
Can the corporate state parent?^{1, 2}

Discussions about provision for children in the care of the state have continually raised the question, can the corporate state parent? **Roger Bullock, Mark E Courtney, Roy Parker, Ian Sinclair and June Thoburn** consider the question in the light of recent studies of separated children. It is argued that while the state does not need to fulfil all parenting responsibilities when care is shared with families or children are adopted, for three groups of children parenting issues are especially salient. They are: children in kinship care, in long-term foster family care and young people who are seriously troubled and troublesome. Research that would produce relevant information and recommendations to improve the state's parenting is suggested.

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Introduction

In the late 1970s, the National Children's Bureau (NCB) in London set up a working party under the chairmanship of Professor Roy Parker to consider the care of separated children. Their report (Parker, 1980) paid particular attention to issues surrounding the needs and experiences of children in the care of the state. In the United Kingdom this means placement in settings provided or purchased by local authorities and includes foster family care, residential settings, kinship care and support for children returning home but still under the supervision of the care authority.

There had been longstanding concerns about the nature and extent of appropriate state involvement in parenting children. This relationship became particularly salient in the Second World War when over one million children were evacuated from cities and coastal resorts to safer areas. Although official government

figures (Titmuss, 1976) claimed few harmful effects, anecdotal evidence suggested a different experience for many children and families that questioned the quality of care offered to all separated children. This disquiet was highlighted by the death of Denis O'Neill who died from neglect in 1945 after being placed in a foster family. However, an inquiry into the care of separated children had already been established (the Curtis Committee). This had been necessary before wider financial social security reforms could be introduced in place of the old Poor Law system which had hitherto been the organisation charged with looking after children for whom the state became responsible (Cretney, 1998). The result was that new arrangements for the care of children who needed to live away from their families were recommended (HMSO, 1946) and passed into law in 1948. Public child welfare services were, at last, separated from any vestige of the Poor Law.

In the social sciences, interest in the effects of separation on children's development was also growing. John Bowlby (1946, 1951, 1953) had highlighted the separation of a child from his or her mother as a risk factor of poor social and psychological adjustment, although by the time of the NCB Working Party this rather rigid view on maternal separation had been tempered by other researchers, particularly Michael Rutter (1972), who argued that the effects depended on the context, that is, the circumstances under which the child was separated as well as what happened next.

Although the NCB initiative occurred at the end of a decade of major childcare reforms in the UK, such as the closure of residential nurseries for young children, other concerns endured. Institutional

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placements continued and the number of children in care in the UK had risen to over 100,000 (a rate of 7.5 per 1,000) during the 1970s (compared with a rate of 5.5 now). Moreover, professional decisions on the reduction and termination of contact between absent children and their families were increasingly challenged by human rights organisations.

In the United States the discussion was more advanced than in the UK and frustrations at the poor results achieved for children in care, the stigma and conspicuously different status vis à vis other children (Schorr, 2000) and the success of demonstration projects that reunified children in care with their parents (Stein and Gambrill, 1977) meant that the concept of the state as parent was already being replaced by the notion of permanency as an overarching perspective. This had implications for expectations about the parenting role of the state, since this was expected to diminish as children in care were either returned home quickly or adopted. It was therefore sufficient for the state to orchestrate these ambitions without too much concern for the wider parenting tasks intrinsic in long-term relationships with separated children.

One of the problems facing the NCB Working Party was the dearth of robust research evidence, not just on the effects of separation but also on the long-term experiences of children in care. The only significant studies published in the UK were two that showed higher than expected rates of fostering breakdown (Trasler, 1960; Parker, 1966) and one which found that many children in state care lacked any legal or emotional security and were left 'waiting' for something to happen, which rarely did (Rowe and Lambert, 1973). Apart from this, there was little information about the process of separation or the psychological adjustments it demanded and although many case

histories and theories were offered, most of them had not been tested empirically.

Faced with this situation, the Working Party sought a framework to approach the issue, but as discussions progressed on how practice could be improved and the impediments to good-quality care reduced, a deeper worry came to haunt the debate. What could the state actually do for these children? Hence the arresting question: can the corporate state parent?³

The aim of this article, which takes a mainly UK perspective but refers also to research and policy developments from the USA and other countries, is to reconsider this fundamental question in the light of the changes that have occurred over the past 25 years. At least seven are significant:

- There have been radical policy and practice shifts in child care with a run-down in residential care (although not for older teenage offenders), more use of fostering (almost universal for young children in care), more use of adoption as a route out of care and more services to ensure that children who might once have entered care are supported at home.
- There is now far more research on children in care, much of which comprises longitudinal studies and comparisons of different care settings.
- There have been big changes in legal processes and arrangements with respect to decisions about placement and birth family contact.
- The views of children, carers and birth relatives have been extensively gathered.
- More international comparisons of child placement policy and practice have been published.
- Academic studies have refined the earlier findings of Bowlby and Rutter to establish more precisely the nature and

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³ The use of the word corporate needs some explanation. In 1980, some children in care in the UK were the responsibility of non-governmental organisations, such as the large children's charities. The word corporate was used to include them, in the sense of a set of agencies or a corporation. Since then, however, the use of the word has come to imply a whole community or society in the sense that child welfare should be every citizen's concern (Laming, 2003) which, of course, clouds the issue.

extent of the risk and protective factors associated with separation.

- The increase in training and qualification of staff has led to greater professionalism.

One result of these developments which is relevant to the question under discussion is a move away from considering children in care as a homogenous group and the recognition that there are major differences, not only in their presenting needs but also in their wishes for the future.⁴ One important difference is the likely length of their stay in care. Higher thresholds for entry into the system (not always accompanied by more effective family support services) mean that those entering care tend to stay longer. Although in the UK (unlike the USA) most still enter care under a voluntary agreement with their parents for respite or short stays as part of a family support service (Packman and Hall, 1998; Aldgate and Bradley, 1999), the trend is towards more care orders which are associated with longer stays in the care system.⁵

What is parenting?

Before judging the state's ability to parent, it is necessary to clarify the parenting task. The literature suggests two aspects. The 1980 Working Party emphasised the end states for the child in terms of the healthy psychosocial development that sound parenting produces. It listed the ingredients of such parenting as: affection, comfort, nurture, the provision of role models, exerting control, stimulation, protection and meeting the child's need to be needed (pp 67–8). Thus, it emphasises

a collection of roles and responsibilities that are tied together by life-long bonds, obligations and natural affection.

When a child comes into state care, it argued, there are four changes in his or her situation that are significantly different from ordinary families and which reduce the likelihood of achieving these ends (p 63 ff). The first and most significant in terms of affecting the state's ability to parent is the fact that:

the very existence of state care means that certain rights and duties become invested in corporate organisations rather than private individuals. Yet many of the essential parental responsibilities which corporate bodies assume can only be exercised by individual people working with the child concerned. Full responsibility, however, is rarely assigned to them: attachments tend to be partial and open to disruption as the professionals and the children come and go. In sharp contrast parenthood in our society depends upon personal, comprehensive and continuing commitments to children, reinforced by mutual emotional attachments between them and their parents. Once a child enters substitute care there is a separation of actual care from formal responsibility.

The second change in the child's situation arises from the fact that when an organisation assumes a child's care, its responsibilities are discharged by dividing them into a number of activities performed by different groups of people, such as birth parents, foster carers, social workers and managers, therapists and legal representatives. The important point is that this

⁴ Studies by Sinclair and colleagues show that a small minority want to go home and relinquish contact with their foster carers, and a larger group want to return home but maintain this contact. Among those who want to remain looked after, a small group want to be adopted, often by their carer. A further small group want to stay with their carer without any family contact, while the largest group want to remain in foster care at least until they are aged 18 and often beyond, and see more of selected relatives. There may be considerable uncertainty and ambivalence attached to these views. Nevertheless, each of these wishes clearly exists among separated children and each has implications for the style of parenting required to meet children's needs.

⁵ In the UK, around two-thirds of the children who enter care do so under voluntary arrangements in that parents can take their child back quickly and easily, although several studies have suggested that parents are often inhibited from doing so in the face of legal orders. As many of these children only stay for a short time, the proportion of children in care at any one time under voluntary arrangements is only one-third, the remainder being separated on a legal order that restricts parental rights.

division is not only a matter of degree but also a reflection of the fact that neither the birth parents nor the day-to-day carers carry the responsibility for maintaining overall and integrated continuity of care for the child.

A third complication is that although certain rights and duties are transferred to the state when a child comes into care (and this differs depending on whether the child is in care under a legal order or accommodated under voluntary arrangements), the process is not exact and the Working Party asked: what precisely are the duties and rights of a care authority acting *in loco parentis*?

The fourth change emphasised by the Working Party is that the child makes new attachments which may supersede, erode or conflict with earlier ones, creating special tensions for children, carers and birth relatives.

A rather different view is taken in a discussion of parenting by David Quinton (2004). In an overview of a government-funded research programme on ways of supporting parents, he focuses on what parents have to do to produce satisfactory outcomes for children and families. Thus, his initial concern is with tasks, which echoes the discussion of the Working Party but in a less abstract way. For this he relies on Pugh, De'Ath and Smith's work (1994) and lists: physical care, affection, positive regard, emotional security, setting boundaries, allowing room to develop, helping develop skills, helping cognitive development and facilitating social activity. He goes on to emphasise that parenting is something parents do rather than a quality they possess. Thus, it involves a mixture of tasks, behaviours and an ability to handle relationships. The capacity of parents to do all of this well, it is argued, depends on genetics, childhood experiences and current circumstances (p 27).

In drawing out the implications of these components of parenting when children no longer live with one or both birth parents, there is a consensus among all the researchers cited that parenting for children in care has several facets – legal, social, psychological and biological. At a national level, the state establishes a legal

framework and provides resources for services that orchestrate broad welfare aims, such as regulating those who select, vet and train carers. At the local level, professionals, usually social workers, assume responsibility for various aspects of the child's life, such as placement in a family, safety, education and health. At the personal level, parenting responsibilities are allocated to carers who provide the face-to-face aspects of looking after children and therefore the long-term benefits. These may be shared in different proportions by birth parents and relatives who may, especially for children entering care when older, remain the 'psychological parents' alongside the foster carers.

Researchers at the University of York have explored further what constitutes parenting and have identified empirically the factors that promote a sense of 'permanence' for the substitute carers and for the children themselves. They found that reducing placement disruption was a fundamental requirement and that this was achieved by: increasing carers' ability to cope with disturbed behaviour, especially disturbed attachment behaviour; minimising destructive interference from birth relatives; enabling the child to reach a *modus vivendi* with their birth parents so that they are not torn in their own minds between yearning and rejection; and enabling the child to adjust to school and to enjoy her or himself there. Carers are more likely to achieve good results if they exercise the kind of 'authoritative' parenting that combines warmth and empathy with clarity about what they want of the child (Sinclair, Wilson and Gibbs, 2005). This, of course, is not only a desirable combination of attributes to be sought in substitute parents but has also been shown to be effective in ordinary families.

Although the children responding to the York researchers' survey expressed a range of wishes for the future, there was considerable agreement that in substitute care:

Carers should care for you, perhaps even love you, treat you fairly and as a member of the family, listen to you, do things with you, offer advice and, perhaps, although

there is less agreement here, provide rules and control. At older ages, at least, they should relax the rules, negotiate and listen to the teenagers' side of the story. These basic provisions should be supported by adequate material goods, a room of your own, holidays, activities and encouragement of your interests. (Sinclair, Baker *et al*, 2005, pp 168–9)

These views have important implications for the question discussed in this paper. For instance, the view that foster carers should care for you in the same way as good parents does not necessarily mean that they are seen as parents. Foster carers do not have the obligation of kinship and cannot provide a sense of heritage for the child. They also find it difficult to be partisan and to offer unqualified aid in times of need and uncertainty. The question is, therefore, how far does the fact that they can act as 'good parents' compensate for the fact that they are not in certain respects 'real' parents? And, what else needs to be done to make the compensation more effective? Is it conceivable that the state can ensure the myriad benefits derived from a life-long relationship with good birth parents for the children for whom it carries responsibility?

Nevertheless, despite the breadth of this discussion, the perspectives adopted in subsequent studies complement the Working Party's original conclusions by delineating the qualities demanded of parents and identifying what distinguishes doing parenting well from doing it badly.

Can the corporate state parent?

Clearing the ground

Given this new knowledge, at first glance the question posed in the title of this article seems inappropriate in two respects. First, the 'state' as an impersonal entity clearly cannot provide the day-to-day care that would normally be taken to constitute 'parenting'. Secondly, it has to assume responsibility for ensuring parenting whether it wishes to or not, otherwise children might die or roam the streets. Welfare agencies are entrusted by the state with the duty of seeking to ensure that all the aspects of parenting listed in the previous paragraphs are provided in a

coherent way to those who need to enter public out-of-home care. It does this for most of these children by attempting to ensure that their own families, their relatives or adoptive families are assessed and helped to provide long-term family life and, if children have to be separated, that there is a safe and timely exit from substitute care.

There is evidence that some aspects of this assessment as well as short-term placements work well (Bullock *et al*, 1998; Packman and Hall, 1998), but also some indications that the state could do better in supporting birth parents, relatives and adopters to ensure 'good enough care' and stability when children are reunified or move to new legal families through adoption or residence orders (shortly to be strengthened in the UK through the introduction of 'special guardianship orders'). In the UK in particular, insufficient attention has been paid to 'reunification work' and this appears to be the least successful 'permanence option' (Harwin *et al*, 2001; Sinclair, Baker *et al*, 2005). More evaluations of 'therapeutic' or 'task-centred' placements, usually of adolescents, have been undertaken in the USA (Wilson *et al*, 2004) but there, as in the UK, a major problem is in securing coherent exit routes from these placements and avoiding movement for pragmatic, administrative or financial reasons when the young person and foster parents, often against the odds, make sustainable relationships.

For those (the minority) who remain in long-term care, the experience can never be the same as growing up in a loving family into which they were born, but it can provide the benefits of good parenting and family life. The fact that the ways in which this is achieved do not reproduce exactly 'ordinary' family life has to be acknowledged. Nevertheless, the increasing diversity of family arrangements may make long-term foster care a less unusual experience. An increasing number of children who are not in care have parents who are separated and, therefore, experience similar divisions in parenting. So, the question has to shift to what sort of family can the state provide?

Who are the children in long-term care for whom the corporate state is a parent?

On 31 March 2004, 70,000 children were looked after by UK local authorities, a rate of 55 per 10,000 children under the age of 18. Around a quarter of them were allowed to live with parents or were placed with relatives, or were older teenagers in independent living arrangements. A further 12 per cent (about 8,000) were likely to leave care through placement for adoption and a small proportion were soon to return home after a short stay. It can be estimated, therefore, that around 35,000 children in care at any one time in the UK will need the corporate state to make 'parenting arrangements' for them for periods of years or until adulthood. About 20,000 will have been in care for four or more years and can be regarded as 'growing up in care'. Most of these will already be with foster carers who are not related to them although, less frequently, some will be with relatives acting, and paid, as foster parents. In a study of over a thousand young people cared for by 24 English authorities for four or more years, Schofield and colleagues (forthcoming) found that their ages on entry to care ranged from under one month to 14 years, with an average of 4.5 years. Most had been abused or neglected before coming into care and many, especially among those entering care when older, had longstanding physical and/or learning disabilities or emotional or behavioural problems. National statistics indicate that around half of children in care for four years or more have spent the last two of these years in the same foster placement. The fact that half have not indicates the extent of placement change for those who stay for a long time in care.

In summary, then, if we look at the role of the UK care system in providing long-term substitute parenting, in the main it does this for children who entered care when past infancy following maltreatment or trauma; but the difficulties are increased because there are too many moves between placements. This is bad enough in the UK where just under 2,000 18-year-olds leave care annually without anywhere permanent to go; but at least

their health and income are protected by a National Health Service and by a system of universal financial benefits. This is not so elsewhere, for example in the US, where children leaving care before the age of 18 can lose access to physical and mental health care and to assistance with their housing. Furthermore, their birth families have no guaranteed child allowance to help look after their returning offspring. Neither are there general policies on such issues as meeting the needs of adolescents, reducing child poverty or improving literacy. Hence, many young people want to stay with their carers after 18 or at the least to have very close and supportive relationships with them. Those who do so certainly appreciate it and some of them seem to be making a considerable success of their lives.

So the initial question 'can the corporate state parent?' breaks down into a series of sub-questions. They are, with the answers suggested so far:

1. Does the state have to parent children? Yes, but it has to do so in a flexible way. Its major roles are to select substitute carers who can meet the diverse needs of the children who come into care and co-ordinate the different aspects of the parenting and professional task.
2. Do children in care need parenting in the conventional sense? Not always in the full sense, for example in short-term settings, shared care or treatment interventions, but yes when children cannot return home safely and for those for whom adoption is not appropriate or achievable.
3. Does parenting provided by the state have to be the same as that provided in ordinary families? Not quite, although there are many similarities in the roles people play and the day-to-day experiences of the children. The important message from research is that the factors predicting the success of long-term substitute placements are similar to those that predict successful parenting in ordinary families. Thus, the tasks to be undertaken, and the qualities necessary to do them, are virtually the same. But some children

in care also need other things that rarely arise in ordinary families, such as managing contact with relatives, therapeutic help and protection from harm. So, successful corporate parenting is more likely to require something extra rather than something different.

4. Is good parenting by the state possible? Yes, there are many examples of success and the care offered during separation is often better than previously experienced by the child at home. But this is less likely to happen in long-term situations for the mixture of reasons described.

This leads to a fifth set of questions which will now be discussed in more detail:

5. If parenting by the state is possible, what is needed to ensure that it is done well? What structures and frameworks need to be in place? Do foster carers need to have the same qualities as ordinary parents or something different?

Does the corporate state succeed in parenting? What is the evidence?

As has already been noted, for many children in care, concerns about the state's ability to parent diminish as children return to live with their birth families or are adopted. Difficulties may continue but they are not directly concerned with the parenting capacity of the state (Parker, 1999). However, for three groups of long-stay children – children placed with relatives, children in long-term foster care and older children who are unsettled and challenging – the parenting questions are more serious.

Children in kinship care

A sizeable proportion of children in care live with relatives as opposed to birth parents. Many of these relatives are approved as foster carers. The proportion of children in care looked after in this way varies across countries. It is around 18 per cent of all foster placements in the UK, mostly for children coming into care under the age of 11. The proportion in kinship care in the USA (25 per cent) is higher than in the UK but not as high as the 45 per cent in Australia. The

proportion in the USA would be higher if children who leave care through adoption by their kinship carers were included. In other countries, similar children will remain in care because adoption by kin is unusual. This provides a way of offering children continuity with their former lives, which they often prefer and which can continue for as long as the need remains. If the particular needs of these placements are met, they provide an important part of foster care provision.

These placements offer children the psychological security of living with relatives with an uninterrupted sense of belonging to their family and, often, home community. Some studies have found that these kinship foster parents are poorer financially, are more likely to have health problems and are less well supported by welfare services than non-related foster carers. In addition, there can be severe strains between the child's parents and the new carers who, for their part, may find the child unexpectedly difficult. Thus, the main issues for these placements are ensuring that financial, practical and emotional supports are provided to the carers and that the educational help and therapy are available to the children to help them recover from the effects of any earlier maltreatment.

Children in long-term foster family care

The second group of children in care comprises those in long-term foster care with unrelated families with whom they are 'matched' by the child placement services. Sometimes, these are planned as 'permanent', 'part-of-the-family' placements from the start and, in terms of the children's daily experience, have much in common with adoption. In other cases, usually involving children placed when over the age of five and with important links with birth relatives that need to be preserved, the possibility of a return to their birth families or to relatives is not entirely ruled out. For most of these, the hope is that they will become part of the foster family while retaining a place in the emotional and social lives of at least some members of the birth family (Beek and Schofield, 2004; Sinclair, Baker *et al*, 2005; Thoburn, 2005). In these cases,

because the legal aspects of the parenting role are retained by the local authority and sometimes also by the birth parents if the child is 'accommodated' under voluntary arrangements, there are often tensions around the delegation or otherwise to carers of day-to-day decisions. The local authority as the 'local state' and as legal guardian, plays its part by selecting carers, introducing legal safeguards for children and overseeing contracts with voluntary or private placement agencies. Thus, the issues in these situations are more likely to concern resources, ways of supporting placements, getting mental health services, schools and other agencies involved, and facilitating appropriate and safe contact with the birth family.

At the time of the Parker report and following the Children Act 1989, the number (but not the proportion) of children in long-term fostering was expected to fall in the UK as stronger reunification and adoption policies were implemented. Nevertheless, many children continue to live in such situations. Encouraging research in the UK indicates that young people can do well in these circumstances and achieve a sense of 'permanence' (Thoburn, 1990; Sellick and Thoburn, 1996; Berridge, 1997; Beek and Schofield, 2004; Sinclair, 2005). Barber and Delfabbro (2005) in Australia, Andersson (2005) in Sweden and Dumaret, Coppel-Batsch and Couraud (1997) in France reach similar conclusions. However, since adoption is very rarely used as a route out of care other than in Canada, the UK and the USA, the care systems in other countries have more success in providing stable substitute parenting to children who entered care when young. The broad conclusion from this body of work is that children who come into care when young, stay for a long time in care and remain with the long-term foster families they joined quite early are likely to do as well or better than similar children who have experienced adverse living situations and/or maltreatment and who remained at home. The evidence is less clear-cut for young people who enter care when they are older, largely because problem behaviours (which often led to the need for care) make it harder to achieve stability

and continuity for them. Nevertheless, many express appreciation that they did come into care and grew up in foster care. Thoburn writes:

Only adoption will meet the needs of some children and only foster care or guardianship will meet the needs of others. But for the majority in the middle, what is needed is a family that can meet their needs and where they can put down roots knowing they are not going to be moved on. For these children, looking concurrently for either an adoptive or a permanent foster family will be the approach most likely to avoid unnecessary delay and avoid the child feeling let down if what they are told is the 'best option', namely adoption, does not materialise. (Thoburn, 2003, p 397)

Moreover, what Beek and Schofield (2004) describe as 'chase-to-keep' families – that is, when a short-term foster carer is confirmed as a long-term or 'permanent' carer for a particular child or sibling group – appear to be more successful in providing stability and the many benefits of family membership than when a child moves to live with 'strangers' or a 'matched' family. There is some research support for this in earlier longitudinal studies in the UK and in the USA.

Reviewing the research on long-term foster care Sinclair (2005, p 30) concludes:

the core studies leave no doubt that:

- *foster care can provide long-term stable care in which children remain in contact with their foster families in adulthood. This is particularly so when the placement is intended to be permanent from the start.*
- *for most children the care system did not provide this long-term stable alternative to care at home.*

He makes clear that for many children adoption is not an alternative, often because they do not want it, and that there are many messages in the research studies which he reviewed that point the way to improving the record of courts and family

placement agencies in securing a greater sense of permanence for foster children and their foster families.

The risks that stability and family membership will not be achieved for an important minority of those who need long-term care are evidenced by the York research. A snapshot sample of 596 foster children looked after on a particular date was followed over a period of three years (Sinclair, Baker *et al*, 2005). It included some where there was no plan that the child would grow up there but others where the placement was intended to be 'long term'. Reviewing this work, Sinclair concludes that:

In a sense long-term fostering is a compromise. It is not family life at home. It is not full adoption. It is not treatment. It is not accompanied by systematic attempts to change the environment from which the child has come. Only in the case of those young children placed for subsequent adoption does it commonly seem the anteroom to a better life. (Sinclair, 2005, p 123)

He continues,

At the most general level, we know a great deal about how to support foster carers and about the kinds of fostering that foster children need. We know much less about how to produce this fostering. Foster carers who are kind, firm and slow to take offence are likely to have better results than others who embody these virtues to a less marked degree. There is much less evidence on how to select, support or train carers so that their performance approximates more closely to this ideal. (p 126)

Beek and Schofield (2004), Selwyn *et al* (2003) and Sinclair, Baker *et al* (2005) particularly highlight the fact that long-term foster homes can be de-stabilised as the young person approaches the age of 18 – the age in the UK, when young people officially 'leave care'. Where relationships are working well, more could be done to encourage them to stay on, or at least to encourage the continuation of practical support and emotional

links as they move into independent living. As these researchers and others point out, 'the key weakness of foster care is not so much what happens in foster care but what happens after it' (Sinclair, 2005, p 122). Similarly, in the US Courtney *et al* (2005) conclude that 'the transition to young adulthood is a challenge they often face on their own'.

Young people who are seriously troubled and may have come to be regarded as 'troublesome'

The third group for whom parenting issues are particularly salient comprises older children. Some are young people who have been in care a long time and never settled down in one place. For some, a planned 'permanent' placement with adopters or foster carers has broken down in adolescence, leading them to a series of temporary care settings, often far away from their home area. Others enter care when they are older and are often rejected by their parents and/or step-parents because of their challenging behaviour. For these acting-out children, the state takes on a different responsibility, namely, to control as well as to safeguard them and in a few cases to protect them from harming themselves or others. The overwhelming empirical evidence from numerous studies is that in all countries this group of troubled and troublesome adolescents is the one whose needs the state most often fails to meet.

Yet follow-up studies show that foster carers and residential staff do care about and develop supportive relationships with these young people and there may be opportunities to provide the benefits of family life and good parenting in foster or residential care for some of them even at this late stage. The leaving-care study by Courtney *et al* (2005) shows that if the state continues to fulfil its parenting obligations until young people move into their twenties, the results are more positive on a range of measures. This is echoed in follow-up scrutinies of leavers from long-stay residential treatment units, particularly therapeutic communities and those which provide for learning-disabled adults. Residential care has long been castigated for being unable to provide

'unconditional love', but in these cases the model adopted is almost one of 'institutional adoption' and although only a minority of leavers receive such enduring support, the long-term outcomes for those who do are encouraging (Little and Kelly, 1995; Bullock, Little and Millham, 1998). However, the high costs of such provision are making this option increasingly unrealistic.

Consequences of the difficulties encountered by the state in parenting the three groups of children

The difficulties which the state encounters in parenting these three groups of children mean that the aims of interventions tend to be pragmatic. Therapeutic miracles and aspirations for children's eternal happiness are discarded for more modest achievements (Lowe and Murch, 2002). For example, in the conclusions to several follow-up studies researchers suggest that although the state may not be able to parent in the conventional sense, a care career in which the parts are concordant and cumulative can help children in their late teens to choose where they want to live and decide what sort of relationships they want with their birth and foster families. The underlying security and support received during their separation hopefully lead to decisions that are more likely to be successful and thus to protect young people from the circumstances that necessitated the original entry to care. In a similar vein, careful management of children's education can provide the child with a wider range of choices in their late teens (Chase, Simon and Jackson, 2006).

This pragmatism can be partly justified because the factors associated with good outcomes tend to be inputs that are open to manipulation. Once in a long-term placement, the focus of work can shift from grand treatment aims and related skills to the relationships between carers and children. For example, the review process can ensure that wherever possible day-to-day decisions, such as agreement to 'stop-overs' with friends, are delegated to foster carers, and that the social work service to carers and children encourages a sense of permanence. Social workers can provide a skilled

intermediary service between birth parents and long-term foster parents and help birth parents to play a positive rather than a disruptive role in their children's lives. This has important implications for helping separated children as the personal qualities of carers become more important as a first requirement in the selection of placements than their skills or training, with the latter building on the former rather than the reverse.

The way forward

So, what further knowledge is required in order to answer the reframed question 'can the corporate state parent?' What research topics and what kind of research would help? Restrictions on space prevent a full discussion of a research agenda and in any case this has been done elsewhere (Courtney, 2000; Axford *et al*, 2005; Little, 2005). But, initially, it is clear that there is value in continuing the tradition in which government departments monitor the effects of legislation, guidance and standards as it ensures that most of the framework of law and principles, if enacted, is the one most likely to produce optimal outcomes for children and families. However, it does not do much to illuminate cause and effects in child care. In addition, the repeated scrutiny of service groups, such as children in foster homes or those leaving care, is producing little that is new. Thus, research of a different kind is needed if more fundamental questions are to be answered.

Three developments would help. Much would be derived from more large-scale follow-up studies of children *per se*, whether in society at large, in need but not separated from home, or living in substitute care. In research studies that follow up children in care, it is especially important to retain in cohorts of care entrants those who leave through reunification with birth relatives, special guardianship or adoption. This programme of work is essential in order to provide an adequate dataset to test hypotheses about the effects of care and to evaluate the effects of interventions. The outcomes measured should be those associated with children's health and development and not restricted to service

outputs such as placement changes or school attendance.

There is also a need for far more experimental research, ideally using randomised controls, but also employing the quasi-experimental opportunities made available through agencies pursuing different policies and practice. The lessons obtained from work with other groups of children presenting long-term needs, such as those with learning difficulties, unaccompanied asylum seekers and those adopted and fostered under private arrangements, can be particularly fruitful. International comparisons are also helpful, provided that the children compared are similar in terms of the nature and severity of their needs, as such studies explain problems and resolutions in terms of wider social developments rather than local legislation or personalities.

The information which is necessary in order to establish an effective children's service has to be gathered professionally, using validated methods for analysing the needs of the children requiring placements as well as the skills and the demographic and economic profiles of potential staff and carers. Only then can effective services be designed in response to that need, perhaps using logic modelling, and recruitment, training and support implemented in a quick and inexpensive way.

Once this background information is available, research studies can be undertaken on the difficult areas of practice highlighted in this paper, such as how best to combine the contributions of different agencies responsible for child welfare, how to achieve concordance when the child makes a transition and how best to support placements. In addition, the effects of complex processes, such as separation and return, can be further explored. Ultimately, we may accumulate evidence on the impact of the timing and extent of interventions, an area that remains an unknown at present, despite its significance for the state's parenting role,

In the past, childcare research in the UK has been rather benign and has tended to reinforce rather than challenge

the professional consensus. Much of it has sought to describe rather than to explain, being content to establish risk associations rather than chart risk processes. Moreover, awkward findings, such as the limited effects of training on performance, have been pushed into the background or have been interpreted in simple ways, such as that all training is unnecessary. We have seen that there are fundamental weaknesses in the state's parenting of separated children which, if they are to be addressed, require a policy commitment based on much more robust evidence about what works for children and families and less on tradition and optimistic belief.

Conclusion: What is needed to make the state a better parent?

It has already been shown that some of the impediments that prevent the state from parenting successfully are a mixture of system, resource and human factors. These cannot be discussed fully in a short article but several reasons that have been highlighted in the literature can be.

The first is that the framework has to be right so that the context is auspicious for optimal outcomes for children and families. Initially, this requires the state to provide legislation and provision that meet the needs of a wide variety of individual children and sibling groups needing long-term care. It includes ensuring equal opportunities for professionals to use those placements and legal options – adoption, special guardianship, residence orders, kinship care or permanent fostering – as they judge to be most appropriate in a particular set of circumstances. The state also has to accept long-term responsibility for children into early adulthood and insist that all agencies serving children and young adults, and not just social services, contribute effectively to young people's welfare. It must also recognise the need to support those children who have left care, including by adoption, residence or special guardianship orders, in order to reduce their re-admission.

The state should then seek better integration between national and local policies so that 'what the system is about' more closely matches 'what the system is

supposed to be about'. This means establishing clear principles and values that underpin services for children and families and applying them consistently. This would reduce conflicts about policy matters between government departments with regard to penal, educational, social security, housing and child welfare policies. At present, children in care get caught up in these inter-departmental arguments which have little benefit for their welfare. Policies on school exclusions, the use of prison custody and the denial of housing and financial benefits are examples. Much depends on the state setting high parenting standards for separated children; otherwise its efforts will be little better than those of the turbulent families from which children were deemed to need protection in the first place.

The second requirement if the state is to be a good parent is that it should ensure that the care offered is of a high quality. Professional standards should apply to the selection of placements and carers and to the interventions used to meet the child's needs in all areas of his or her life. The minimisation of placement breakdown is particularly important. To achieve this, the surrounding support that makes fostering (with kin or strangers), adoption and family reunification work needs to be right. Thus, planning for children, support for carers, contingency plans and the handling of difficult behaviour and complex contact arrangements with birth relatives have to be well coordinated and effective (Sinclair, Wilson and Gibbs, 2004). This is unlikely to happen until professionals and foster carers feel more able to implement the laudable aims that abound in so many reports and government pronouncements on child welfare.

The third requirement if the state is to fulfil its parenting responsibilities is for it to tackle the weaknesses that follow the ending of care in children's late teens. The withdrawal of support, and sometimes the loss of a home, produce a new set of problems for young people that are often glossed over in euphemistic talk about independent living. Young people in normal families do not become

independent at a stroke and dependency in some areas, such as finance, continues long after emotional maturity and adult competence. This has been addressed in recent legislation and leaving care programmes in the UK but improvements are not dramatic. Follow-up studies of care leavers show that most cope eventually, although few are high fliers; but the experience is unnecessarily difficult. Continuities, resources, skills, advice and contingency plans could be strengthened in order to ease the processes that have been identified in this discussion.

A more informed approach to the key issues of matching, attachment and permanence is also required. The term 'matching' is, in reality, a proxy for trying to optimise the chance of carers and child getting on with one another. Yet the process gets confounded with what is viewed as politically correct. As a result, some children wait too long for long-term placements until families are found that meet ethnic, educational or religious criteria. Obviously, it is important to take these considerations into account, but not at the expense of the factors highlighted in the research studies, such as whether carers and children like one another, the personal qualities of the carers and whether or not the child wants to be there.

Similarly, a doctrinaire approach to attachment can serve children badly. It is good social and psychological parenting that is essential if children are to do well; but this is not the same as attachment. Neither is it the same as love. As attachment cannot be generated artificially, the best that can be hoped for is that carers are sensitive to attachment issues and capable of handling conflicting emotional roles that might affect them. If the context is right, attachment might develop or emerge from other things, but it will develop at a pace set by the child and cannot be demanded.

Finally, it would help if the concept of permanence that inevitably occurs in discussions about children in long-term care were more clearly defined. A rigid approach that sees only reunification or adoption as the options does not meet the needs, or respect the wishes, of many children and may be more of a response

to service failures than to a deliberate needs-focused, evidence-based policy. Permanence is manifest in the predictability, obligation and emotional relationships that have been discussed, but it is not a fixed state. The York studies suggest that there are four aspects of permanence: objective permanence which is achieved when the child does not move; subjective permanence which is where the child feels that the placement provides a permanent base; enacted permanence that is achieved when all concerned behave as if the placement is a family (for example, the child goes to all family events); and uncontested permanence, achieved when the child does not feel torn between home and family. These aspects of a placement are obviously associated but they are not the same.

The evidence reviewed in this article reveals much success in what the state does for separated children and suggests that a lot of the criticisms made are unjustified. But it still seems sad that a care system allegedly based on good relationships is wont to obstruct their formation or, where they exist, to squander them unnecessarily.

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