The role of foster family belonging in recovery from child maltreatment

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Introduction

A rapidly growing body of research both within Australia and internationally has recognised the broad range of negative life outcomes facing children who are removed from abusive or neglectful contexts and placed into foster care (see Barber & Delfabbro, 2004, for a summary of this research). Such research continues to find that children placed in foster care often experience major physical health problems, challenges in developing attachment relationships with caregivers, developmental delays in speech, motor skills and comprehension, and are at increased risk for mental health problems, drug and alcohol abuse, and a generalised inability to form lasting connections with peers (Wise & Egger, 2009). Nonetheless, research has also shown that foster children (like all children) are resilient, and display considerable skill in ensuring that their physical needs are met, in developing meaningful relationships with caregivers, and living lives that they attribute with value (Harvey & Delfabbro, 2004).

One of the ways in which children learn resilience, particularly following abuse or neglect, is through the experience of relationships with stable and nurturing care-giving figures. Research suggests that foster children who display avoidant, resistant or disorganised attachments to parental figures can learn new ways of attaching to those primary caregivers (i.e., foster carers) who take the place of their birth parents (Dozier, Stovall, Albus & Bates, 2001). Research also suggests that children who are provided with opportunities to access supportive nurturing relationships after experiences of maltreatment are more likely to experience positive outcomes and display a greater resiliency to future negative life events

(Horwitz, Balestracci & Simms, 2001). More specifically, and in the Australian context, Wise and Egger (2009) found a significant relationship between placement type and well-being outcomes, where children in family-based foster care as compared to children in residential care were significantly more likely to have attained key family and social relationship objectives. As this data was not longitudinal, it is not possible to definitively state that family-based care produced these better outcomes, but it is nonetheless fair to suggest from the data that there are significant differences in the experiences of connection and belonging between children in family-based care and residential care, and that this cannot solely be explained by differences in their behavioural presentation (i.e., that children in residential care did report higher levels of health-risk behaviours and criminality).

Of course it is important to recognise that children who experience positive outcomes from foster care are very much the product not only of their own skills and resilience in the face of adversity, but also the skills of those people involved in their daily care. In regard to the existing body of research on care providers' experiences, it has been found that an adult's commitment and motivation to care for children greatly impacts upon the success of the foster placement, both for the child and for the carer. More specifically, this research has found that successful placements and a commitment to long-term care provision typically result from factors including the match between the child and the adult, the enjoyment that the adult derives from care provision, and the level of support and recognition provided to the foster carer (Colton, Roberts & Williams, 2006; Denby, Rindfleisch & Bean, 1999).

International research on foster families has identified such families as an important site through which foster children develop a sense of belonging and a positive identity as a person able to succeed in the world (e.g., O'Neil, 2004). Foster children who feel welcomed into a family environment, or who are invited to create family with foster carers, report that this sense of family is central to their experience of stability in the world (Gardner, 2004). Such findings also suggest that foster families typically provide a safe environment in which healing from previous abuse can occur (Schofield, 2002). Relatedly, current Australian research conducted by the authors has found that the successes foster children and carers experience in regards to placement stability are often the result of the formation of nurturing familial relations (e.g., Riggs, Delfabbro & Augoustinos, 2008). From this we have suggested that foster carers who view their engagement in care provision as occurring within a family context are likely to persist in the face of adversity.

Family relations thus provide an important buffer for foster children and carers against histories of abuse, placement disruption or breakdown, and a lack of adequate services and support. As government agencies mandated to provide such services across Australia face an ongoing lack of funding, it is important that existing funding is used in the best ways possible. Whilst the considerable body of research on foster care has done much to identify attributes of positive placements, factors that result in placement breakdown (and the negative effects of this), and the considerations that adults undertake before engaging in care provision (see Barber & Delfabbro, 2004, for a summary of this research), only a small body of research has explicitly examined the unique aspects of foster families themselves that may facilitate recovery from trauma for children removed into care.

This paper examines one aspect of a model proposed in the context of UK foster care by Schofield (2002), who suggests that foster children acquire five 'life lessons' through their experience of living in a foster family, and that these help to counter the effects of previous maltreatment. Schofield's model suggests that placement in foster care equips foster children with the ability to 1) love, 2) act, 3) think, 4) hope and 5) belong. This paper focuses upon the final 'lesson' – that of belonging – and in particular the five aspects of belonging identified by Schofield: 1) family solidarity, as evidenced by practical and emotional support, 2) family rituals, 3) family identity, 4) family relationships, and 5) family culture, as evidenced by norms, values and aspirations. Through an examination of interview and focus group data collected with Australian foster carers, the analysis provided highlights the ways in which this group of carers have engaged in practices of belonging that may be seen as creating opportunities for healing from abuse for foster children.

Method

The data analysed here are drawn from a broad corpus of individual interviews and focus groups conducted as part of a national research project examining why people choose to become foster carers and how to best attract new foster carers. Ethical approval was sought and granted from both the University of Adelaide and the foster care organisations with whom the foster carers were registered. Ten interviews with couples and fifteen focus groups were conducted with men (n=31) and women (n=49) from a range of cultural backgrounds and with a broad range of care experiences across four Australian states using a semi-structured interview

schedule. Interviews and focus groups were audio taped and transcribed orthographically, and all participants were allocated a pseudonym following transcription to ensure anonymity.

Findings published thus far from these data utilising thematic analysis have consistently found that what foster carers require is recognition of the family status of their care provision (for those carers who provide long-term care), and that foster carers have the capacity to understand the care they provide as offering modes of healing from previous trauma for foster children (Riggs, 2008; Riggs, in-press; Riggs, Augoustinos & Delfabbro, 2007). With these findings in mind, the model proposed by Schofield (2002) was examined for its relevance to Australian foster families in the sample. As Schofield's research was conducted with foster children, it was considered inappropriate to attempt to extrapolate evidence about children's capacity to love, hope, think or act from data collected with foster carers. It was, however, deemed appropriate by the authors to examine how foster carers understand their role in nurturing a sense of belonging, particularly as the topic of belonging was identified in early thematic analyses of the data as a salient topic across many of the interviews and focus groups. A decision was made to collapse two of Schofield's categories into one (those of family relationships and family culture), as there was no clear difference between the two made in Schofield's research.

Based on the categories of belonging identified in Schofield's (2002) paper, a content analysis was conducted on the entire dataset utilising the NVIVO data management programme. This involved searching for key terms within the

dataset, including the four sub-categories of belonging and additional terms identified as relating to the category of 'family' in previous analyses of the data such as 'belonging', 'daughter', 'son', 'love' and 'bond'. Across all 80 participants, 50 individuals (62.5%) were identified as talking about family (or one of the key terms relating to it) in at least one instance (with a total of 55 instances identified, as some participants spoke about the topic of 'family' in more than one discrete instance in their focus group/interview). In focus groups this typically occurred as a discussion between participants of which all members of the group took part. It should be noted that a question related to 'family' was not included in the interview schedule, which instead focused on motivations to care provision.

Once identified, all of the paragraphs pertaining to family (and accompanying questions from the researcher) were collected for analysis as individual extracts. These extracts were then carefully examined as to their relationship to the four categories of belonging under examination. Of the 55 references to 'family' that were identified, 46 of these were determined as directly related to the four categories, with 10 pertaining to family solidarity, 12 pertaining to family rituals, 15 pertaining to family identity, and 9 pertaining to family culture

Following the tenets of discourse analysis (e.g., Potter, 1996), with a focus on both the rhetorical devices deployed by participants to legitimate particular claims about belonging, and an examination of the broader social contexts upon which the participants appeared to draw, an in-depth analysis as reported below was conducted on eight extracts (two for each of the four aspects of belonging examined here). These extracts were chosen both for the relative diversity of participants

represented by the extracts, and for their clarity of attention to the aspects of belonging to which they pertain. Brief demographic information is reported for each participant, as previous analyses of this data (e.g., Riggs & Augoustinos, 2009) have suggested that differences do exist amongst participants in relation to their experiences of care provision, and thus in the spirit of qualitative research it would appear important to render visible demographic differences even if these are not subject to analysis.

Importantly, the approach to analysis adopted within this paper is less concerned with producing generalisable findings about a particular population, and more concerned with exploring the apparent range of discourses available through which a specific topic is constructed. As such, the analysis presented here, whilst broadly indicative of the ways in which Australian foster carers from across four states talked about their understanding of belonging within foster families, may not necessarily represent all of the ways in which Australian foster carers understand belonging. Nonetheless, the findings provide important insight into the experiences of foster carers in the Australian context

Analysis

In the following sections each of the four aspects of belonging as identified by Schofield (2002) are briefly introduced, with representative extracts then provided illustrating how the Australian foster carers in this sample spoke on topics related to each of the aspects. Close attention is given to each of the extracts to elaborate

upon the theme of belonging, with specific analytic focus paid to the implications of the understandings of belonging elaborated and their relationship to healing from previous maltreatment for foster children.

Family Solidarity

In her definition, Schofield (2002) suggests that family solidarity amongst foster carers and children takes the form of kinship relations, which despite their often non-biological nature (obviously excluding kinship carers), closely resemble those relationships between biologically-related family members. Most importantly, Schofield suggests that such solidarity is not temporary, but rather represents a long-lasting bond between family members. Whilst in biologically-related families this sense of solidarity often (though not always, as we see in the instance of children removed from abusive birth family situations) results from the very fact of being born into a family – through the claims to family membership and commitment that are typically made to a child born into a family – claims to solidarity amongst non-biologically related family members are often enacted in unique ways. In previous research conducted by the authors (Riggs, Delfabbro & Augoustinos, 2008), it was found that many foster carers report a 'conception narrative' that marked the founding of their foster family. These types of narrative may be seen to demonstrate a form of family solidarity as suggested by Schofield. The following two extracts further highlight claims to enduring solidarity attested to by the Australian foster carers in this sample. In the first extract Susan, a single heterosexual woman providing long-term care and who had provided care for over

thirty children over twenty years, talks about the ways in which she stays in contact with children previously in her care:

> Interviewer: Are you in contact with the children you have cared for who no longer live with you?
>
> Susan: I try to keep in touch, even if it is just on their birthdays. I can remember birthdays like you wouldn't believe. Birthday cards, Christmas cards there has probably only been a couple of families that I wouldn't have wanted to still keep in touch with. I say that once you come through my front door, it is always open. So many of the children I have cared for, who are now adults, have told me how important it is being able to still know where I am and that I am thinking about them.

Here Susan makes clear reference to the ongoing nature of the relationship she has formed with children in her care, and most importantly, that the children (now adults) understand the permanency and commitment of the relationship. For children who come into care, and who may experience 'placement drift' as a result of challenging behaviours or insufficient placement options, a sense of permanency may often be lacking (Barber, Delfabbro & Cooper, 2001). This can result in a sense of isolation from other people in the world, or an inability to establish meaningful relationships as adults. Carers such as Susan provide foster children with the opportunity to explore the possibility of developing connections and to understand that despite their previous experiences of maltreatment, it is nonetheless possible to engage in long-lasting relationships with other people. In the second extract, Roy

talks about the impact that the 'little things' make in the lives of foster children, which give them a sense of place in a broader sense:

> Roy: The teenage years if you are there and they are involved in sport you don't have a problem. Karate or whatever if you can support them and take them and pick them up and be there. I noticed that when the boys were younger and they played football, I would be sitting out in the rain, my wife wouldn't come because it was too wet, but I was there, that was all they wanted. They needed someone to talk to afterwards about the game they had just played. Those were the little things I noticed impacted on them more than anything else because you were there. And even when our boys were teenagers, because when they came home, they had a meal cooked and someone was there to talk to them.

Although Roy constructs his attendance at football games as being 'little', we can see that his willingness to be there in the rain, to listen, and to show care, provided an important sense of connectedness for the children in his care. Throughout their interview Roy and his wife spent considerable time elaborating the ongoing commitment they have made to the two boys they raised as foster carers, and the positive outcomes that they believe the boys (now men) have displayed in their lives. Roy's account suggests that being there consistently, and providing children with the knowledge that someone will listen to them, can play a key role in scaffolding repair from maltreatment that allows children to understand the world as a safe place in which other people are concerned for their welfare. Creating a sense of belonging through demonstrations of care, no matter how 'little', show to children in care that they are valued and welcomed into the foster family in which they live. As Roy's words suggest, this process of showing interest has long-lasting

effects: his interest and willingness when the children were younger potentially translated into their willingness to share with him and his wife in turn when they were teenagers.

Family Rituals

Rituals of belonging are a typical part of many families, regardless of their structure or formation. Such rituals tell a story about the family to its members, and provide the members with a sense of belonging through shared traditions or practices of meaning making. Rituals may be as simple as annual holidays taken or household practices that are commonly agreed upon by family members. Rituals may also be more complex, in the form of stories told amongst family members or accounts documented by both foster carers and children to record the history of the child and their location within the foster family. Many of the foster carers who spoke as part of this research identified rituals that they engaged in to develop or maintain connections with foster children, as evidenced by the following two extracts. In the extract below Dawn talks about the ways in which she has aided foster children in having ways of telling their life stories:

> Dawn: Our foster daughter was placed with us pretty much from birth – the birth mother didn't see the baby at all. So I picked her up and bonded like that and I did a diary every day so that when she got a little bit older she had a record. I wanted her to have an idea of what her life was like when she was young, and all the things we did together, and also so she could possibly share this with her birth mother one day. I have since done this for our other children

since and it is something they love to look through and tell their own stories about.

In this extract Dawn, who along with her husband cares for five foster children on a long-term basis, talks about the practical things she has done to facilitate a sense of connection for the children in her care, both with their birth parents, and with their own histories. Many of the foster carers who spoke as part of this research stated that they felt a drive within foster care systems towards placing birth and foster families in antagonistic relations with one another. Yet in the face of this, many foster carers spoke of finding ways to include birth families, or at the very least to ensure that foster children had ways to connect with their birth families. Dawn's commitment to recording the children's life stories holds the potential to demonstrate to foster children the many places to which they can belong, and to allow them to claim membership of both their birth and foster families, rather than expecting them to 'choose'.

In contrast to this image of foster carers working with birth families, other foster carers spoke of rituals that supported foster children through negative experiences with birth parents:

> Mary: When the social workers decided to force overnight access with her birth mum against our foster daughter's will it was horrible. I used to sing this little lullaby to her and when she returned from access with her birth mum she told us she used to sing the lullaby to herself to comfort herself and we would sing that to ourselves, it was such a strong bond there.

In this extract Mary, a lesbian foster carer who, with her partner, had provided care to a child for ten years, spoke of a range of very negative experiences that had resulted from decisions made to support reunification with the birth mother. Whilst this decision was eventually overturned, it had been a negative experience for the foster child, and for Mary and her partner. In this extract Mary speaks of a ritual that had carried them all through these experiences – that of a lullaby they had sung to their foster daughter which held special meaning to them all. This sense of connection had been a source of 'comfort' for the foster child in challenging times, and the 'strong bond' between them all as a foster family had ensured that the child had the capacity to heal from the negative experiences. Whilst it would ideally be the case that decisions were made in practice that prevented foster children from being exposed to further opportunities for maltreatment by birth parents, this may not always be the case. Having means to recover from this (as provided by rituals of care in foster families) is thus an important tool that foster children gain from their connections to foster carers.

Family Identity

As research conducted by the authors would suggest (Riggs, King, Delfabbro & Augoustinos, 2009), foster children often experience stigma as a result of their identification as 'children out of place': as children who, by the very fact of abuse, are located in situations outside of the norm of the nuclear family. Schofield (2002) further suggests that foster families themselves may experience stigmatisation from within society on the basis of their non-normative family status. Research conducted by the authors (Riggs & Delfabbro, 2008) similarly suggests that

Australian foster carers in this sample experience a degree of stigmatisation on the basis of the assumption that they are 'just in it for the money'. Schofield suggests that developing a sense of family identity can help to counter these experiences of stigmatisation by giving family members a sense of pride in their identification. For foster children this sense of pride may often be evidenced in their desire to identify foster carers as their primary family, or to claim foster carers as their own, as we can see in the following two extracts:

> Jude: Everyone just knows me as his mum unless it is someone I know or I chose to discuss it with. When I phone up the support agency I say I am the children's carer just so they can differentiate whether I am the birth mother or carer, but other than that I am his mum.

> Interviewer: And did you ask to be called mum?

> Jude: No it is just something he did. It seemed really important to him to be able to claim me as that, especially with all he had been through.

In this extract Jude, a single heterosexual foster carer who provides long-term care to a child with a disability, talks about the claim that the child has made to her as his mother. Like many foster carers, Jude stated that being given this title was not by her provocation, but rather was something that the child had done themselves. Australian research on foster care has similarly suggested that many foster children display the need to reach out to foster carers and to name their relationship to them as significant through the allocation of names such as 'mum', 'dad' or 'parent' (Eitzen & McIntosh, 2004). Furthermore, this research suggests

that the connection symbolised through this naming must be recognised for the important healing work it does for foster children who seek to establish meaningful relationships with parental figures. Carers such as Jude thus play an important role in providing children in long-term care with the opportunity to claim significant relationships with adults as a means to recovering from previous maltreatment. In the following extract Dan, a gay foster carer raising three foster children talks of one of his foster children's understanding of their family and their claims to Dan and his partner as parents:

> Dan: With the second child who came to live with us, the first child who we have had for 4 years said 'do you want to share my two dads', even though he doesn't always call us that, which we thought was quite cute. He calls us that to other people because that is how he sees us – as his parents – even if we don't necessarily use the language of 'dads' at home.

This extract demonstrates not only the ways in which foster children understand the relationships they have with carers in long-term placements as parent-child relationships, but the capacity of foster children to 'educate' other foster children about their place within a foster family. This signifies the importance of both foster carers and other foster children in generating a sense of belonging for foster children who have recently entered a placement. Such welcoming may be considered vital to the development of a sense of belonging that involves support from all family members, not solely the adults in the family.

Family Culture

One of the hallmarks of any family is the culture that it engenders. Somewhat different to family rituals, which are typically taken as referring to the specific practices that family members undertake, family culture refers to the broader beliefs or values that shape the family. Schofield (2002) suggests that, over time, foster families come to develop their own sets of values that represent the coming together of the existing beliefs that both foster children and carers bring to the family, in addition to the ones that they develop together. This sense of a shared culture further structures the narrative of family that foster carers and children hold, as demonstrated in the following two extracts.

> Adam: Recently I have really noticed some of the things that our eldest does that show our shared concern for things in the world. He will bring home his fruit peels or cores because there is nowhere to put them at school and I am like 'I never actually told you to do that', so there are some values he has taken on of his own accord. I even saw him tell a guest off at our house recently for putting vegetable scraps in the bin. This person made it out like I had brainwashed him but the reality is he is old enough to have heard my views and made a decision about what the thinks about them, and then to choose whether to agree with them or not.

In this extract Adam, a gay foster carer of two children, speaks of instances where his teenage foster child engages in behaviours that Adam himself endorses as environmentally responsible. Whilst, as Adam reports, other adults have considered this to be a form of 'brainwashing', Adam suggests instead that these are behaviours that the child has chosen for himself, and which represent a shared view of the world within the foster family. Much like within any family, children in

foster families will develop values that come from the things that their parents say, but which will always be tempered by their own perspectives on the world. Respecting the capacity of foster children to make informed decisions, and to develop family cultural practices with foster carers, is an important aspect of acknowledging the forms of belonging that foster families engage in. In the following and final extract Mark, who cares for two teenage boys with his wife, speaks of the cultural practices that his foster children introduced into their family:

> Mark: Before the boys came to live with us they had never played sport or done anything. I am a great lover of sport but didn't want to push it down their throats. We just took them to league games and they thought they were fantastic. They also taught us about things – they exposed us to new music and interests that we hadn't been aware of before. This year they both won scholarships to a school on the basis of their sporting abilities: there were six scholarships given out and they got two.

In this extract Mark begins by acknowledging the interests that he and is wife introduced to the children, and which subsequently became a part of their family culture. Importantly, Mark demonstrates some of the significant gains that can be made for foster children who become a part of a foster family culture and the sense of belonging it produces: in this instance the children have secured scholarships to support their education. Mark then moves on to acknowledge the interests that the children have introduced – that of music. Mark speaks of his life as being enriched

through his engagement with his foster children, and that their family culture is very much informed by all of the family members, rather than simply being driven by the interests of the adults. In other findings we have suggested that foster carers are potentially uniquely placed to develop forms of non-proprietal family relations with children that move beyond a top-down model, and which instead acknowledge the skills and interests of children as active contributors to the shaping of foster families (Riggs, 2009). Particularly when children come into care as teenagers, foster carers must engage with their existing interests, and attempt to find ways to connect and engender belonging in ways that encompass all that foster children have already experienced, including life with their birth families. Valuing the interests of foster children can help them to develop a sense of connection through having their experiences shared and validated by significant others.

Conclusions

In this paper we have examined some of the broad ways in which this sample of Australian foster carers appear to work with the children in their care to engender a sense of belonging and family. Following the work of Schofield (2002), we have emphasised four aspects of family belonging: family solidarity, family rituals, family identity and family cultures. We have explored some of the ways in which the Australian foster carers in this sample engage in these modes of belonging and the positive outcomes this produces in relation to recovery from maltreatment. As

such, we have emphasised the central role that foster families can play in this recovery, and the unique configurations of foster families that potentially position them as ideal situations in which to enact alternate forms of adult-child relations.

Of course it must be acknowledged that the data reported in this paper may not be representative of the experiences of all Australian foster carers or the children in their care. Moreover, the data speak only to the experiences of foster carers engaged in long-term care provision to children not biologically related to them (who were the majority of the participants in the project), and thus do not tell us anything about the experiences of carers providing short-term care or kinship care. Nonetheless, the findings mirror those produced both within Australia and internationally on the significance of belonging and family to foster children and carers, and they also closely connect to agendas for foster care set by agencies and support organisations in the child protection sector across Australia.

As such, these findings clearly validate agendas that aim, where appropriate, to support the formation of foster families, and to recognise the role that foster carers can play in foster children's recovery from previous maltreatment. This approach is increasingly undertaken in 'therapeutic foster placements' across Australia which, through intensive intervention from health care professionals in collaboration with foster carers, attempt to provide children with spaces in which to heal from trauma (Australian Childhood Foundation, 2009). The findings presented in this paper would suggest that foster families in general may usefully be considered as playing a role in offering a therapeutic space in which children may witness models of parenting that are supportive and which offer the opportunity to belong. In this

sense, foster care in Australia may be considered to have an ongoing role in meeting national child protection agendas through the work of foster carers and those who support them. Directing resources to this end would thus seem an appropriate use of child protection budgets aimed at ensuring practices are undertaken to make the best use of available opportunities and to provide adequate support to those people working directly with children to ensure positive outcomes.

Of course it must be acknowledged that any simplistic notion of belonging to foster families for foster children will likely be confounded by a sense of multiple affinities: to birth families, to friends, to foster families and potentially also to social workers. Importantly, and as indicated in the analysis, some of the foster carers in this sample were aware of these challenges for foster children, and reported being active in their attempts at supporting foster children to integrate a range of (possibly competing) claims to belonging so as to enable them to claim a positive space in the world. This would suggest that an important aspect of future training and recruitment strategies must be a focus on how potential foster carers understand the type of belonging they offer, and how this must have the capacity to address the multiple and complex needs that many foster children will bring with them in relation to their sense of family.

In conclusion, whilst the findings represented here must be taken tentatively, as they do not include the voices of children, and only represent an extrapolation of understandings of belonging within foster families taken from a broader research project on motivations to care, they nonetheless highlight some of the important

work being undertaken by this sample of Australian foster carers in working with children in healing from previous traumas. Whilst this paper does not provide definitive findings on the relationship between placement in a foster family and healing, it most certainly indicates the need for future research on this topic with the aim of better understanding the role that foster families play and the services they require to enable this to occur in the best possible ways.

Acknowledgments

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