

Foster Care as a Form of Support to Dysfunctional Families – Theoretical Views and Social Work Research Perspectives

T. Bak (Tadeusz Bak)¹, L. Szot (Leon Szot)²

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¹ University of Presov in Presov, Slovakia

² Pontifical University of John Paul II in Cracow, Poland

E-mail address:

Tedbak@wp.pl

Reprint address:

Leon Szot
Pontifical University of John Paul II (UJPII)
Ul. Bernardynska 3
31-069
Cracow
Poland

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Michael Costello
University of Scranton School of education, USA
Gabriela Lezcano
University of California, San Francisco, USA

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Abstract:

The authors explore the complexities of foster care and analyze it as a form of support to dysfunctional families within the framework of today's social work research and practices. They take into account various socio-legal aspects of foster care and examine its socio-legal evolution. In the course of their analysis, the authors examine differences,

as observed by social work researchers in implementation of foster care worldwide, and in selected countries. Finally, the authors identify research trends in the area of foster care support from social work perspectives and provide respective key examples of research studies.

Introduction

Many children have been reported to be exposed to abuse and psychopathology as it frequently occurs in dysfunctional families, i.e. a family where relationships between members are not conducive to emotional and physical health; where some conditions such as sexual and physical abuse, alcohol and substance addiction, delinquency and behavior problems; extreme aggression; eating disorders are observed and legally confirmed. In such situations, foster care is believed to be an ideal solution to provide temporary emotional and developmental stability to the affected children. However, there has been extensive research conducted to prove that alternative care arrangements may also lead to or aggravate already existing children's interpersonal and social impairment.

The foster care might be socio-ethically understood in two ways. Its positive meaning implies that foster care should offer stabilizing roles to dysfunctional families' victims such as children or other family members affected by family dysfunctions. Its negative meaning demonstrates today's societal dysfunctions related to social identity misperceptions observed amidst members of dysfunctional families as well as a broad spectrum of defeat of today's politico-social orders in delivering and nurturing the protection of a family as a social value, which should be recognized not only in theory but in practice as a bedrock of a socially healthy society.

The most representative social work literature which has dealt with issues related to foster care gradually started to appear in 1966, initially in the United Kingdom. Most

scientists who analyzed foster care themes to 2005 considered the then existing literature a non-homogenous group. As of 2005 until present - a considerable growth of scientific interest has been observed in the areas of socio-psychological and social development of children, satisfaction of their needs and challenges connected to the roles of foster parents. At present, the subject matter literature is considered to be substantial and homogenous. It combines research achievements in the disciplines of sociology, psychology, social work, development studies, law studies concentrated on exploration of the following themes: 1) intergenerational aspects of foster care, including early motherhood experiences and transmission of distresses connected to child abuse, neglect and domestic violence; 2) impacts of foster placement on foster children and foster parents; 3) relations between economic poverty limitations of birth parents and foster care arrangements; 4) education and social development of foster children; 5) socio-psychological development of foster children, foster parents and their relations; 6) child protection themes.

Socio-legal framework for foster care, major definitions and key research efforts

Over last years, the fact sheets concerning dysfunctional families' victims, particularly children, indicates that dysfunctional family remains a serious global and social problem. In 2010, worldwide it was estimated that 143 million children remained separated from their birth families, out of which

– 95% were subdued to family foster care. In turn, in 2017, UNICEF assessed that out of 80% children world population circa 2.7 million between the ages 0 and 17 lived in foster and residential care settings. It has been acknowledged that many children in foster care settings experienced a feeling of great loss, maltreatment, other complex trauma and behavioral problems.

Legally binding and non-binding internationally recognized arrangements are crucial for national and transnational connotation of foster care; its domestic legal and socio-cultural evolution. The United Nations Convention on the Rights of Child's Article 27 stipulates that every child has the right to "a standard of living adequate for the child's physical, mental, spiritual, moral and social development" and its parents are responsible to "secure within their abilities and financial capabilities, the conditions of living necessary for the child's development". Furthermore, the Article 18 of the Convention declares that "parents or, as the case may be, legal guardians, have the primary responsibility for the upbringing and development of the child". In line with the Article 20 of the Child Convention, in case of parents who find themselves unable to perform these duties, national authorities may decide to remove their children and place them in alternative care settings upon determination of stressors' appearance such as parents' mental and physical health problems, occurrence of domestic and community violence, substance abuse by parents, stigma or other emergencies, e.g. a parental death.

In November 2009, in order to reinforce efforts to promote family reunification and provide clear worldwide definitions of so-called "alternative care" associated concepts, the United Nations issued non-legally binding Guidelines for the Alternative Care of Children. The Guidelines draw upon Western European and European Union's

legally binding standards concerning alternative care specify that alternative care might have two forms: formal care and informal care. "Formal care" is understood as "all care provided in a family environment which has been ordered by a competent administrative body or judicial authority and all care provided in a residential environment, including in private facilities, whether or not as a result of administrative or judicial measures." All formal care services delivered by the State and non-State actors such as Non-Governmental Organizations as well as private and faith agencies, organizations are meticulously specified to avoid activities' duplications. Whereas, "informal care" is defined as "any private arrangement provided in a family environment, whether the child is looked after on an ongoing or indefinite basis by relatives or friends (informal kinship care) or by others in their individual capacity at the initiative, his/her parents or other person without this arrangement having been ordered by an administrative or judicial authority or a duly accredited body".

It must be stressed that the worldwide alternative care literature refers, as the United Nations do, to two main genres of alternative care: family based and out-of-home/not in the home of a family. Within the family based arrangements, the literature distinguishes two types of care: 1) "kinship care" i.e. "family based within the child's extended family or with close friends of the family known to the child, whether formal or informal in nature" and 2) "foster care" which means "situations where children are placed by a competent authority for the purpose of alternative care in the domestic environment of a family other than the children's own family, that has been selected, qualified, approved and supervised for providing such care". The competent authority hereby means the State Authority at national, regional or local level, or

a Non-Governmental Organization in countries without formal care where care mechanisms are poorly developed. Subsequently, not family-based out-of-home placements comprise: 1) “residential care” settings which are group settings; safety and emergency care; short- and long-term care group homes such as for example orphanages or other care institutions; Buddhist Monk Pagodas, Muslim madrasas, boarding schools; 2) supervised independent living arrangements usually provided for children who have reached adolescent age.

Foster care, unlike adoption, is not perceived as a permanent relationship as its arrangements are bound to offer temporary, short-term nurture or training; however it might result in a long-term friendship. Researchers indicate that foster parents, unlike adoptive parents, are motivated not by a wish to formally enlarge their family but to provide a temporary family-like assistance. Although, the socio-legal alternative care related literature provide for definitions of various alternative care settings as outlined above, real-life differences in foster care services models between countries have been underlined by the research community. For example, in Georgia, South Africa, the Russian Federation and Ukraine, foster care might include so-called guardianship and kinship foster care arrangements which encompass monitored and sanctioned formal care settings conducted by statutory organs where children are raised by kin, relatives or friends.

Regional and national cultural history and traditions have molded contemporary norms and regulations of child welfare worldwide. In Central and Eastern Europe as well as in the former Soviet Union of the 20th Century, there was a strong practice of residential care placements of children who were considered a social problem. In many African and Arab cultures, the care and upbringing of a child is still seen as

a responsibility of parents, their extended family and community, as it was the case in pre-colonial times, while in European cultures residential care arrangements are yet used rather commonly.

Of note in this respect, are worldwide and regional comparative research which commenced to be conducted in recent years. In 2017, a group of researchers led by S. Chaitkin on behalf of SOS Villages International issued a study for the European Commission which compared alternative care, including foster care arrangements in Asian, African and Latin American countries and in-depth in 6 countries - most populated in the world - Nigeria and Indonesia, with modest population - Chile and Ecuador, and with smaller population - Nepal and Uganda. The factor of religion type as well as poverty rate was taken into account while performing the research. Chile and Ecuador are predominantly Christian; Nepal's religion is predominantly Hinduism, less Buddhism. Nigeria is religiously reported to function as a split between Christianity and Islam, Islam is acknowledged to be the main religion of Indonesia, while Uganda is 85% Muslim and 15% Christian. The study stressed that religion was a driving force in all selected countries and it had entirely determined their alternative care arrangements.

The study resorted to the use of semi-structured interviews with 244 locally-based informants, field visits and web-searched engines. It displayed that informal care arrangements “are by far the most prevalent form of alternative care arrangements” and the use of residential care settings “outstrips that of formal family-based placements such as foster care”.

The researchers admitted that data on alternative care arrangements were inadequately collected and analyzed by the selected states, while supervision and monitoring mechanisms of care arrangements

were deficient. It was also demonstrated that poverty was not the main reason to place children in alternative care, while sending children to so-called religious schools in Indonesia, Nigeria, Nepal and Uganda was well perceived and often practiced within these societies. The report indicated that a small percentage of children held in residential care such as religious schools had no living parent. The study revealed that kinship foster care was widely used in these countries, while formal foster care, i.e. taking a stranger's child had been rarely socially accepted and had been treated as a western imposition.

Apparently, 27% children who remained in alternative care in Indonesia came from families where domestic violence occurred. In Nigeria, domestic violence was a key factor for informal and formal foster care arrangements. The authors' study stressed that broadly in Africa and Asia abuse, exploitation, including sexual and neglect were not major reasons for alternative care placements, but it contrast, these factors played significant roles in Latin American countries. Armed conflicts in countries such as Nepal and Nigeria were also important causes to place children in alternative, including foster care arrangements. The study finally stated that formal foster care arrangements lacked national funding which were available in European, western sphere's countries.

Another study which is treated as significant for the recent comparative worldwide research in the area of foster care mechanisms and arrangements is the Baltic Sea States Regional Report dated as of 2015. The report was prepared through a desk review of national, regional and international literature, official data and statistics were collected through a survey of the research group in alternative care. The report covered the following countries: Denmark, Estonia, Finland, Germany, Iceland, Latvia,

Lithuania, Norway, Poland, the Russian Federation and Sweden. Data indicated that there was a total population of 302, 314 children under the age of 18 years old in alternative care in all Baltic Sea States and that all countries resorted to the use of residential care and formal foster care settings.

The ration of family-based versus residential care arrangement ranged from 47% family-base care in Germany to even 88% in Norway. On regional average, 58% placements were family-based. In most countries, more than 50% of children who remained in foster care settings were deprived of parental care. The highest percentage of children in alternative care – 2.3% were in Latvia, while the smallest – 0.85% in Sweden. For example in Poland, 74% of children remained in family-based care with 26% in residential care; in Norway 64% were in family-base care and 36% in residential care. Researchers underlined that the alternative mechanisms varied a little between countries, while economic, demographic and ethnicity factors were determined as not decisive for introduction and implementation of respective alternative care models.

The authors' report found that in most cases, monitoring, supervision and implementation mechanisms for alternative care were highly developed and duly organized. The applicable laws in the selected countries were regulated by general civil codes; laws on social services; social protection; labor market; child welfare; child protection; and children's rights laws. A high degree of law fragmentation was reported in all countries. This led to creation of multi-faceted machineries of various mandates and responsibilities which, as researchers confirmed, was a common practice in other Western European states. The study revealed that the causes for the removal of children from their birth families were complex and wide-ranging: 1) parents were unwilling or unable to provide care to their children due

to illness, mental health issues, substance abuse; 2) parents exerted physical, sexual and psychological violence on their children; 3) parents found it socio-economically difficult to raise children; 4) parents left their home country and were not willing to come back.

Additional Social Work Perspectives

In order to further explore the issue of foster care, including how it may indeed contribute to social development and stabilization of dysfunctional families, the following key themes need to be taken into account: 1) intergenerational transmission of foster care; 2) educational efforts aimed at foster care children; 3) improvement of socio-emotional relations between foster children, their birth parents and foster parents. The child protection associated topics would play hereby a cross-cutting role that should be present in all three above mentioned themes. The research findings and social work practice in the area of intergenerational transmission of disadvantages such as foster care and child abuse confirm that an overrepresentation of children of foster care alumni in the foster children group is frequent. In accordance with social learning theory, children observe parents' negative/positive reactions and behaviors. If parents' behavior is rationally verbalized, there is a high probability that their children would consider it a regular norm. Subsequently, children tend to multiply these behaviors, imitate them, particularly once they become parents, they might also perceive foster care as a solution to their family problems. Similarly, Social Attachment Theory indicates that parental behavior is transmitted onto their children, including negative behavior styles which actually are replicated in child's behavior once she/he becomes a parent regardless of the fact that a memory of

a particular negative behavior is actually incoherent. The resource perspective theory also suggests that foster care alumni experience difficulties transitioning into adulthood and later parenthood on the grounds of a lack of social and personal resources.

Substantial research results in intergenerational transmission of foster care were accomplished by Danish researchers who studied intergenerational transmission of foster care in Denmark. In Denmark, similarly in other European countries, a risk of foster care placement in pre-school years is 1.5%; 3% in teenage years, while for example the latter in the United States stands at 5%. Researchers in the research sample of the 1977 cohort took into account 30,379 women out of whom 5.2% experienced foster care as children as well as their children and their fathers – the final sample consisted of 15,213 parents whose majority experienced foster care in teenage years. The research revealed that 7% of children had mothers from the foster care alumni while only 1% of children had their mothers with no foster care experience. The researchers used a regression model to examine parent-child associations in foster care.

An extensive research study which focused on educational efforts for foster children was recently issued by a group of British researchers. It outlined the evolution of the legal British system and British Social Work practice; took stock of achievement of foster children's education; called for innovation practices. The researchers proved that education for children in care has been recognized by the socio-legal systems in Britain as important but still lacked integration in placements and schools and that the children needed to be granted education which encompassed two elements: a broadly based social development and an education focused on performance. They recalled that children in public care accounted for less than 1% of the population under the age

of 18 years old in Britain; whereas nearly 45% of young people aged 5-17 years old who were looked after by local authorities, including in foster care, were reported to suffer from mental and conduct disorders, anxiety, depression and hyperactivity. Approx. 70% of children in care in England have been assessed as having special educational needs. The study also called on Social Workers to undergo training on the educational needs of children in care; be aware of the legal entitlements of children in foster care to efficiently protect their rights as this has not always been the case. The study is considered as evidence-based informal guide for those who professionally on a daily basis deal with foster care themes.

An exhaustive study issued by Dutch and Norwegian researchers covering the third foster care research theme - the improvement of socio-emotional relations between foster children, their birth parents and foster parents might be given as a recent research example. The study concentrated upon psychosocial needs of children in foster care and the impact of sexual abuse. It appeared that there was a limited knowledge on needs prioritization and lived experiences of foster children. For the purpose of the study, AQ Methodological study was conducted with 44 youth aged 16-28, out of which 15 reported to have been sexually abused in their childhood. By-person Factor Analysis allowed forming groups of respondents, while qualitative interpretations showed differences and similarities between the groups. The study revealed that groups identified that following needs as their priorities: safety, self-esteem, self-actualization and belonging.

Conclusion

The research performed in the area of foster care support to dysfunctional families' social stabilization cover a wide spectrum

of themes, including intergenerational; educational; psychosocial; socio-economic aspects. Both research oriented on selected countries' situations as well as comparative studies analyzing several countries' socio-legal realities in foster care provide an important perspective for Social Work that should be further explored, researched and turned into practice by Social Work Curricula depending on socio-legal and socio-cultural regional and domestic contexts. Legal and Social Work Practitioners should further recognize major points and findings which have been identified by the research community in the domain of foster care including efforts which national authorities should undertake to reunite children with their birth parents whenever possible as well as to focus on child care reforms which should strengthen family cohesion values.

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