Almost two-thirds of children and young people looked after by local authorities in England are placed in foster care. Recent studies suggest that the looked after population is significantly different from the general child and young people population in terms of mental and physical health and educational attainment. Failure to recognise and acknowledge the reality of the nature and needs of this population contributes to the current difficulties in providing sufficient and appropriate foster carers. Methods of recruitment, retention and support of foster carers still, in many cases, reflect a historical, now inaccurate, perception of the fostering task. Recent government initiatives have placed a welcome spotlight on the fostering service and are likely to result in improved services. However, the Choice Protects focus on effective commissioning of fostering resources, while necessary, may not be sufficient. In this article, which arises from the observations and conclusions of BAAF social work staff engaged in extensive consultancy with a large number of fostering agencies, Barbara Hutchinson analyses the current situation and proposes key features for the development of an effective fostering service. Her paper was written with support from Jane Asquith and John Simmonds.

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Introduction

Fostering plays a major part in delivering services to looked after children and their families in England. Local authorities are experiencing great difficulties in providing the number and quality of placements needed and are responding to this in a variety of ways. There has been considerable attention paid to improved ways of recruiting carers accompanied by the creation of a variety of specialist support and payment schemes for carers undertaking different tasks.

A large and growing number of independent fostering agencies have come into being over recent years in an attempt to meet the need for more and better placements. In March 2002 the Government announced the Choice Protects Review, one objective of which was to look closely at fostering services and help local authorities commission and deliver high-quality placements for looked after children.

All of the above initiatives are to be welcomed and can be expected to contribute to the improvement of the service. This article argues that the much needed increase in the provision of appropriate placements will not be achieved until agencies, supported by central government, do the following:

- recognise the actual nature of the placements needed, arising from the distinct characteristics of looked after children;
- plan accordingly to provide an adequate number of appropriate placements;
- put in place a structure which requires and enables foster carers to develop and demonstrate the necessary knowledge and skills;
- regularly assess the capacities of carers at different points in their fostering career;
- match the needs of individual looked after children with the appropriately skilled carer;
- base the financial reward to the carer on the acknowledged level of skill of the carer rather than on the characteristics of individual foster children;
- create a professionalised fostering service which offers a career structure to carers, with all that involves in terms of training, support, remuneration and working conditions, and in return requires of them a professional commitment to the service.

The current use of foster care

On 31 March 2002, 59,700 children and young people were looked after by local
authorities in England. Of these 39,200, or almost two-thirds, were in fostering placements (Department of Health Statistical Bulletin, 2002). The proportion of looked after children in foster care has remained at around the two-thirds level for the last ten years. Indeed, the absolute number of children in foster care has changed little over the last 25 years. However, this appearance of stability disguises a great change in the use of foster care. The proportion of looked after children fostered rather than placed in residential care has increased substantially during this 25-year period. At the end of 1978, just over 32,000 children and young people were in foster care, but this represented only a third of the approximately 100,000 children ‘in care’, the majority (about 70 per cent) of the remaining 68,000 being in some form of residential care (Prosser, 1978).

As the proportion of children fostered has changed so has their profile. Holman, writing in 1975, described a situation where fostering had traditionally been used to provide long-term homes for children whose birth families were unable or unwilling to care for them. Characteristically, these children had been placed at an early age and a considerable number had either physical or learning disabilities. Fostering, at this time, was not a resource for children identified as ‘maladjusted’: such children, along with adolescents, particularly those with a history of offending behaviour, were considered ‘unfosterable’ and placed in residential care.

The author of this article had her own first experience in social work in the late 1960s in the nursery of a large residential establishment where an extensive group of two- and three-year-olds were placed. Many of these children were black, of mixed parentage, and as such were also considered to be ‘unfosterable’.

The seminal Rowe and Lambert study of 1973 was a major influence in modifying ideas about the relevance of residential care and the ‘fosterability’ of a wide range of youngsters. Other studies at that time also questioned both the cost and the efficacy of residential care. The numbers of children coming ‘into care’ began to drop, a trend which accelerated following the Children Act 1989. In the 30 years since the publication of the Rowe and Lambert study, the number of looked after children has fallen considerably while the proportion of looked after children in foster care has greatly increased. The typical history of the children has undergone a similarly dramatic change.

The children
The children who now become looked after are, on the whole, those who have suffered serious abuse, neglect or trauma and who consequently have the most serious behavioural and relationship difficulties.

In 2002 the Office of National Statistics carried out a survey of the mental health of children and young people looked after by local authorities in England, producing data about the prevalence rates of three main categories of ‘mental disorder’:1 conduct disorder, hyperactivity and emotional disorders (Meltzer et al, 2003). Among looked after young people aged 5–17 years, almost half (45 per cent) were assessed as having a mental disorder.

The results of this survey were compared with the data emerging from a similar 1999 survey on the mental health of children and young people living in private households.

Figures 1 and 2 illustrate the differing prevalence of mental disorders between looked after children and children living in private households.

Five to ten-year-olds looked after by local authorities were some five times more likely to have a mental disorder than those in private households. For each type of disorder the rates for looked after children compared with private household children were:

- emotional disorders: 11 per cent compared with three per cent;

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1 The term ‘mental disorder’ may be distasteful to many readers, but should be understood as a way of standardising a large piece of statistical research. The survey specifically addresses categories of mental disorder taken from ICD-10 and DSM-IV, and uses the term to describe these categories.
Eleven to 15-year-olds looked after by local authorities were also some five times more likely to have a mental disorder than young people in private households. The comparative rates were:

- emotional disorders: 12 per cent compared with six per cent;
- conduct disorders: 40 per cent compared with six per cent;
- hyperkinetic disorders: 7 per cent compared with one per cent.

Additionally, children with mental disorders were much more likely to have poor physical health than those with no disorder and to be substantially behind in their intellectual development.

I am very aware of the danger of labelling looked after children. Of course I am not suggesting that all children in foster care have mental disorders. Many of them thrive, almost against all odds, make solid emotional relationships and do well academically. Nevertheless, given the above statistics and the consistent and repeated evidence of carers and social workers, I do believe that looked after children, the greatest number of whom are in foster care, now need to be considered as a population with characteristics and needs distinct and different from those of children in the general population.

The agencies’ response
Realisation on the part of the agencies of the enormity and significance of the change in the nature of the looked after population has been gradual and partial. Consequently, changes to models of service provision have been introduced in a piecemeal fashion, in response to specific difficulties encountered by individual agencies. For example, the absolute lack of carers has been conceptualised partially as a failure in recruitment and addressed via more sophisticated marketing techniques and co-ordinated campaigns. Some of these campaigns have been more successful than others, but emphasis on recruitment, while necessary, does not address the issue of the fast turnover of carers, many of whom leave after the first difficult placement or within a year of approval, once they appreciate the real nature of the task (Hutchinson, 1998).
Moreover, a sufficient absolute number of carers does not guarantee sufficient appropriately skilled carers: consequently, as individual children prove too difficult for one carer, they are moved on, experiencing a multiplicity of placements and never becoming securely attached to a significant adult.

As agencies have recognised the real needs of many of the children, they have also acknowledged that the historical model of a largely volunteer force of foster parents, accepting a foster child as ‘one more’ into the daily life of their existing family, is no longer viable. Initially, agencies felt that a new model of provision was needed to provide only for the most traumatised and challenging children. From the 1980s onwards, ‘professional’ schemes were developed: carers were paid substantial fees and offered enhanced training in order to care for an identified group of children. Although these schemes were often successful within their own context, difficulties arose not least due to the visible inequities between the fee-paid carers and those caring for children not falling within the definition of the scheme but having equally complex needs.

Agencies have responded also by providing more and better preparation and training for carers. An increasing number of carers now achieve NVQ Level 3 qualifications in caring for children and young people. Unfortunately, this development too, often as a result of financial restrictions, has generally lacked strategic direction, with little possibility of agreeing the number of carers required to be trained to different levels, their deployment and financial recompense.

One interesting initiative has been the emergence of independent fostering agencies, which have developed differing models of provision, most of which have in common the payment of fees to carers in respect of all placements, out-of-hours support to carers and varying degrees of therapeutic and educational support to children in placement. The initial suspicion of local authorities towards independent agencies has mostly been replaced by collaboration between the two sectors. However, lack of local authority placements means that independent placements are often inappropriately used with children finding themselves living long distances from their local community or being subjected to moves when a cheaper in-house placement becomes available.

**The government response**

The government has recognised the current difficulties in providing the high-quality fostering services necessary and has responded with a number of important initiatives:

- A large-scale recruitment campaign was funded in 2000.
- The UK Foster Care Standards set out a framework for patterns of assessment, training and support for carers.
- The Minimum Fostering Standards set the legal parameters for fostering services.
- The Choice Protects initiative was launched in 2002.
- The Social Care Institute for Excellence has commissioned a review of research on the role of foster care in delivering effective services for children and families.
- An examination of ways of maximising the contribution of independent agencies is being carried out.
- A major review is being held to determine how commissioning of fostering placements should best be undertaken.
- Specific amendments with regard to pension contributions by foster carers and taxation of fostering income have been agreed.

2 These two sets of Standards have underpinned the move to a ‘managed’ foster care service and have redefined the relationship between carer and agency support/supervising social worker. However, it is difficult to see how a ‘managed’ service, where the relationship between carer and social worker is one of supervisor/supervised, can continue to exist in the context of a volunteer workforce. Unfortunately, the Standards do not address this issue.
The BAAF proposals

BAAF social work consultants provide regular training courses for the foster carers in numerous agencies, both local authorities and independent fostering agencies. The quality of this was recognised by the achievement of a National Training Award in 1997. We also provide consultancy to local authorities on the provision of fostering services. Analysis of information gathered as part of reviews of fostering services, as well as feedback from fostering managers and foster carers, has convinced us that an ad hoc, piecemeal approach to solving each problem as it arises is gravely insufficient. Instead, a more strategic, whole-systems approach to the provision of fostering services is needed.

It was argued earlier that the specific needs of the looked after population will be met only by highly trained and skilful carers. Such carers are obviously not formal therapists but they must be able to provide a therapeutic environment for traumatised children and work with a whole care team of social workers, doctors, educationalists and therapists. I do not believe that the level of knowledge and skill needed will be achieved by providing general preparation and training pre-approval and then allowing individual carers to decide whether or not to attend further training. Fostering service providers need to:

- make a clear assessment of the needs of their present and potential looked after population and the consequent profile of carers needed, in terms of numbers of carers at different skill levels;
- recognise that the competences required to be demonstrated in order for an applicant to be approved as a foster carer provide only a baseline of necessary skills;
- provide a structured training programme to enable carers to build on the baseline skills, thus producing a group of carers to meet the profile earlier identified;
- obtain evidence that training has actually enabled carers to develop new skills;
- match the needs of the children placed to the identified skills of the carer;
- reward carers financially according to the skill level achieved, not according to specific characteristics of particular children placed at any one time.

The above proposals, if implemented, would make heavy demands on both service providers and carers. These are only achievable in the context of a fully professionalised fostering service.

The features of such a service would be:

- financial rewards for carers to be based at a level that would allow carers to regard fostering as their full-time employment;
- fees to be paid on a 52-week per year basis, regardless of whether a child is in placement;
- financial reward to be based on the demonstrated skill level of the carer, and the undertaking of work for the agency agreed to be appropriate to that skill level;
- support for carers to make provision for pensions;
- professional supervision for the foster care family which helps the carer recognise the personal impact of caring for traumatised children and develop strategies for managing this;
- professional development of carers to be tied, where possible, to externally recognised qualifications/frameworks to enable carers to plan career development;
- respite care for foster care families;
- entitlement to paid holiday periods;
- accessible, appropriate ‘out-of-hours’ support.

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3 For an intensely moving account of the type of therapeutic re-parenting needed by traumatised children in foster care see Cairns (2002).
Projects incorporating many of these features have been developed to provide placements for particular groups of children. Walker et al (2002) describe how one such scheme successfully allowed appropriate foster carers to be recruited and retained for a particularly needy group of young people in Scotland. We would suggest that what has been proven to be effective for short-term projects now needs to be replicated in mainstream services to provide the required quality of care for all those in foster placement.

BAAF has been working with a number of local authorities to develop and implement such models of fostering provision, tailored in each case to meet the needs of the specific agency. Despite some initial reservations at all levels of these organisations, it has proved possible to introduce such models without increasing expenditure or alienating staff and carers. Early reports suggest that agencies have been able to improve both recruitment and retention of carers, work more effectively with independent agencies and, most importantly, provide the quality of placement needed by looked after children and young people.

References
Walker M, Hill M and Triseliotis J, Testing the Limits of Foster Care: Fostering as an alternative to secure accommodation, London: BAAF, 2002

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