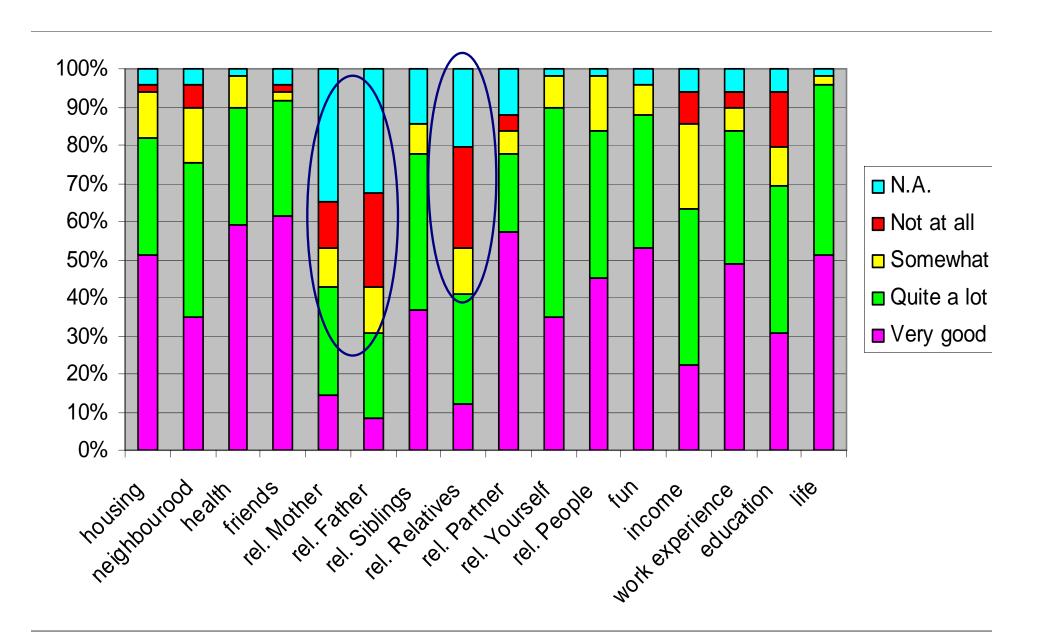




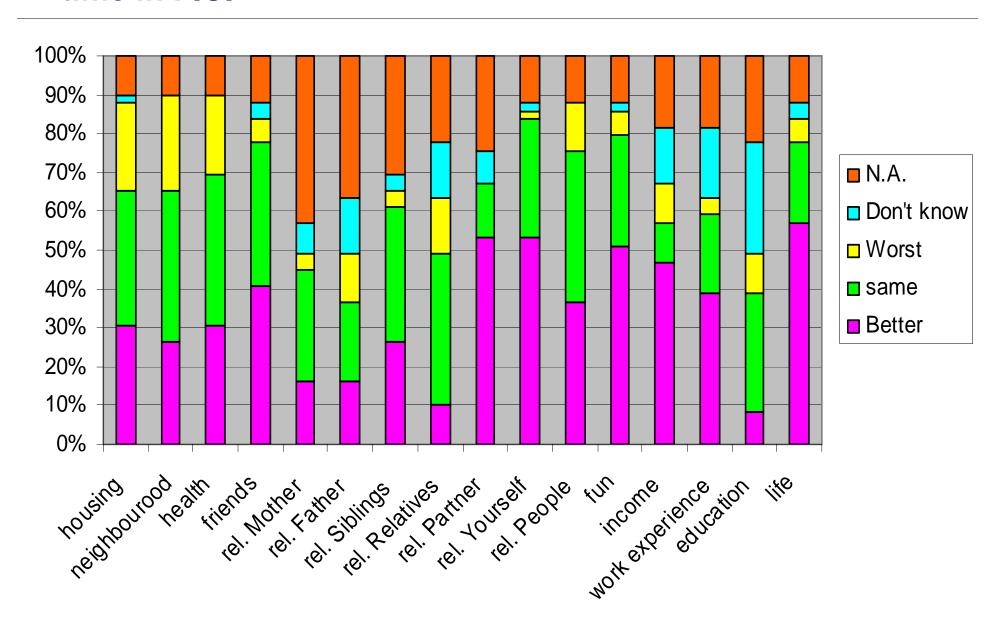
Influence of Foster Family on



Current Level of well-being (%)



Comparison of level of well-being at current time and time in F.C.



The results show the interviewees generally:

- are no longer in care and they show a positive representation of themselves and their life;
- are studying or employed (sometimes both);
- have a partner in a stable relationship, have children or are planning to build up a family (partner children);
- have good relationships within their social context

- show awareness of the importance of the relationship with their F.F.
- report to be still in contact with their F.F. (85%) that often helped them navigating the transition to adulthood (F.F. = own family or wider family);

Main aspects rising from their "tales"

very important the role of **F.F.** – accepted, helped, supported, part of the family – feeling at home (difficulty when they felt not to belong to F.F.) – F. parents as *resilience tutor*,

"Sometimes we got angry, there were some arguing for school issues or other things or misbehaviour, expecially with my F.M. [...] then we would go to be a little bit tired and under my blankets after the light was turned off, my F.F. would come, he sat at the foot of the bed, "What happened? Why?..." "This **dialog**... you know when have a knot inside you and you need to remove it [...] he took them off one after the other and you want to bed [...] **It was beautiful**!" (Laura, 30 y.o., It.)

"This experience changed completely my life, it saved my life" (Carmen, 30 y.o.).

"We lived like it's normal to live in families, I think. But it wasn't in mine. I mean, gathering all together for lunch or dinner, and also **eating the same food**. It may sound nonsense, but for me this means to be closer. Also now, when I'm home and I have guest for dinner, we eat the same food [...] when I lived with my parents I used to eat whatever like everybody did." (Sara, 23 y.o.)

- relationships with social workers and psychologist described as very good or very bad – no rel. (focus on the interpersonal relationship and not on S.W. as manager of care process);
- critics about care process, child welfare and they don't refer to goals;
- not feeling part of care process: just informed or asked about their willing – no involvement;
- the reasons and decisions about care process are often not clear;

I was almost leaving, in car nearby my home and mum told me "You'll live out of home for a while". But **the service was not very honest with me** [...] at the beginning it was for 2 weeks. Mum was told that and the same she told me. Then, 15 days became till Christmas, then till the end of the school year, so a lot of tales... rubbish, it's not nice. (Barbara, 20 y.o., It.).

To tell what the situation is, not to make you believe something not real, it's not fair to tell a child something absolutely not true, **you need to know about yourself**, what you have to expect, we have the right to know about ourselves [...] and if I ask you have to answer me "you won't go home in a month, you're going to stay for 2 years" (Anna, 23 y.o., It.).

DISCUSSION

2 main perspectives of child protection intervention (Sellenet 2010) (often co-esxisting in the service, worker-worker, worker-family)

- Individual focused perspective: the service focus on child protection, often "controlling" and "punishing" his/her parent, or even a volountary or innvoluntary expropriation of parenting skills.
 Child placement = substitution and alternative of birth family
- relational focus perspective: the service focus on protecting not only the child but also his/her world → intervention on protecting and empowering the bond and the relationship between child and parent and social world.
- Child placement = temporary tool aiming at improving and empowering parental skills (*empowerment approach*)

- focus on child protection and not on protection and support of the relationship C-F (the best possible bond);
- **fragmentation** in the narratives no unitary story non continuity within movings-steps (sometimes confusion);
- the family of origin was not involved or full included in the care process (no part of the tales about Foster Care period)
 Presence-strengths-resourses of F.O. not recognized
- family reunification (Maluccio et al. 2002) seems to be due to the strengths of children (their growing/development at age of 18) and parents, sometimes with the help of the FF, and **not as a result** of specific planned work of social workers in empowering parent's competences.

- So... 2 conceptions fighting each others
- 1) Cutting the bond with B.F., no plan of intervention with B.F. and visits
- 2) Pluridimentional conception. No one unique idea of family. Family= configuration of many bonds. F.F.= additional-extra family → plurality of bonds and Care plan aims at supporting and empowering those bonds

Interviewees had and developped perspective 2 and practitioners mostly assumed and put in practice 1 (even if they are aware of importance of working with birth family)

Currently Guidelines on Foster Care (Veneto Region) specifically focus on the work with B.F.

The topic of family participation and co-planning is key in trainings and new projects.

New tools have been implemented to foster the process of working with children and family.

→ Research-trainings-tools...: a common field where researchers and social workers can meet and work together to build up a common knowledge (theory and practice)

