

# International Network Foster Care Research

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**Foster Care in Spain**



## **STRUCTURE, POLICE AND ORGANIZATION**

With respect to administrative structure in child care in Spain the most relevant aspect is the fact of the named "State of the Autonomies". The Constitution in 1978 recognises the right of the regions to become Autonomous Communities with their own regional government, parliament and a large range of responsibilities (including the provision of education, health and social services). Consequently, since then Spain became a State divided into seventeen Autonomous Communities (AACC) and two Autonomous Cities (Ceuta and Melilla). The previous centralised state disappeared and each one of the Autonomous Communities developed their own laws with respect to the fields of health, education, social services and other fields of autonomous domain.

The Autonomous Communities are exclusive in the sense that they can develop policies and practice in social service provision. This decentralization is relevant in order to understand the difficulties to get a global overview of child care in Spain, since it depends very much on each Autonomous Community.

All AACC had responsibility for drawing up their own social service legislation between 1982 and 1991. Given that there are two levels of administrative organisation (Municipalities and AACC) in Spain, there are two separate levels of social services. These are:

1. Community social services: run by Municipalities and based on the community model. The types of services offered to children and families include prevention programmes and the identification of

risk situations, family support programmes and social integration programmes aimed at individuals who are socially excluded.

2. Specialised Social Services: responsibility for these services lies with the AACC administration. Specialised services in the field of child protection include:
  - Residential child care: both for welfare and judicial reasons.
  - Foster care and adoption services.
  - Co-ordination and support for community programmes.

Thus, the municipal and regional levels (AACC) have complementary roles in terms of social services. In the field of child protection, the main responsibilities of the municipalities lie in the areas of prevention, early detection and family intervention. On the other hand, regional social services are responsible for child protection files, legal decisions, and specific programmes such as residential child care, family foster care and adoption.

The recent development of the legal framework with respect to child care provision can be summarised as follows:

- *Foster Care and Adoption Law, 1987*. This Law reformed the civil code in Spain, facilitating foster care and adoption as means of child care. Until that moment foster care did not exist as a possibility for children in care, who were all of them attended in residential care.

- *The Constitutional Child Protection Law, 1996*. This Law constitutes the main legislative framework for child protection, enhancing all aspects of children's rights and treating children as citizens. It also established different types of foster care and introduced an important concept into child care practice, which is that of considering the interests of the child as paramount in all decisions taken with regard to his/her welfare.

In addition to the above national laws, each AC developed its own Social Services Laws and its own Child Protection Laws.

Therefore, foster care (*acogimiento familiar in Spanish*) started as an alternative to residential care at the end of the 80's and it became a specialized program developed under the responsibility and financing of AACC governments. However, most of them have agreements with non profit organisation to provide this service (for example Red Cross, which runs foster care services in several AACC).

According to the 1987 and above all 1996 Law, Foster care can be divided in a number of different types:

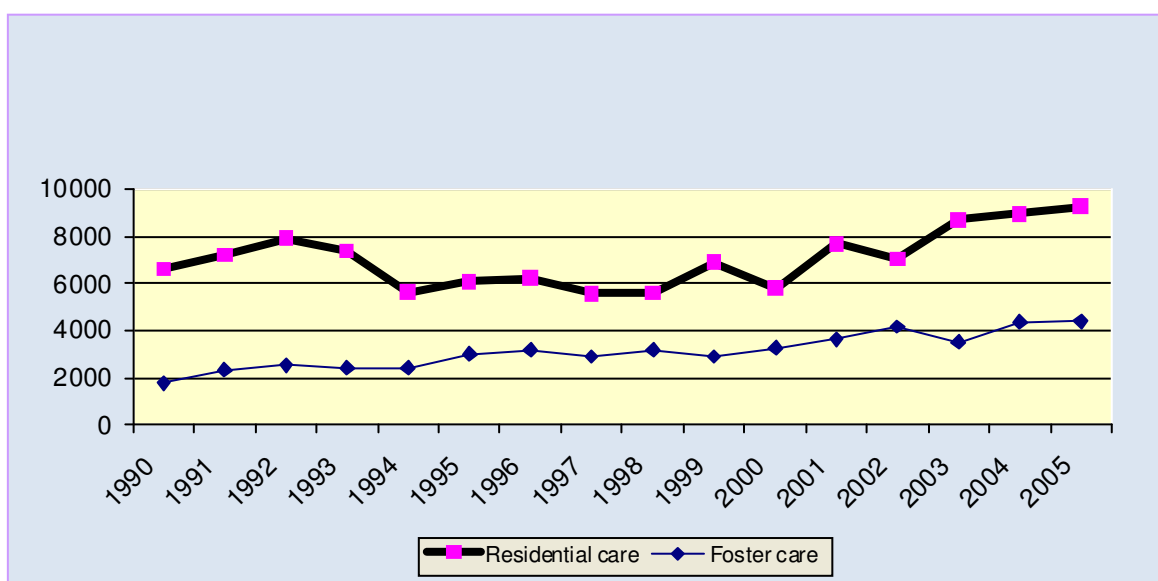
- With respect to foster carers: Kinship care (*acogimiento en familia extensa*) and non relative foster care (*acogimiento en familia ajena*). Lately, the term professionalized foster care is being discussed for foster care in very special cases (for example to attend difficult teenagers) being foster carers paid in terms of a salary.
- With respect to the duration: Simple (short term with the aim of family return) or permanent (long term). The 1996 Law introduced the possibility of provisional foster care as a first protective decision until the court takes a decision, in order to avoid residential care as the unique first resource. Some times this type is also named emergency foster care.
- With respect to the authority: administrative (carried out by CCAA) or by court order (in case of disagreement with parents who keep their *patria potestad*).
- With respect to fostered children: special foster care for handicapped or children with special needs.
- With respect to adoption: preadoptive foster care for the time previous to adoption.

### **Theoretical approaches, discourses and topics**

Foster care was seen as the positive alternative to institutionalization, as this was the only resource to child protection in Spain until the end of the 80's. The 1987 Law established the principle of remaining in family for children whenever possible (with families receiving support in terms of economy, or social, psychological or educative intervention). In case of separation the Law introduces the principle of return to his/her family home as a first option.

Therefore, foster care was seen as a resource for temporary care to return to the family or in case the family could not overcome difficulties, to make a transition to adoption with a new family. Foster care was presented as a temporary resource with short term objectives and above all as a way to avoid residential care. During the 90's foster and residential care were presented as the positive and negative answer of child care and avoiding residential care emerged as the most important advantage for using foster care.

Nevertheless, foster care development in Spain is still very poor and unbalanced among the different CCAA. Figure 1 shows this evolution, where it can be appreciated the slow development of foster care during the last 15 years. On the other hand residential care is increasing (although a relevant part may be due to young people asylum seekers from Morocco and North Africa).



**Figure 1. Number of referrals to foster and residential care in Spain by year (Made from official national statistics: Ministry of Work and Social Welfare, 2007).**

Another critical factor to understand the situation of foster care in Spain is the relevancy of kinship care. Although there are not official statistics, a research funded by the Ministry of Work and Social Welfare (Del Valle & Bravo, 2003) allowed compare both types of foster care. As Figure 2 shows, kinship care represents 46,8% of out of home care in Spain, and foster care (with non relatives) only 7,9%.

This fact opened a serious debate about the reasons for such a short activity for foster care programs. On the other hand, in a more practical consequence, more attention was paid to kinship care processes and particularly the development of support programs for foster relatives.

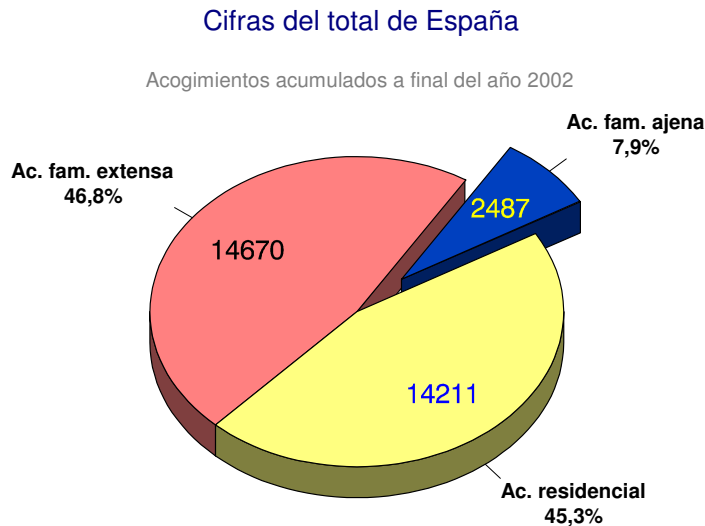


Figure 2. Proportion of kinship care (ac. Fam. Extensa), foster care (ac.fam ajena) and residential care (a. residencial). Data on cases being attended in 31 December 2002 in Spain (Del Valle & Bravo, 2003)

### Research on foster care

Unfortunately, research on child care in Spain was very scarce and just in last ten years started to appear some significant pieces of research in this field. Foster care is particularly forgotten in child care research and national data about essential aspects such as type of foster care (kinship or non relative, simple or permanent, etc.) were presented in Del Valle & Bravo (2003) for first time. Due to the relevance of kinship care in Spain there is more research about this topic (Del Valle et al., 2002; Bernedo, 2005; Montserrat, 2006) allowing to know foster carers and children profiles, family background, and process data (duration, support, number of fostered children, etc.).

Surprisingly, we do not have any research about foster care (with non relatives) in Spain allowing knowing those profiles or basic data on processes. Only a specific program “*familias canguro*” (*baby-sitting families*) for short term foster care funded by an important bank in Spain and developed in most of regions (CCAA) was evaluated and presented some figures (Amorós et al., 2003).

However, the Ministry of Work and Social Welfare is now funding a research about program evaluation in foster care that is being carried out by our research group. In the meeting in Siegen we hope to show an advance of essential data.

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