

**AN INQUIRY INTO
FOSTER FAMILY SUPPORT NEED**

by Karen LeVasseur
6024207

A Thesis Report
Submitted to the Faculty of Graduate Studies

in partial fulfillment of the Degree of

MASTER OF SOCIAL WORK

Faculty of Social Work
University of Manitoba
Winnipeg, Manitoba

(c) December, 1998



**National Library
of Canada**

**Acquisitions and
Bibliographic Services**

**395 Wellington Street
Ottawa ON K1A 0N4
Canada**

**Bibliothèque nationale
du Canada**

**Acquisitions et
services bibliographiques**

**395, rue Wellington
Ottawa ON K1A 0N4
Canada**

Your file Votre référence

Our file Notre référence

The author has granted a non-exclusive licence allowing the National Library of Canada to reproduce, loan, distribute or sell copies of this thesis in microform, paper or electronic formats.

The author retains ownership of the copyright in this thesis. Neither the thesis nor substantial extracts from it may be printed or otherwise reproduced without the author's permission.

L'auteur a accordé une licence non exclusive permettant à la Bibliothèque nationale du Canada de reproduire, prêter, distribuer ou vendre des copies de cette thèse sous la forme de microfiche/film, de reproduction sur papier ou sur format électronique.

L'auteur conserve la propriété du droit d'auteur qui protège cette thèse. Ni la thèse ni des extraits substantiels de celle-ci ne doivent être imprimés ou autrement reproduits sans son autorisation.

0-612-35071-1

**THE UNIVERSITY OF MANITOBA
FACULTY OF GRADUATE STUDIES

COPYRIGHT PERMISSION PAGE**

AN INQUIRY INTO FOSTER FAMILY SUPPORT NEED

BY

KAREN LEVASSEUR

**A Thesis/Practicum submitted to the Faculty of Graduate Studies of The University
of Manitoba in partial fulfillment of the requirements of the degree**

of

MASTER OF SOCIAL WORK

Karen LeVasseur ©1998

Permission has been granted to the Library of The University of Manitoba to lend or sell copies of this thesis/practicum, to the National Library of Canada to microfilm this thesis and to lend or sell copies of the film, and to Dissertations Abstracts International to publish an abstract of this thesis/practicum.

The author reserves other publication rights, and neither this thesis/practicum nor extensive extracts from it may be printed or otherwise reproduced without the author's written permission.

ABSTRACT

Foster family support need was examined in this thesis. The Children's Aid Society of the City of Kingston, Ontario and the Children's Aid Society in the Cornwall, Ontario region were chosen to serve as the research sites. Ten foster care staff, foster parents and foster parent association were initially interviewed. These findings, in compilation with information from the literature review provided base knowledge to develop a relevant 12 page questionnaire, which was distributed to 163 regular foster families. The results of the study are intended to be generalizable.

Results found that foster parents perceive they need three types of support: emotional help, with a focus on respect and recognition; concrete help, with a focus on financial compensation; and crisis assistance. Entwined were several secondary themes, including: foster parents care more about quality support than quantitative standards; foster parents indicate that there is an ambiguity in their relationship with the agency; and many foster parents seem to be struggling with the ability and/or desire to fully integrate foster children into their family. It was concluded that support to foster parents needs to be a vital component of any professional system of foster care.

ACKNOWLEDGMENTS

Throughout the process of completing this thesis, I have benefited from the support and professional expertise of a number of people. First, I would like to acknowledge the members of my thesis committee, Professor Peter Hudson and Dr. Diane Hiebert-Murphy of the Faculty of Social Work, and Professor Margaret Tobin of the University Counseling department. I would like to thank Pete for his ongoing support and input over the last two years; his knowledge and forthrightness was valued.

I would like to extend appreciation to the two agencies where I completed my research, the Children's Aid Society of the city of Kingston and the Children's Aid Society of the United Counties of Stormont, Dundas and Glengarry. In addition, I would like to thank the many foster families who took time to share their experiences with me.

There are several family members and friends who have been instrumental in my attainment of this goal. Words cannot describe the contribution my mother, Margaret LeVasseur has made to the completion of this thesis. My mom has been my one lifetime steady support, always believing in me, holding my hand through the good times and the bad, always there - from the science fair projects to the thesis. I can never thank her enough for her unwavering, unconditional love.

My mother-in-law and father-in-law, Steve and Alice Onyshko have continued to encourage and help me in uncountable ways. From the many days of baby-sitting of my son so that I could get some work done to the use of their computer, to their sincere interest in my studies, I thank them both for their love and help.

Finally, I would like to thank the two most important people in my life, my husband, Mike and my son, Benjamin for their day in - day out love and belief in me. Without your unrelenting support, Mike, I could not have attained this goal; you are my friend - you are my soulmate. And to Benjamin, I dedicate this thesis and offer you encouragement and unconditional support and love to attain your goals, whatever they will be.

TABLE OF CONTENTS

Contents	Page number
Abstract	iii
Acknowledgments	iv
List of tables	ix
List of figures	x
Chapter 1: 1.0 Introduction and rationale for study	1
1.1 Learning objectives	4
Chapter 2: 2.0 Literature review	5
2.1 Foster care	5
2.1.1 Foster care in Ontario	9
2.2 Foster parent support	13
2.2.1 Foster parent support in Ontario	19
2.3 Summary	23
Chapter 3: 3.0 Methodology	25
3.1 Research questions	25
3.2 Definition of key terms and concepts	26
3.3 Overview of thesis components	28
Table 1: Thesis components	29
3.4 Researching the Child & Youth Counselor Program	30

Table of contents continued

Contents	Page number
3.5 Research sites and programs	31
3.5.1 The Children's Aid Society of the City of Kingston & the County of Frontenac	31
3.5.2 The Children's Aid Society of the United Counties of Stormont, Dundas and Glengary	34
3.6 Evaluability assessment	35
3.7 Questionnaire development	35
3.7.1 Identifying the method of research	36
3.7.2 Establishing an information base	38
3.7.3 Interview summaries	39
3.7.4 Incorporating the information base into the questionnaire	49
3.8 Designing the survey instrument	51
3.8.1 Issues of reliability and validity	57
3.9 Distribution of the questionnaire	58
3.9.1 Ethical issues	58
3.9.2 Questionnaire follow-up	59
3.10 Research limitations	60
3.11 Methods of data analysis	61
3.11.1 Analyzing the open-ended responses	64
3.12 Feedback to participants	66
Chapter 4:	
4.0 Data analysis and findings	67
4.1 Background information (Questionnaire Part I)	67
4.2 Foster care support services (Questionnaire Part II)	70
4.2.1 What is foster family support?	70
4.2.2 Pre-service training & pre-placement visits	72
4.2.2.1 Pre-placement visits and years fostering	76

Table of contents continued

Contents	Page number
4.2.3 Plan-of-care meetings & initial support	76
4.2.3.1 Initial support and years fostering	81
4.2.4 Ongoing training	81
4.2.5 Foster care worker & child social worker support	83
4.2.5.1 Foster care worker support	86
4.2.5.2 Child social worker support	88
4.2.6 Crisis support	91
4.2.7 Group support meetings	92
4.2.8 Foster parent association support	93
4.2.9 Overall support	95
4.2.10 Emotional vs. concrete support	98
4.2.11 Relief support	100
4.2.11.1 Relief and years fostering	102
4.2.12 Support following a child's removal	103
4.2.13 Additional financial support	104
4.3 General fostering questions (Questionnaire Part III)	105
4.4 Program specific questions (Questionnaire Part IV)	106
4.5 Final questions (Questionnaire Part V)	110
Chapter 5: 5.0 Discussion of findings and conclusions	114
5.1 What is foster family support	114
5.2 Discussion of trends & patterns which emerged from the questionnaire	122
5.3 Final Conclusions	135
5.3.1 Implications for further research	139
References	140
Appendix A: Interview schedule 1: Foster care staff and foster parent association staff	145

Table of contents continued

Contents	Page number
Appendix B: Questionnaire, accompanying letter and informed consent information	147
Appendix C: Quantitative coding sheets	163
Appendix D: Qualitative categorizing and rules	178
Appendix E: Letters of reminder	189

LIST OF TABLES

Table number	Page number
Table 1: Thesis components	29
Table 2: Most helpful types of training sessions	83
Table 3: Types of support foster parents would like to receive from the F.C.W.	86
Table 4: When it is helpful to have phone contact with F.C.W.	87
Table 5: Types of support foster parents would like to receive from the C.S.W.	89
Table 6: When it is helpful to have phone contact with S.W.	89
Table 7: Crisis support needs	91
Table 8: Foster Parent Association support	95
Table 9: Who is most helpful in raising the foster children?	97
Table 10: Who would you choose to help you during a crisis?	97
Table 11: Who would you choose to talk to about fostering stress?	97
Table 12: Who would you call for advice on a behavioural problem	98
Table 13: Who would you call for additional financial assistance	98
Table 14: Rating of support services from CAS	108
Table 15: Rating of support services from the F.C.W.	108
Table 16: Rating of support services from the child's S.W.	108
Table 17: Rating of support services from F.P.A.	109

LIST OF FIGURES

Figure number	Page number
Figure 1: Years fostering for Kingston or Cornwall CAS	68
Figure 2: Number of children currently fostering	69
Figure 3: Total number of children fostered	69
Figure 4: Usefulness of pre-service & core-training for new foster parents	73
Figure 5: Usefulness of pre-placement visits	73
Figure 6: Usefulness of Plan-of-Care meetings	77
Figure 7: Usefulness of initial support when a child is first placed	80
Figure 8: Ongoing training: Is it a helpful support?	82
Figure 9: Number of training sessions foster parents should be offered annually	82
Figure 10: Who provides the most useful support to the foster family?	84
Figure 11: How important is the Foster Parent Association	94
Figure 12: What type of support is most important?	99
Figure 13: Relief: Is it a support to your foster family?	100
Figure 14: Is support following a child's removal necessary?	103
Figure 15: Additional money needed per pay cheque to maintain foster home (per child)?	105

1.0 Introduction and rationale for study

In recent years, social work researchers have drawn attention to the great need for foster parent support programs, identifying it as a vital component in the professional system of foster care (Ure, 1995). Likewise, child welfare agencies are recognizing that support to foster families is imperative in the 90's, since the needs of children and youth who come into care are becoming more severe and complex. The importance and difficulty of fostering and subsequently the need for adequate supports must not be minimized. Fortunately, as a result of this awareness over the past several years, many service providers are beginning to incorporate supportive programming into their foster care units.

In 1988, the Ontario Association of Children's Aid Societies launched a research inquiry into various aspects of foster families in Ontario. With specific regard to support services, foster parents reported that there was a definite need for *"someone to talk to in a crisis"*, for *"relief services"*, and *"to have someone available for guidance and consultation"*. As a result of this finding, the Ontario Association of Children's Aid Societies (1988) recommended:

'that a foster parent support model be developed that would set guidelines for agency foster care staff in developing a foster parent support program - including relief services, emergency consultation, treatment and behaviour management consultation' (p. 10).

Ten years later, in 1998, the face of foster care has changed, but one fact remains: foster parents require support to deal with the many issues facing their situation. Several child welfare agencies have begun to integrate such supports into their regular foster care programming, including in Ontario, and as a result of specific recommendations in the province, the Ottawa-Carleton Children's Aid Society. In 1996

the agency staffed eight Child and Youth Counselors to provide support to approximately 40-60 families in times of crisis, as well as ongoing guidance and consultation. On the other hand, several agencies in Ontario have not developed such formal agency operated foster care support programs for their foster parents, but continue to offer support through the foster care worker and child's social worker. The Children's Aid Society (CAS) of the City of Kingston and the County of Frontenac (Kingston CAS) and the CAS of the United Counties of Stormont, Dundas and Glengarry (Cornwall CAS) are two such agencies. Unfortunately, the main reason for not incorporating more extensive supports has been funding cutbacks. Regardless, it is unclear what supports the foster parents in these two regions or foster parents generally require, and what supports they would benefit from. It was the goal of this thesis to explore that issue.

In the spring of 1996 I began exploring the area of foster parent support by briefly examining the Child and Youth Counselor (CYC) program at the Ottawa-Carleton Children's Aid Society. This opportunity to look at a relatively unique foster care support program created interest to continue research in this said area.

The goal of the following research was to explore foster parent support generally, and design a study which would be generic and useful to foster parents and foster care agencies generally. The foster parents at the two agencies participating in the study were seen to be representative of foster parents nation-wide.

Subsequently in March, 1997 I contracted with Kingston CAS and Cornwall CAS to complete an investigation into foster care support need among their foster families. Although both agencies were aware that foster families generally require a greater amount of support, they were unclear on what specific areas of support are most needed from the perspective of the foster parents.

In April and May, 1997 an evaluability assessment was launched to determine if the two foster care programs and 163 regular foster families would lend themselves to a

large-scale study of foster family support need. First, in-depth meetings and interviews were conducted with foster care directors, foster care social workers and foster parent association executive in both regions. During the initial meetings, thesis process, research questions and methodologies were clarified. Follow-up interviews with 10 personnel provided background information for the entire study and a general base of knowledge regarding the foster care programs and support services offered to families at both agencies. Second, all foster care program documents were examined to clarify any program processes, goals and objectives. This information served to help in the production of the foster parent questionnaire. It was concluded that the two agencies and 163 regular foster families would lend themselves to a small-scale study of foster family support need.

The primary questions which were explored were *"What is foster care support?"* and *"What do foster parents identify as the type of support they require to successfully maintain their foster home?"* Secondary questions expanded upon the primary question, addressing the following topics: situations which would benefit from support, support currently received and support not currently received from the agency.

Research questions were answered using one primary method. Based on the information gathered during the evaluability assessment, and through the literature review process, a questionnaire was developed to address the research questions. The questionnaire was distributed to the 163 regular foster families in the Kingston and Cornwall regions.

1.1 Learning objectives

The primary rationale of this thesis was to conduct research in an important area of study that had not been extensively documented previously. Relatively little information has been documented on foster care support need in the past ten years, providing an exciting opportunity to ascertain current supports needed by foster families and expand the literature base and knowledge base in this area. Although the study used two Ontario agencies to obtain its sample, it was hoped that the results would be generalizable to all foster families.

Secondary reasons for completing a thesis in this area was to gain experience in the area of small-scale research and data analysis, and to become more conversant and knowledgeable in the area of foster parent support.

2.0 Literature Review

The following review examines two main bodies of literature: foster care and foster care support. General foster care and foster care in Ontario is reviewed initially, followed by an in-depth review of foster care support, issues related to foster care support, and currently operating support programs in Ontario. The purpose of reviewing and summarizing general foster care information was to develop an overall picture and understanding of the foster care situation broadly. Foster care in Ontario was reviewed because the sample group for the study was taken from two agencies in southern Ontario, and such a review provides a frame of reference and perspective on foster care in the region being surveyed. The purpose of completing the section on foster care support was to understand the body of literature available, as well as identify gaps and discrepancies that may exist in the literature.

2.1 Foster Care

The purpose of foster care has clearly changed from its original purpose over a century ago. Family foster care began as an effort to *rescue* children who had *inadequate* parents, dependent upon charity (Pecora, Whittaker, & Maluccio, 1992). For the thousands of children and youths from northeastern cities who were moved on the orphan trains, there seemed to be no shortage of *traditional* foster families with a wage-earning father and a mother at home who were willing and able to rescue *good* children from *bad* environments (CWLA, 1991).

By the 1950s and 60s there was a rapid increase in the numbers of children going into foster care, coinciding with the *discovery* of child abuse and expansion of child protection services. Certainly in Canada, statistics show that aboriginal children comprised a large number of the children coming into care, particularly during the Sixties Scoop when thousands of aboriginal children were apprehended from their communities and families and placed in urban foster homes, predominantly non-aboriginal homes (Johnston, 1983). As a result, Children's Aid Societies expanded and there was a greater demand for foster homes.

While the focus and definition of foster care was changing by 1975 as documented by the Child Welfare League of America (CWLA), becoming more permanent and family-centred, the foster family concept was still *substitute* care. In 1983, Blumenthal (in Pecora et al., 1992) defined family foster care as the provision of planned, time-limited, substitute family care for children who cannot be adequately maintained at home. Although Pecora, Whittaker, and Maluccio have adopted Blumenthal's definition in their 1992 literature, it is important to note that in 1989 the CWLA replaced this *substitute* purpose with a goal of *supplemental* care, which respects ties to the family of origin and acknowledges that there is no complete substitute for that family. Rather, foster family care endeavors to respond to the unique, individual needs of infants, children, youth and their families through the strength of family living, and through family and community supports. The goal of family foster care is to provide opportunities for healing, growth, and development leading to healthier infants, children, youth and families, with safe and nurturing relationships intended to be permanent (CWLA, 1991).

The Child Welfare League of America (1991) guidelines state that to meet the diverse needs of infants, children, youth and their families, family foster care must:

1. Provide a safe, predictable, nurturing, loving, and caring home for infants, children, and youth when they cannot safely remain with their own parents. This includes demonstrating a model of healthy family living so that infants, children, youth and their families may incorporate these skills for their own enhanced functioning. This nurturing must be responsive to the effects of separation trauma.
2. Conduct ongoing strengths and needs assessments of every infant, child, youth, and family served to provide appropriate foster care, maintain stability in the foster home and prevent foster home disruptions or unnecessary moves. Assessments must reflect sensitivity to cultural and ethnic identities. Children, youth and their families must be involved to the fullest extent possible in participating in their own assessments, goal planning, and carrying out those plans.
3. Address the unique developmental, social, emotional, cultural, educational, physical, medical, spiritual, and specialized or therapeutic needs of every infant, child, and youth in care, based on carefully conducted, culturally competent, ongoing strengths and needs assessments. Services must promote positive self-esteem, family identity, and family relationships.
4. Help parents and the extended family to the fullest extent possible with resources necessary to regain custody of their children and to maintain safe healthy relationships; or help parents to make timely decisions about

alternative living arrangements intended to be safe, nurturing, and permanent, which should include, to the fullest extent possible, ongoing contact with the family of origin.

5. Help prepare infants, children, and youth for the most appropriate permanence goal, which may be to return home, long-term care by plan with relatives or others, or adoption.
6. Provide children and youths with the competencies necessary for their age and stage of development and for the eventual successful transition into adult lives, relationships, and responsibilities.
7. Provide a clearly defined role for foster parents with commensurate responsibilities, rights, and supports, including adequate compensation for the cost of child care; pre-service and in-service training; respite care and day care; and opportunities for liability insurance, a career ladder, and participation in local and provincial foster parent associations.
8. Provide services from professional social workers whose education, training, certification, caseload size, and supervision provide the qualifications and opportunity to meet family foster care program goals. Social workers must provide services, using a teamwork approach, within a licensed child placing agency and/or a family or juvenile court.
9. Be conducted through an interdisciplinary, teamwork approach in which social workers and foster parents work collaboratively with other professionals and actively engage the parents of children and youth in care in being part of the team.

10. Reflect the value that family foster care is a community-based service and that the community – with essential provincial and federal supports – must take responsibility for caring for its own children, youth and their families.

Several authors (CWLA, 1991; Hepworth & Drew, 1980) assert that foster care has been the single most important child care resource over the past several decades, but also state that a fostering crisis is now striking the United States and Canada. In short, there are too many abused and neglected children and too few resources to meet their needs. In response to this crisis, there has been a thrust towards family preservation and minimizing the removal of children from their biological families. However, it would be naïve to suggest that this is the answer for all children facing abuse and neglect; foster care is an essential option for many children unable to remain with their natural families. It is imperative that, in the wake of the family preservation movement, foster care not be viewed as an illegitimate, destructive last resort, but as a valid part of the service repertoire and as the best arrangement for some children (CWLA, 1991).

2.1.1 Foster Care in Ontario

Foster care emerged as a form of substitute child care in Ontario in the latter half of the 19th century. Parallel developments occurred elsewhere in Canada, the United States and Britain (Jones & Rutman, 1981). Middle class reformers of the day saw foster homes as a humane solution to the need to find appropriate ways to deal with neglected, dependent and delinquent children

(Ontario, 1990). It was a move away from the practice of large institutional care facilities for meeting the needs of children.

The perspective that dominated the creation of what evolved into the foster care system in Ontario today was that of J.J. Kelso, who became the province's first Superintendent of Child Welfare. Appearing before a Royal Commission on the prison and Reformatory System in 1890, Kelso recommended the establishment of a new type of voluntary society to work with neglected children and to prevent them from becoming criminals. These societies were to have responsibility for placing neglected children in *good*, preferably rural, homes (Ontario, 1990). Incorporating this perspective, the 1893 Act for the Prevention of Cruelty to, and Better Protection of Children gave broad powers to voluntary societies to protect children. The Children's Aid Societies have been the semi-public agencies responsible for the care and protection of children (OACAS, 1988).

During the 20th century, the structure and practice of foster care services changed dramatically in Ontario. With the development of the social work profession, the voluntary Children's Aid Societies acquired professional staff to arrange and supervise placements, and governments assumed a growing share of responsibility for funding of child welfare services (Ontario, 1990).

Today, responsibility for the foster care system rests largely with the 54 Children's Aid Societies in Ontario. The Ministry's role consists of the overall development of long-term policy and review/coordination of the system. Each Children's Aid Society is responsible for the recruitment, approval and management of foster homes in its jurisdiction (Ontario, 1990). Every CAS must develop and maintain: policies and procedures regarding the operation of foster

homes; a system for classifying foster homes; procedures for recruiting, screening and selecting foster parents; a system for supervising foster homes; an annual evaluation system for foster homes; and an up-to-date list of homes which it has approved.

In the past 20 years, child welfare and other social service agencies in Ontario, and elsewhere, have been placing increasing emphasis on keeping children in their natural families by providing more assistance to dysfunctional families. As a result, children are coming into care at a later age than in the past. Also, the social service field is moving away from the institutionalization of various client groups, and emphasizing community-based service delivery (Ontario, 1990). Children who might in the past have been served in institutions are being placed in foster care. Thus foster parents are being expected to go beyond their traditional role of *substitute parent*, and deal with children whose needs are more complex and whose care is more demanding.

One of the major problems in foster care in Ontario has been with the recruitment and retention of foster homes. Extensive efforts have gone into addressing these problems for over 30 years. In 1963 Jack Bevan wrote "In the past, it was easier for Children's Aid Societies to find foster homes. Perhaps the changes in our socio-economic structure is a major reason"(Ontario, 1990). In 1977, Barbara Rosenblum's research report on foster care noted the severe shortage of foster homes for adolescents (Ontario, 1990). Certainly the increased entry of women into the paid labour force has had an impact on the availability of homes prepared to foster, decreasing the number. Regardless of all of the reasons, it is hypothesized that foster home shortages may definitely be connected with inadequate support to foster families. Partly as a result of the ongoing problems recruiting and retaining foster homes, the province of Ontario

initiated several studies since 1979 on issues surrounding foster care, the most current large-scale study being conducted in 1988 by the Ontario Association of Children's Aid Societies. That study identified several foster care concerns and issues which are discussed in the following section. It should be noted that there have not been any large-scale studies conducted on foster parent support in Ontario that have been publicly documented. One of the aims of the current study was to expand knowledge and information in the area of foster parent support.

In short, three trends were identified in the review of foster care generally, and more specifically, in the province of Ontario where the research sites are located. First, there has been a change in how the role of foster care is understood, from that of foster parents being the replacement/surrogate parent to a more supplemental role where the child's biological family is included and contact, when appropriate, is encouraged. Second, the type of children foster parents are now required to foster has changed dramatically, with children presenting with far greater emotional, behavioural, and educational difficulties, including increasing numbers who have been physically and/or sexually abused coming into care. Finally, there is an increasing shortage of foster homes to meet the demand. The latter two trends certainly create an environment where foster homes are forced to deal with extremely challenging children and subsequently it would seem need a great deal of support.

2.2 Foster parent support

The giving of support to foster parents is a vital component of a professional system of foster care. In fact, many experienced social work practitioners claim that training foster parents, in itself, is not enough. Training does not necessarily translate into practical skills that foster parents can use – you have to make sure of foster parents skill development through follow-up and ongoing support.

Support can be defined as any assistance that is given, received, or exchanged between people, either individually, or, in a group setting. It may include emotional and physical comfort, material goods, or financial resources. It may take the form of helpful advice (the offer of insights gained through experience), or knowledge specific to a particular problem or opportunity. It could also mean advocacy (that is, acting on behalf of someone's interests), or respite (temporary relief from responsibility), or defense (protection of someone who is facing adversity). It may be as simple as keeping a person company during a stressful time, or as complex as guiding them through a major life-transition. Some of the forms of support for foster parents as identified in the 1988 Ontario Association of Children's Aid Society report include:

- The informal support that is usually exchanged during training programs.
- Peer support groups where foster parents receive support and guidance from other experienced foster parents.
- The services, educational resources, information, and peer contact provided by the local Foster Family Association and the provincial Federation of Foster Family Associations.

- Agency-provided in-home supports, such as: respite, free sitter services, case aides to assist with children with difficult behaviour, support from Social Workers and Child Care Workers, tutors, financial support for leisure activities and education pursuits, etc.
- Resources provided in the community which a foster parent can easily access as needed.

In 1990 the Ontario Ministry of Community and Social Services published a document on foster care. A pervasive theme running through it is that foster parents need adequate support services to fulfill the expectations placed upon them. This report identified five types of support which are all-important and need to be addressed by agencies placing children in foster homes: financial compensation, tangible supports, emotional supports, relief and recognition.

Providing adequate levels of financial compensation can do more than simply cover a foster child's expenses (Ontario, 1990). It can convey a message to foster parents that their contribution to the child's overall care is recognized and valued. Financial compensation can also be used to reinforce the perception of foster parents as professionals who are *compensated* for providing their expertise.

Tangible supports were a second type of support identified in the Ontario Ministry of Community and Social Services report. They (Ontario, 1990) identify a number of supports that could be provided as a regular part of the ongoing relationship between worker and foster parent. For example, regular visits and phone calls from the worker, including pre- and post- placement visits, follow-up and feedback, as well as general staff availability are required (Burke & Dawson, 1987 in Ontario, 1990). The agency can also provide support to foster parents by

providing child care services and transportation to allow them to meet together as a group for purposes of mutual support (Gil, 1984 in Ontario, 1990).

Third, the report (Ontario, 1990) states that tangible supports, must be enriched and coincide with emotional supports from agency workers. It is helpful, they suggest to have a worker who is solely designated to supporting families on a daily basis, as well as in times of crisis. This could include listening to a foster parent describe his/her stress or affirming him/her for a job well done.

Fourth, the Ministry (Ontario, 1990) observes that the complex needs of the foster child today make the challenge of meeting the child's needs seven days a week more draining than in the past. Many sources identify the need for relief services that would give foster parents a break from the responsibility of caring for the needy foster child and time to renew energy for the often-taxing role they have assumed.

Finally, the Ministry (Ontario, 1990) points out the need for recognition and respect for foster parents' skills and efforts as it relates to their needs. Many of the supports they request reflect this underlying need.

Robert Twigg (1991) writes of the difficulty agencies have retaining competent foster families; he suggests that this shortage is mainly the result of agency failure to meet families' needs for support. He further maintains that foster families remain active in fostering much longer if they feel they are receiving adequate and needed support. Twigg (1991) defines such support as including social work assistance, as well as professional services to deal with the specialized needs of children and youth.

Triseliotis (1990) also found that it is more effective and more efficient to keep existing foster care parents by supporting them in a range of ways, than to lose them and constantly be trying to replace them. It is very wasteful to lose

existing foster parents through a lack of continued support and training, or by making too many demands on them. Several research studies have suggested that foster parents should not be pressured into taking on children they don't feel confident about or taking on more children than they feel able to cope with. Triseliotis (1990) goes on to say if we are asking families to take on increasingly difficult and problematic children it stands to reason that they will need more preparation, training and continued support. They will also need recognition and where necessary respite gaps as a relief. Research is starting to show that there are fewer breakdowns among foster parents who have been prepared for the job and who are also being provided with post-placement support.

In a 1987 study of foster home breakdown (Berridge & Cleaver, 1987), the researchers found that lack of social worker support and poor co-ordination of agency services factored significantly in the breakdown cases they examined. Similarly, resource difficulties compounded the existing problems in foster placements, making the problems seem unmanageable.

Strengthening Twigg (1991) and Triseliotis' (1990) call for adequate support, the Child Welfare League of America made several recommendations in 1995 regarding the retention and support of foster care providers. As a point of clarification, they explain that foster parents are not clients of the agency, so they do not receive service; they receive supports. CWLA (1995) suggests that foster parents need regular consultation and crisis support. "Consultation is an effective way to collaborate with foster parents regarding both the services the child and the child's biological family may need and the supports that foster parents may need to help them meet identified needs" (CWLA, 1995). They further add that support in times of crisis is essential. In a recent Wisconsin-CWLA national study, 89% of the respondents said that support within 24 hours

of a crisis is an important aid to retention. Similarly, Chamberlain's 1992 study indicates that weekly support meetings can be a factor in retention. Most importantly, however, the CWLA (1995) reports foster parents' confirmation that regular contact with the agency through supervision, monitoring, consultation, and support groups – as well as immediate contact during times of crisis – can positively affect retention.

A Prince Edward Island foster care study in 1994 concluded that in order to ensure that a sufficient number and variety of suitable foster homes are available for children requiring care, it is necessary to not only develop an effective recruitment program, but also to address the issue of retention of approved foster homes (Ure, 1995). Along the same lines, Ryan (1987) found that failure to retain appropriate homes results in greater efforts toward recruitment and home study, in a lack of experienced homes, in mismatching of children and families, in overcrowding, and in unnecessary moves for children. It has been suggested in many studies that many of these problems could be lessened or alleviated by supporting foster parents pre- and post- placement.

Foster parents in the PEI (1994) study identified the need for support in many areas. For some, the lack of respite care is an issue, particularly for those dealing with difficult children or children with special needs. Others have requested additional support in dealing with attachment and separation issues, and coping with feelings of loss. Foster parents in this study also identified specific training needs to include drug addictions, including signs of addiction, fetal alcohol syndrome and fetal alcohol effects; sexual abuse; and eating disorders.

The literature suggests that the face of foster care has changed drastically in the past 20 years, and that there is a higher proportion of more

difficult and *needy* children entering care. Agencies report that they are dealing with a more concentrated population of children who are needier, and the general in-care population appears to have more complex needs than it did ten years ago (Ontario, 1990).

The problems of children now in foster care include emotional, behavioural, and educational difficulties. In addition, increasing numbers of children who have been physically and/or sexually abused are coming into care. Foster parents, or *surrogate* parents, as they are more traditionally known, are required to deal with these changing problems. They are being asked to undertake an expanded new role and to meet the challenges of foster children's pronounced and complex needs (Ontario, 1990). When planning future direction for foster care service, it is important to consider not only the needs of foster children but also the role and the needs of the foster parents who serve them.

It seems clear that foster parents need more support than is generally available from agencies and local foster parent associations. The number of foster home breakdowns, children drifting from home to home, and foster parents leaving the foster care system each year suggests that support to parents is not what it needs to be. Unfortunately, agency budgets, which have been negatively affected by government cutbacks, have not allowed for extensive support programs to be developed over the past few years. However, without preventive support programs being put in place foster parents will continue to quit following stressful incidents and family breakdowns.

2.2.1 Foster parent support in Ontario

In the province of Ontario there are no extensive regulations governing support to foster families. Support has not been clearly defined or studied, leaving individual agencies to define and design their own support programs, based in large part on available funding. It is the goal of this thesis to explore the question of foster parent support in two southeastern Ontario centres. It is hoped that the gap in literature and knowledge will begin to be filled by the results of this research project.

The *Child and Family Services Act* (Ontario, 1988) does guarantee certain rights for foster parents. However, from the onset, it is important to note that there is no mention of support. The Act does say that foster parents must be informed of the complaint procedures available to them through their CAS. Foster parents are to be informed of any major decisions made in planning for a Crown Ward who has been in their care for two years or more. Foster parents are entitled to ten days notice if the child is to be removed from the home and is a Crown Ward who has lived with the family for two years or more. If a child has been in their care for six months or more, the foster parents must be notified of any court hearing involving the child and may attend the hearing with or without counsel representation (Ontario, 1988). These are the rights of the foster parent.

In an extensive study by the Ontario Association of Children's Aid Society in 1988, foster parents were asked to rate their agency's capacity to provide the necessary support to carry out their fostering duties. Many of them (46%) said enough in some areas and not enough in others. Nineteen percent said not enough overall, while 35% said that the agency's support was sufficient. When asked to comment, the negative feelings increased and 41% said that support

from the social worker was inadequate. A number of foster parents commented on the need for someone to talk to in a crisis, the need for relief services, and the need for more training (OACAS, 1988). Some of the comments included: "Support is very haphazard"; "There is a definite need for at least weekly contact with a child care worker by telephone and monthly meetings with foster parent, child and worker"; "We really need support for teenagers"; It is important to have someone available for guidance and consultation"; "Family relief is a must"; "Specialized foster parents do receive fair training and support, but regular foster parents receive almost none" (OACAS, 1988). The Ontario Association of Children's Aid Societies recommended that a foster parent support model be developed that would set guidelines for agency foster care staff in developing a foster parent support program – including relief services, emergency consultation, treatment and behaviour management consultation. While there was never a foster parent support model developed for the whole of Ontario, several agencies paid heed to the suggestion for more support and developed their own programs; the Children's Aid Society of Ottawa-Carleton is one such agency.

Following the recommendations made in the 1988 study, the Ottawa-Carleton Children's Aid Society made internal recommendations to increase staff support to foster parents. Specifically they recommended increasing foster care staff complement by four foster care service social workers. These workers would provide in home support and relief; homemaker support so foster parents could spend 1-1 time with children; and in-home teaching in specialty areas (Damell, 1988).

Four years later, in 1992, the Ministry of Community and Social Services undertook the Residential Family Resources Project to build on the strengths of current approaches to foster care and provide a provincial framework for the

development of more integrated, flexible, generic approaches to family-based support across the children's services system. The *Proposed Framework for Residential Family Resources* reviewed the issues influencing the development of family-based services (OACAS Journal, 1992 May). The intent was to articulate a framework of family support that would enable the residential services system and foster parents to perform multiple functions to meet the varying and emerging needs of children and their families. The framework clearly stated that foster parents are not expected to perform all functions, nor are foster parents expected to go far beyond generally accepted roles. However, it was recognized that as needs and situations change and/or worsen for children requiring foster care, foster parent roles will change and be expanded. The ministry of Community and Social Services called for the support of such expanded roles of foster parents. Specifically, the framework states that the foster parents' role only be expanded if accompanied by appropriate training, authority, support and compensation.

While some individual agencies may have developed better training, support and compensation packages for their foster families, the province still does not have support standards that foster parents can rely upon. The following sections describes a program at the Children's Aid Society of Ottawa-Carleton which was designed for the sole purpose of supporting foster families.

A relatively new form of support for foster families is being employed by the Children's Aid Society of Ottawa-Carleton, following the research study in 1988 by the Ontario Association of Children's Aid Societies. As noted in the introduction, foster parents reported, with specific regard to support services, that there was a definite need for *"someone to talk to in a crisis"*, for *"relief services"*, and *"to have someone available for guidance and consultation"*

(Ontario, 1988). As a result of this finding, the Ontario Association of Children's Aid Societies recommended that a foster parent support model be developed that would set guidelines for agency foster care staff in developing a foster parent support program – including relief services, emergency consultation, treatment and behaviour management consultation. The CAS of Ottawa-Carleton has integrated a unique form of support into their foster care programming, offering guidance, consultation, and crisis intervention help from child and youth counselors, a very specific and trained group of social service workers in Ontario.

As of February, 1996 seven Child & Youth Counselors (CYC's) comprised the Foster Care Support Team at the Children's Aid Society of Ottawa-Carleton. Two of these CYC's primarily assist families in the Therapeutic Foster Care Program and the Emergency Foster Care Program, although each generally carries one foster family from the Regular Foster Care Program on their Caseload. There are approximately 300 foster families providing service for the Children's Aid Society of Ottawa-Carleton, with seven CYC's available to assist these families. Each CYC works with seven to eight families at any one time, offering support in times of crisis, or for general guidance and consultation

According to the program documents, the main purpose of the Foster Care Support Child and Youth Counselor is to assist foster parents in providing a safe and secure environment for children and adolescents that has structure and limits within the context of a caring atmosphere. Working in collaboration and consultation with other CAS staff, with the child and his/her foster family, the CYC helps develop and implement an intervention plan specific to the needs of the child and the foster family, meeting regularly with the family to support parents with the plan for the foster child. CYC's are expected to assist families in crisis

and act effectively in situations requiring prompt assessment and immediate actions. They are required to demonstrate and communicate to foster parents, in a knowledgeable and skillful manner, the range of child management principles, practices and techniques required to intervene effectively with children; this may include special therapeutic interventions. With regard to educational requirements, CYC's are expected to possess either a three year Community College Diploma (Child & Youth Counselor, Social Service Worker, or Early Childhood Education) or a Bachelor of Arts.

According to several current staff involved with the CYC program at the Ottawa-Carleton CAS the use of such support workers has been useful in retaining foster families, lengthening placements and perhaps preventing some breakdowns. However, there have been no conclusive studies to confirm such assumptions. Regardless, the program is relatively unique and certainly worth greater assessment and review. It was as a result of this brief examination of the CYC support program, that my interest in foster family support in general stemmed. I became keenly aware that there needed to be more research in the area of foster parent support and decided to explore the concept of foster care support more broadly, hoping to collect new information that would be helpful to both foster care agencies and foster parents, generally.

2.3 Summary

According to the literature, foster care support is generally accepted to be social work assistance to deal with the specialized needs of children and youth in foster care settings. Specifically, research conducted to date, although only a

few studies have been completed in the area of foster care support, points to a variety of support types, primarily identified by foster families. These repeatedly and consistently included financial compensation, tangible supports, emotional supports, relief and recognition.

Upon completion of this literature review, it became evident that there is a need for more research in the area of foster parent support. In Ontario, where the sample group was obtained, there have been no documented studies focusing solely on support in the past 20 years, and only one large-scale government foster care study in the past 10 years which briefly looked at support to foster parents. It is imperative that this area be examined and support to foster parents take centre stage in foster care departments of all Children's Aid Societies. The role of foster parents has been expanded, and caregivers are now expected to deal with extremely damaged and disturbed children without adequate support. This picture is the same throughout Ontario and seemingly throughout Canada, and certainly at Kingston CAS and Cornwall CAS. However, it was unclear to these agencies what type of foster family support is most needed. The following research study examined this question, specifically, and centrally, what foster parents need in terms of support, to successfully sustain their foster placements. It is the researcher's hope that the findings will be beneficial to both agencies involved in the study and to foster care departments generally, will strengthen foster parent's call for more support, and will begin to fill the gap in knowledge and literature that exists regarding foster parent support.

3.0 Methodology

This research design was exploratory in nature. The questionnaire component comprised the bulk of the research, targeting 163 regular foster families who work for the Kingston region Children's Aid Society and the Cornwall region Children's Aid Society. The qualitative component comprised mainly of preliminary interviews with foster care staff and foster parent association staff, which assisted in the development of the questionnaire. The questionnaire included both close-ended questions and open-ended responses.

Methodology components are identified and discussed, following the presentation of research questions and definition of key terms and concepts. All components are summarized in table format for easier reference. Forms and interview schedules referred to can be found in the Appendices.

3.1 Research questions

Primary research questions were:

1. What is foster family support?
2. What are foster parents' perceptions regarding the necessary supports to successfully maintain their foster home?

Secondary questions research questions included:

1. What situations in the foster home would benefit from regular support?
2. What type of support are foster families currently receiving?
3. What type of support are foster families not currently receiving?
4. Are foster families satisfied with the type of support they are currently receiving?

3.2 Definition of key terms and concepts

a) Family foster care

An essential child welfare service option for children, youths, and parents who must live apart while generally maintaining legal and usually, affectional ties. When children, youths, and parents must be separated because of physical abuse, sexual abuse, neglect, maltreatment or special circumstances, family foster care provides a planned, goal-directed service in which the care of children and youths takes place in the home of an agency-approved family. The value of family foster care is that it can respond to the unique, individual, needs of infants, children, youths, and their families through the strength of family living, and through family and community supports (CWLA, 1991). The two following definitions (regular foster care and specialized foster care) are essentially subgroups of this broad category, family foster care.

b) Regular foster care

This refers to non-specialized care. Regular foster care will refer to, unless otherwise indicated, care which basically provides a safe and nurturing family environment for children who do not require specialized care. In regular foster care, there is the provision of a safe and healthy family environment for the day-to-day care of the child. Generally, the family integrates the child into their routines and activities. No more than four unrelated children and no more than two children under the age of two years may be placed in one home (CWLA, 1991).

c) Specialized foster care

This type of care provides specific treatment or a management strategy to ensure the physical and emotional well being of the child. The Child Welfare League of America prescribes that special training and/or particular skills is required by the foster parents. No more than two children should be placed in a special foster home at any time; one parent must be at home on a full-time basis (CWLA, 1991).

d) Foster care worker / Foster care resource worker

The social worker directly responsible for addressing the needs of the foster family, advocating on behalf of the foster family and ensuring that appropriate supports are provided to the family when needed. The worker is a professionally educated and trained individual, generally with a B.S.W. or M.S.W. degree.

e) Child's social worker

The social worker responsible for ensuring that the child in care is appropriately placed in a fostering situation, and receives the necessary supports to adjust, remain in the home

and transition effectively. The worker is a professionally educated and trained individual with a B.S.W. or M.S.W. degree.

f) Foster parents

An individual or couple licensed, certified, or approved by a child welfare agency to work collaboratively with that agency to provide family foster care services to children, youths, and families (CWLA, 1991).

g) Communications chairpersons/ communicators

Communications chairpersons are current foster parents, selected by the Support Committee of the Foster Parent Association, who provide information, encouragement, and advice to other foster parents who may be under an investigation, a service complaint review or who have other matters with the agency. The communications chairpersons may assume a role in other non-investigatory situations in the provision of care for a child in a foster family. This person consults with, counsels and supports foster families in their adjustments to the child placed in their home and assists in resourcing to meet needs before, during and after placement. This type of support person is connected to the FPA in Cornwall region.

3.3 Overview of thesis components

The design and implementation of thesis research is summarized in table 1, which is followed by a brief discussion of each component.

Table 1: Thesis components

Component	Design	Measure	Objectives achieved
<i>Preliminary component 1</i> <i>Literature review</i>	<i>Surveyed over 60 references related to foster care and foster care support.</i>	<i>Not applicable</i>	<i>To understand issues related to foster care support, and identify the gaps in the literature regarding these issues.</i>
<i>Preliminary component 2</i> <i>Research Child & Youth Counselor Program at Ottawa-Carleton CAS</i>	<i>Qualitatively researched the CYC program via informal staff interviews and examination of program documents.</i>	<i>Not applicable</i>	<i>To gain an understanding of their role in the foster care environment for the purpose of filling a gap in the literature. Expanded interest in the field of foster care support</i>
<i>Preliminary component 3</i> <i>Evaluability assessment of the foster care programs in Kingston and Cornwall.</i> <i>Background interviews</i>	<i>Preliminary & follow-up Interviews with foster care personnel and directors</i> <i>Preliminary & follow-up Interviews with foster parent association staff</i> <i>Examination of program documents</i>	<i>Foster care support Interview schedules</i>	<i>To determine if the programs in Kingston and Cornwall lend themselves to a quantitative & qualitative inquiry.</i> <i>To clarify research questions, goals, and methodology and to operationalize terms and variables.</i> <i>To understand the type of support offered to foster families by the agency and by the foster parent association.</i> <i>To gather information which would assist in the development of the questionnaire.</i>
<i>Questionnaire development</i>	<i>Develop a questionnaire based on information obtained in all previous components</i>	<i>Not applicable</i>	<i>To develop a questionnaire which will be used to examine issues of foster care support need amongst 163 foster families in both regions.</i>

Table 1 continued

<i>Questionnaire administration</i>	<i>Mail-out questionnaire to 163 foster families in both regions</i>	<i>Questionnaire</i>	<i>To determine what foster families need in terms of support. To determine foster parent satisfaction with supports currently being received.</i>
<i>Analysis of data</i>	<i>Univariate & bivariate analysis</i>		<i>To summarize, analyze & present findings from the questionnaire in an effort to determine what foster families need in terms of support.</i>

3.4 Researching the Child & Youth Counselor Program

In January to March, 1996 a brief examination of the Child and Youth Counselor program in the foster care department at the Children's Aid Society of Ottawa-Carleton was conducted. Child & Youth Counselors and several foster care supervisors, child social workers, foster care workers were informally interviewed. All available program documents were reviewed and summarized.

Information collected during this qualitative exploration was summarized and included in the literature review. Essentially this research expanded the researcher's interest in the area of foster care support need and confirmed need for further study in the area.

3.5 Research sites and programs

The two primary research sites for this study were the Children's Aid Society of the City of Kingston and the county of Frontenac (Kingston CAS) and the Children's Aid Society of the United Counties of Stormont, Dundas and Glengarry (Cornwall CAS). Kingston, Ontario is located on the northern shore of Lake Ontario, at the point where the lake joins the St. Lawrence River. According to the 1996 census, Kingston had a population of 55,947. The Kingston Children's Aid Society serves not only Kingston, but the outlying region of Frontenac County, extending from Barrie, Ontario to Wolfe Island. The entire region of Frontenac County, including Kingston has a population of 136,365. Cornwall, Ontario is located on the north bank of the St. Lawrence River in eastern Ontario. Cornwall's population, according to 1996 census figures is 47,403. The Children's Aid Society in the Cornwall area serves the county of Stormont, Dundas and Glengarry, extending from Alexandria to Chesterville. This entire region, including Cornwall has a population of 111,301.

3.5.1 The Children's Aid Society of Kingston and the County of Frontenac

At the time of this study, the foster care department at the Children's Aid Society in Kingston was comprised of 49 regular foster families, 13 provisional (regular) foster homes, 10 provisional (regular) relief foster homes and 12 specialized treatment homes. Although only regular foster homes were examined in this study, certain aspects of the treatment program will be

discussed in terms of support and types of children who are designated to the program. Treatment homes will be briefly presented initially, followed by a discussion of the regular homes, which is the focus of this study.

The goal of the *Treatment Foster Care Program* is to provide children who have complex needs with a coordinated and integrated system of care wherein the treatment process occurs primarily within a stable and caring family setting, and is guided and supported by a strong clinical team. Children between the ages of 4 and 14 may be referred to the Treatment Foster Care Program if they have:

- a) experienced physical, sexual or emotional abuse; or
- b) neglect, or a chaotic lifestyle; and
- c) display serious emotional and behavioural problems as a result of their life experiences; and
- d) cannot be adequately treated and cared for within the regular foster care system; and
- e) are expected to benefit from a family based treatment model (CAS Frontenac-Kingston, 1994).

The treatment foster care program has a great deal of support. Two social workers are responsible for the 12 families. The foster families in this program also have access to a variety of professional support persons for guidance, consultation, crisis intervention and respite needs. At the time of a child's admission to the program, a treatment team is established. The core team is composed of the social worker, child and youth worker assigned to the foster family, one or both parent therapists, the supervisor, and the consulting psychologist. Other professionals from education, children's mental health and the agency are included as needed.

Regular foster care, on the other hand, refers to the provision of a safe and healthy family environment for the day-to-day care of the child. Generally, the family integrates the child into their routines and activities. No more than four unrelated children and no more than two children under the age of two years may be placed in one home. The 74 regular foster homes (including provisional and relief regular homes) are supervised by two social workers at the Children's Aid Society. These two workers are also responsible for an adoption caseload. With regard to foster family responsibilities, the workers conduct training and recruitment, do home studies, place children in appropriate homes, complete all progress reports and updates, and close foster homes. It is important to note that their role does not include support to families. Due to the large caseload of these workers, it is not possible for them to provide in-person support to foster families, even in times of crisis. Support is supposed to be received solely from the child's social worker, and as a result, support is not foster parent focused but child-centred. There is no agency person who provides support to foster parents besides the child's worker. According to agency staff, this is intentional and based on the belief that agency personnel should not act as advocates to foster parents since foster parents are employees of the agency.

Clearly the foster parents connected to the treatment foster care program receive far superior support than the regular foster homes. Supporting this observation, the Kingston area Foster Parent Association (FPA) expresses and maintains that there is a lack of support given to regular foster homes. The region's Foster Parent Association is made up of foster parents currently providing services for the Children's Aid Society. They serve to represent foster parents as well as assist parents in a variety of situations, including crises, for general guidance and offer some training opportunities.

3.5.2 The Children's Aid Society of the United Counties of Stormont, Dundas and Glengarry

Comwall Children's Aid Society has 114 regular foster families providing foster care services for them. These foster families, which include five respite homes, are assigned to three agency foster care workers. These workers are responsible for recruitment, screening, placement and support to families. The foster child also has his/her own social worker who is responsible for working with the child and ensuring that the child's needs are being met in the chosen foster home.

Support to foster parents is received from a variety of sources. First, agency foster care workers are supposed to have a *partnership relationship* with foster parents. This relationship which ideally has clear, open communication is one where foster parents are seen as *agents of the society* contracted to provide the daily life experiences for the child (CAS Stormont, Dundas & Glengarry). There is to be no notion of competition between the society and the foster parent – but rather close cooperation. As they work together, there must be a sense of equity and common purpose. This *partnership relationship*, in itself, is intended to provide a measure of support to foster parents. Foster parents also have access to one behavioural psychologist, who supports the rest of the agency programs. Finally, the Foster Parent Association in the Cornwall region operates a support program, entitled the *Communicator's group*. Support personnel are composed of foster parents who function to provide support to other foster parents in a variety of situations, as well as providing ongoing guidance and consultation.

3.6 Evaluability assessment

Once the researcher had decided that the focus of the study would be foster family support, several agencies in southern Ontario were contacted with a request to complete research with their foster families. Shortly after an agreement was made with Cornwall and Kingston region CAS, in May, 1997, the researcher met with agency and foster parent association (FPA) staff in an in-formal forum to discuss the purpose of the study and the method of data collection. These meetings also served to act as an evaluability assessment which would determine if the two foster care programs and 163 regular foster families would lend themselves to a study of foster family support need. Meetings and interviews were conducted with foster care directors, foster care social workers and foster parent association executive in both regions. During the initial meetings, thesis process, research questions and methodologies were clarified. At the same time, available program documents were examined to gain a clearer understanding of the support system operating at both agencies. This helped to clarify program processes, goals and objectives. With the input of agency staff and foster parent association executive the primary and secondary research questions were determined. It was concluded that the two agencies and 163 regular foster families lend themselves to a study of foster family support need.

3.7 Questionnaire development

There were several steps involved in the development of the final questionnaire to study foster parent support. Three crucial stages are presented and discussed below:

Stage 1: Identifying the method of research

Stage 2: Establishing an information base

Stage 3: Designing the survey instrument

3.7.1 Identifying the method of research

The decision to use a mail-out questionnaire as the method of collecting descriptive and exploratory information on foster family support was based on several factors, and agreed upon by agency staff and FPA executive. Rea and Parker, 1997, supporting Oppenheim, 1992, write that there are several positive reasons for selecting this route. The foremost advantage of the sample survey technique in general, is the ability to generalize about an entire population by drawing inferences based on data drawn from a small portion of that population (Rea and Parker, 1997). Specifically with regard to mail-out questionnaires, the following reasons, as identified by Oppenheim, 1992 and Rea & Parker, 1997, were seen as key elements in deciding this method.

- *Cost savings*
- *Convenience:* The questionnaire can be completed at the respondent's convenience, although they are encouraged to return it as soon as possible.
- *Ample time:* The respondent has virtually no time constraints. There is enough time to elaborate on answers and to consult personal records if necessary to complete certain questions.
- *Anonymity:* Because there is no personal contact with an interviewer, the respondent may feel that the responses given are more anonymous than is the case with other formats.

- ***Reduced interviewer bias:*** The mail-out questionnaire exposes each respondent to precisely the same wording on questions. Thus, it is not subject to interviewer-induced bias in terms of voice inflection, misreading of the questions, or other clerical or administrative errors.

Similar to Oppenheim, 1992, Rea and Parker, 1997, identify disadvantages with mail-out surveys. These are briefly identified below, followed by discussion if the researcher was able to minimize the disadvantage.

- ***Lower response rate than other methods:*** Two follow-ups were implemented in an effort to increase the response rate and yield an appropriate sample size necessary for purposes of generalization.
- ***Comparatively long time period:*** The mail-out method generally requires a few weeks for questionnaires to be returned; follow-ups are also time-consuming.
- ***Self-selection:*** Mail-outs almost never achieve a 100% response rate. Hence, even in the best of cases, there can be some bias in the sample. For example, poorly educated respondents or those with reading or language deficiencies tend to exclude themselves from this form of survey more often than from surveys administered by an interviewer.
- ***Lack of interviewer involvement:*** The fact that no interviewer is present means that unclear questions cannot be explained, and spontaneous volunteered reactions and information are not likely to be recorded by the respondent and cannot be probed by an interviewer as would be the case with other methods. However, the benefits of reduced interviewer-induced bias was seen as more important in this study.
- ***Lack of response to open-ended questions:*** It is more likely that questions requiring an original written response in lieu of fixed answers will be avoided. It was found, however, that respondents generally did answer the open-ended questions, which

may point to the concern that only respondents with reasonably good literacy skills responded.

3.7.2 Establishing an information base

Prior to the development of the survey instrument (questionnaire), it was necessary to gather information about the subject matter under investigation from interested parties and key individuals. The researcher interviewed 10 foster family personnel (five at each agency), including management, foster care workers and foster parent association executive, for the purpose of obtaining base level information which was to be used to devise a questionnaire. Without such preliminary information, Rea and Parker, suggest that the survey questions could prove to be peripheral or tangential to the goals of the research study. A short interview schedule was prepared and the researcher met individually with each of the ten participants. Each interview lasted approximately one hour.

The interview schedule (see Appendix A) for staff interviews was purposively designed in an open-ended exploratory manner. In an effort to ensure validity, a member of the social work faculty at the University of Manitoba examined the interview schedule. This helped to ensure that valid and focused questions were being asked. With regard to reliability, it is recognized that evaluation experts often question the reliability of responses received in open-ended questionnaires. However, the researcher chose not to direct the responses, attempting to gather as much general information about the programs, since relatively little has been documented. All interviews were conducted in-

person, and responses documented in writing. Every effort was made to ensure that accurate information was recorded. In several instances, clarification was requested during and after the interview on issues that recall may have affected.

Issues of confidentiality, anonymity and informed consent were seriously considered and appropriately managed. Agency staff were made aware that the research being conducted was confidential and the researcher was bound by ethical guidelines. Subsequently, staff names did not appear anywhere in the final report and specific comments and responses made by individual staff were never discussed in a manner that would link staff to particular comments. Staff were only interviewed if they chose to do so voluntarily and gave their informed consent following an explanation of the research process.

In keeping with the goal of this thesis to study and present generalizable information on foster care support, the responses from Kingston and Cornwall have been collapsed. Furthermore, the differences in responses were minimal, therefore a separate presentation of the interview responses would merely be repetitive. Most agency specific comments which do not relate to generalizable foster care support have not been included in the following presentation. Similarly, information which was gathered during this interview process but is not relevant to the study at hand has been eliminated and is not documented.

3.7.3 Interview summaries

Question one of the interview asked personnel to describe the foster care support system offered to foster families by the Children's Aid Society in their region. It

was difficult for respondents to answer factually, and not offer opinion on the perceived positive and negative implications of the support system as it stands. The list of responses is gleaned from the myriad of responses, many judgmental, provided by all ten staff. The responses confirm the variety of and spectrum of responses regarding how foster care support is delivered and what is available from the agency. Responses to question one include:

- Support to foster families is provided by both the foster care support worker and the child's worker.
- Support by agency staff is *supposed* to include the following elements: being there for the family; ensuring the family has rights; talking and listening to the family; helping out in crisis situations; offering initial support and training sessions to new foster families; helping new families through the initial days and months of fostering; responding to all telephone calls for foster families; day to day support of giving suggestions and direction to families; directing some calls to child's social worker; providing initial 7 day and 30 day visits to foster families; provide workshops and training to foster parents; providing access to the staff psychologist individually and in a training setting; and providing two days of respite per month.
- The role of the foster care support worker is to focus on and ensure the well being of the foster family and parents. The role of the child's social worker is to focus on and ensure the well being of the child in the foster home.
- Agency staff are supposed to adhere to legal guidelines and deal promptly with issues and crises that will have legal ramifications.
- Agency staff are supposed to respect all foster families and acknowledge the importance of their position in the system.

There was very little agreement on the types of support services offered to foster families, leading the researcher to examine more in-depth in the questionnaire the

actual types of support services currently offered to families, and what types of support foster parents feel they should be receiving. Based on the information gleaned from the first question, the questionnaire was designed to elicit responses to: 1) Identify what foster family support is, as well as the types of foster care support that has been received from CAS over the past few years; and 2) Issues of assistance in crisis situations, day to day support, phone support, difference in support between foster care support worker and child's social worker, support from the staff psychologist and existence of relief and training.

Responses to question two were more consistent than those given to question one, asking what type of support is offered by the Foster Parent Association. However, it should be noted that foster parent association members point to and acknowledge a great deal more support given by the association than do the other interviewed staff.

Responses include:

- FPA offers training to foster parents.
- FPA organizes summer and Christmas programs in an attempt to bring foster families together.
- FPA provides the Communicator's group which provides assistance and support to foster families. The Communicators provide service in lieu of another agency social worker. Communicators act as an advocate in crisis/dispute situations with the agency and offer general support and assistance to foster families. There are six communicators. (Cornwall agency response)
- FPA is in the process of setting up a Communicator's group in the Kingston area; they plan to have three to five volunteer support staff. (Kingston area response)
- FPA is a peer support network, which acts as a collective voice for foster families, and liases with the agency.

- FPA offers an Employee Assistance Program to all foster families.
- FPA offers an insurance fund for foster parents.
- FPA is an advocate and neutral party for foster families to call upon for assistance and support.
- Essentially, the FPA is foster parents helping foster parents.
- Foster parents often call the president of the FPA because they feel there is no formalized agency support.
- FPA act as a peer support group.
- FPA are volunteer foster parents who listen to foster parent complaints, are involved in the investigative process, mediate and sometimes offer in-person support.

There was a great deal of agreement on the types of support services offered to foster families by the Foster Parent Association. As a result of these findings, the final questionnaire specifically asked foster parents if the supports identified above should be offered by the FPA, as well as the breadth of and usefulness of such services.

Question three asked of each interviewee: "What is your role in supporting foster families generally or in times of crisis?" Respondents were asked to only offer information on their own role, and not pass judgment on the role of other agency staff. Foster parent association and communicator members offered the following statements regarding their role with foster families:

- Work effectively with agency on foster family behalf.
- Act as an advocate for foster families in all situations requiring an advocate.
- Guide foster parents legally and politically.
- Provide emotional support to foster parents.

- Phone contact for support.
- In-home support when requested.

Foster care support workers offered the following responses regarding their role with foster families generally and in times of crisis:

- Listen to foster parents.
- Act as a counselor to families.
- Act as a “problem solver” to foster families.
- Providing emergency services is a key and important focus.
- Providing initial support and training to new foster families is a key and important focus of the foster care support worker.
- Responsible for foster parents' legal rights.
- Liase with child's social worker to provide appropriate support to foster family.
- Provide in-home support services regularly to foster family.
- Have phone contact with foster families regarding initial placement issues and foster home concerns.

Management identified the following responses regarding their role with foster families:

- Help solve problems that cannot be resolved by workers.
- Deal with policy related issues.
- Attend FPA meetings.
- Act as “back-up” to support workers.

- Provide an “open-door” to all foster parents and staff.
- Act as a foster parent advocate.

Specific questions were designed in the questionnaire to delve into the role of the foster care support staff, child’s social worker, and the FPA. Most importantly, questions addressed what type of support should be offered by these people.

Staff were asked if they felt that the CAS is providing foster families with the necessary supports they require to successfully maintain their home and foster child placements. The answers to this question were varied, and ranged from “Yes, generally the agency provides foster families with the necessary support they require to successfully maintain their home” to a definite “No” to the same question. The following responses completes the list of responses to the inquiry of whether or not the agency is providing necessary supports:

- Support is adequate if the issue involves legal implications.
- Financial support is inadequate.
- In the majority of cases, support is adequate.
- The agency is severely lacking in staff support to foster families.
- The agency has lost foster families and foster care breakdown has occurred because of the lack of support to families.
- Foster parents need a proper agency advocate and someone to call and talk to.
- Workers are overloaded and cannot provide support.

In general, the responses to this question were negative, and respondents felt that agency support is not what it should be. However, respondents did not elaborate fully on the types of support they are not receiving. Question six addressed this in

greater detail, but it was imperative that the final questionnaire allow foster parents to clearly identify which supports they feel they should be receiving from the agency. Based on comments made to this question, the connection between foster family breakdown and a lack of support was examined in the final questionnaire, along with financial support issues.

Question five asked if they felt that the FPA was providing foster families with the necessary supports they require to successfully maintain their home and foster child placements. Most of the responses were consistent and respondents agreed that FPA supports compliment and supplement support offered by the agency. Furthermore, it was put forth by all respondents that the Communicator's group does a good job of helping resolve issues and crises between the agency and foster parents. Specific issues arising from the responses to question five included the usefulness of the communicator's group and the employee assistance program, the role of the FPA and the communicator, and what else the FPA could do to support families.

Question six asked staff to identify which supports foster families were not currently receiving that they required. In general, foster parent association members and foster care worker responses were similar, while management responses were not detailed. All respondents did agree, however, that foster care workers and social workers generally do not spend enough time with foster families giving support, especially in-home support. As a result, respondents felt that the partnership between foster parents and the agency is disappearing. The following list summarizes the varying answers to this question:

- The emotional needs of foster parents are not being dealt with.
- There is no time for assistance with generally difficult behaviour of a child; unless a crisis erupts, foster families are often told and expected to "deal with it yourself".

- There is no training beyond the initial sessions offered to new foster parents.
- The foster parent must subsidize agency money, which is a great financial burden.
- The frequency of in-home visits is not adequate.
- Often the plan-of-care meetings do not include the foster parents.
- Foster parents desperately need more in-depth training on issues now facing foster children and families.
- Someone to talk to without being judged and documented.
- Better response for minor crises.
- Adequate, specialized and relevant training.
- Acknowledgment and reward for a job well-done.
- Someone to listen to their frustrations.

Key topics arising from question six which were addressed in the questionnaire include issues of in-home visits, phone contact, training, plan-or-care meetings, financial support, problem solving of difficult behaviour, and attention given to the emotional needs of foster parents.

Question seven, which addressed the types of support foster families currently are receiving, resulted in several conflicting answers. In question six, the majority of respondents agreed that phone contact and crisis (except in very serious situations) support is not what it should be. However, a few of the respondents offered contradictory responses in question seven. The responses included the following:

- 7 day and 30 day visits are adequate.
- Crisis support is adequate.
- Phone contact is adequate.

- Support revolving around the placement of a new child in a home is good.
- Phone calls to foster care workers are always answered.
- The assistance and support of the behavioural psychologist has decreased the number of foster care breakdowns.
- Respite is generally good.
- The agency responds within 24 hours to serious crises, such as assaults.
- Serious complaints where there will be legal implications are dealt with well.

Question eight examined the types of situations most frequently facing foster families which would cause them to require support. All respondents agreed that behavioural difficulties is the main reason that foster parents would require support; this includes tantrums, acting out behaviour, and serious explosions. Other responses included:

- Aggressive/ oppositional behaviour by foster child
- Self-abusive behaviour by foster child
- Problems dealing with the child's social worker
- Information giving and sharing about the child
- Venting daily frustrations/ someone to talk to
- Relief required
- Request for financial assistance
- Concerns regarding the plan-of-care
- Guidance and direction

As a result of these findings, several questions in the questionnaire were devoted to the most common behavioural situations (of the foster child) facing foster families which would require them to ask for or accept agency support. Since

behavioural issues was repeatedly mentioned in the interviews as a key reason that a family would need support, some emphasis was placed on this topic area.

Question nine asked: Do you feel that there is a connection between foster family breakdown and a lack of regular support or alternately between foster family stability and regular support? There has been a great deal of research to suggest that there is a connection between foster family breakdown and lack of social worker support; this question stems from such literature. Generally the responses were similar, and pointed towards "Yes, breakdowns do occur because of lack of support". There was some variance in the perceived degree and extent to the connection, evidenced by the following responses:

- Dozens of breakdowns occur yearly because of the lack of agency support to foster families.
- Matches between foster parents and children are sometimes not the best, there is often not enough information to share with the family, and resources are scarce; this ultimately leads to stress on the foster family and breakdowns result.
- The combination of tough kids, a bureaucratic system, financial burden and the lack of social worker availability results in foster parent burnout, and eventually foster family breakdowns.
- Increased respite and access to the behavioural psychologist will result and has resulted in longer placements.
- Support is the key ingredient to keep families intact and from breaking down.

Finally, the last question in the interview offered interviewees an opportunity to express how they felt the agency could better serve foster parents. The responses to this question reiterated many of the responses given to other questions and were

appropriately incorporated into the questionnaire. The following list summarizes answers and comments to question ten:

- Training to foster parents should be mandatory.
- The behavioural psychologist is a waste of money; families have very little access to him.
- Social workers need to manage their time more efficiently; they can definitely do more support work within the framework of their existing caseload.
- Foster parent rates should be increased by 4%, which is the amount that they were recently cut.
- Agency worker on the whole need to listen more (than they do), advocate more, and offer better training to foster parents.
- Offer Child Care Workers in the home on a regular basis, similar to the Child and Youth Counselor program at the Ottawa-Carleton CAS.

3.7.4 Incorporating the information base into the questionnaire

The information collected in the ten interviews summarized in the previous section, along with information gleaned from the literature regarding foster family support was used to devise the questionnaire for the next stage of the research. The collected and summarized information and responses assisted in producing a focused and well-directed questionnaire. Specifically, following the literature review, the evaluability assessment, and the summarizing of the agency interviews, a list of support *variables* was constructed for the questionnaire, and questions devised to address each of these

areas. The following list is a compilation of areas connected with foster family support, or specific functions identified as a support to families. These *variables* are included in Part II, question 2 of the questionnaire (see Appendix B).

Variable list

- New foster parent orientation and training
- Pre-placement visit and meeting with child and social worker
- A 7 day visit by the social worker
- A Plan-of-Care meeting at 30 days
- Plan-of-Care meetings every 90 days
- Support when a foster child is initially placed in the home
- Ongoing training
- Regular visits from the foster family worker (resource support worker)
- Regular phone calls from the foster family worker (resource support worker)
- Regular visits from the child's social worker
- Regular phone calls from the child's social worker
- Foster parent support group meetings
- Meetings and assistance from the consulting psychologist (Cornwall region only)
- Foster parent association
- Assistance in crisis situations
- Relief
- Support when a foster child leaves the home
- Financial aid

Each of the above *variables* was examined within the questionnaire through both closed and open-ended questions.

3.8 Designing the survey instrument

The development of the survey instrument is a crucial component of the survey research process. At this stage the researcher must devise a series of unbiased, well-structured questions that will systematically obtain the information identified in stages one and two (*identifying the focus of the study & establishing an information base*) (Rea and Parker, 1997).

The development of the questionnaire was an extremely detailed and time-consuming process, including numerous decisions concerning the wording of questions, balancing of fixed-answer and open-ended questions, questionnaire length and the overall format.

The first part of the mail-out survey, and perhaps the most important, is the introductory letter (see Appendix B). Rea and Parker (1997) state that it is important to inform potential respondents about the purpose of the study in order to convey its importance and to alleviate any trepidations that potential respondents are likely to have. It is equally important to convince potential respondents that their participation is useful to the respondents themselves. In the introductory letter (see Appendix B) the researcher included the following components, identified by Rea & Parker, as important: *the status of the person conducting the study*, a general statement establishing the *objectives and goals*, the *basis of sample selection* was clarified, assurance that *participation is*

valued and useful, assurance that participation is strictly *confidential* (and in this study, *anonymous*), and *brief mail instructions*.

Part I of the questionnaire (see Appendix B) comprised of demographic, close-ended questions, included for the purposes of narrowing the results and examining data more specifically in one strata or another.

The list of variables (identified in stage 2), were the main focus of the questionnaire. Part II of the questionnaire followed this list of *support areas*, posing closed and open-ended questions appropriate to each variable at hand. Most questions in the questionnaire have closed-ended response choices or categories. Such questions provide a fixed list of alternative responses and ask the respondent to select one or more of them as indicative of the best possible answer. In contrast, open-ended questions have no preexisting response categories and permit the respondent a great deal of latitude when responding to them (Rea & Parker, 1997).

Rea and Parker (1997) suggest that there are several advantages to closed-ended questions; it is for many of these reasons that the questionnaire had a majority of them included. One, a set of alternative answers is uniform and therefore facilitates comparisons among respondents. Two, for purposes of data entry, this uniformity permits the direct transfer of data from the questionnaire to the computer without intermediate stages. Three, the fixed list of response possibilities tends to make the questions clear to the respondent. Four, such categories may remind the respondent of alternatives that otherwise would not have been considered or would have been forgotten. Five, closed-ended answers can be directed, which limits extraneous and irrelevant responses. Six, fixed responses are less onerous to the respondent, who will find it easier simply to choose an appropriate response than to construct one.

There are, however, certain disadvantages, as pointed out by Rea and Parker, (1997), to close-ended questions, which were considered prior to the development of

this questionnaire. One, there is always the possibility that the respondent is unsure of the best answer and may select one of the fixed responses randomly rather than in a thoughtful fashion. Two, and similarly, a respondent who misunderstands the question may randomly select a response or select an erroneous response. These disadvantages can be mitigated by including another alternative in the fixed-response format: "Other please specify _____." This alternative was incorporated throughout the questionnaire, representing a compromise between closed - and open-ended response formats.

In this questionnaire, most questions were close-ended. However, the researcher sought to obtain more rich, in-depth responses to enhance the close-ended data. Therefore, for most of the *variables*, both close-ended and open-ended categories were included. The researcher was aware of the inherent problems with open-ended responses, including the following, as outlined by Rea and Parker (1997). One, open-ended questions will inevitably elicit a certain amount of irrelevant and repetitious information. Two, the satisfactory completion of an open-ended question requires a greater degree of communicative skills on the part of the respondents than is true for a close-ended question. As a result, these questions may elicit responses that are difficult to understand and sometimes incoherent. Three, statistical analysis of open-ended questions entails interpretative, subjective, and time-consuming categorization. Finally, open-ended questions take more of the respondents time; this inconvenience may dissuade some respondents from completing the questionnaire.

The actual phrasing and formatting of the questions was a detailed and thorough process. Rea and Parker (1997) state that there is a very fine line between appropriately and inappropriately constructed questions. They suggest that as a general guideline, wording should be simple, straightforward, and to the point. Therefore, highly technical words or words that require or are associated with higher levels of experience or

education were avoided. The researcher also made an effort to avoid ambiguity in the questions, as well as remain neutral and not include words that carry with them the power to elicit emotions.

The sequence of questions was an important consideration. A poorly organized questionnaire can confuse respondents, bias their responses, and jeopardize the quality of the entire research effort. The following considerations were followed, as outlined by Babbie (1988) and Rea and Parker (1997). One, the first questions should be relatively easy to answer, eliciting a straightforward and uncomplicated opinion or deriving basic factual information. Two, sensitive questions should be minimal, or if included, should be placed late in the questionnaire. Three, related questions should be placed together within the questionnaire so that the respondent can focus and concentrate on specific issues without distraction. In order to facilitate this, separate categories of questions were created and a distinct heading characterizing the section was included. Four, at the very end of the questionnaire, it is often seen as beneficial to use one or more open-ended *venting* questions - ones in which the respondent is asked to add any information, comments, or opinions that pertain to the subject matter of the questionnaire. A small section of four questions such as this was included at the end of the questionnaire.

Whereas the open-ended questions were relatively easy to present, requiring simply an ample number of lines for the respondent to write an answer in full, the close-ended questions required more thoughtful presentation and development. The goal was to measure the variables. Babbie (1988) and Rea and Parker (1997) explain that variables used in a survey project have distinct measurement scales. Some variables can only be classified into labeled categories, or a *nominal scale*. Data is not ordered and no valuation is implied; categories can only be counted with regard to frequency of occurrence. Other variables are capable of being ranked or ordered, the *ordinal scale*. This level of measurement goes a step beyond the nominal scale; it seeks to rank

categories of the variable. The ordinal level of measurement provides information about the ordering of categories but does not indicate the magnitude of differences among these categories. Finally, other variable not only are ranked but are also associated with certain standard units of value that determine exactly by how much the categories of the variable differ; this is the *interval scale*.

Many of the chosen variables have inherent responses ranging from nominal level to interval levels of measurement, and these were accordingly indicated in the questionnaire. This was the case with most of the demographic variables in Part I. For the variables constructed out of the staff interviews and literature review, the use of a scaled response mechanism, in which a continuum of response alternatives is provided for the respondent to consider, was developed with a majority of questions. Generally, a Likert scale was used, which most often entails a five-, seven-, or nine-point rating scale in which the attitude of the respondent is measured on a continuum from highly favorable to highly unfavorable, with an equal number of positive and negative response possibilities and one middle or neutral category. Rea and Parker (1997) explain that all scaled response series would adhere to certain principles. The following were adhered to this questionnaire:

- The number of questions in the series should generally consist of two to ten items, depending on the complexity of the subject matter.
- The questions should be unidimensional; that is, they should be consistent and concerned substantially with one basic issue.
- The scale itself must be logical and consistent with a continuum.
- For each question in the series, the scale must measure the dimensions of response in the same order.

The final consideration was questionnaire length. Rea and Parker (1997) say that a questionnaire should be as concise as possible while still covering the necessary

range of subject matter required in the study. The researcher resisted the temptation of developing questions that, although interesting, would have been peripheral or extraneous to the primary focus of the research. As general guidelines, Babbie (1998) says that mailed questionnaires should take no more than 30 minutes, including open-ended responses. It was estimated in the pre-testing that this questionnaire took approximately 25-35 minutes to complete.

In summary, the questionnaire (see Appendix B) was 12 pages in length and divided into five sections: demographic information, foster parent support services, general fostering and questions concerning breakdown of placements, agency specific questions, and final evaluation questions. The second section (foster parent support services) examined what elements constitute foster family support, and investigated foster parents' perceptions of the level of importance associated with the identified support variables. The third section (general fostering and breakdown questions) addressed such topics as: types of incidents/situations which would benefit from support, and the connection between support and breakdown. The fourth section (agency specific questions) briefly evaluated CAS support services from the perception of the foster parents. Finally, the fifth section afforded respondents an opportunity to discuss in an open-ended manner the types of services they currently are and are not receiving.

The final questionnaire used in this study can be found in Appendix B.

3.8.1 Issues of reliability and validity

As discussed in the previous section, information gathered during the evaluability assessment and the interviews at both sites were used to design relevant and valid questions in the questionnaire. Following the completion of the design, staff at both Children's Aid Societies and a faculty member at the University of Manitoba examined the questionnaire for relevant and valid questions. Finally, the questionnaire was pre-tested on five foster parents, who were asked to comment on the types of questions being asked. Including changes made following the pre-test phase, three drafts were completed of the questionnaire before distribution.

With regard to reliability, five foster parents from the Cornwall and Kingston regions, who the researcher had previously met, were selected to pre-test the questionnaire. The main criteria for selection of respondents for the pretest was their ability to give thoughtful and informed feedback on the quality of the questionnaire. The researcher met in-person with each of the foster parents and had them complete the questionnaire. Answers were analyzed and discussed with the participants and their feedback on any aspect of the questionnaire was encouraged. Several suggestions made by the participants were incorporated into the final version of the questionnaire. For example, one foster parent pointed out terminology that would not be familiar to their agency foster parents (title of foster care worker and consulting psychologist). Similarly, questions which clearly were misunderstood or understood in a variety of ways, were re-worded or eliminated. For example, one foster parent assisted in changing the wording of several questions which asked for rank ordering.

3.9 Distribution of the questionnaire

Upon completion of the questionnaire design and pre-testing component, 114 foster families from Cornwall CAS, and 49 families from the Kingston CAS were mailed a copy of the questionnaire, along with a detailed letter (see Appendix B), and a stamped return envelope to the researcher. This was complete representation of all regular foster homes at both agencies. These families received advance notice that the study was being conducted and that they would receive a questionnaire. Foster parents were asked to return the questionnaire as soon as possible.

3.9.1 Ethical issues

Issues of confidentiality, anonymity, informed consent, and harm to participants through direct or in-direct contact were seriously considered and appropriately managed. The researcher had no access to foster parent names, addresses or phone numbers. All mailing was conducted by the agencies, and foster parents were explicitly asked not to indicate their names on the return questionnaire or return envelope. Participants received a package of information along with the questionnaire which clearly states their rights as participants, and the researcher's handling of confidential material (see Appendix B). They were told that they could choose not to participate, or participate and not answer any questions they found uncomfortable. They were assured that not answering questions or not participating would in no way affect their position as a foster

parent or the support they might receive in the future. All participants were made aware that the research being conducted is confidential and the researcher is bound by ethical guidelines. To further ensure confidentiality, only tabulated and summary information has been incorporated into the thesis. It was not necessary to enclose informed consent documents for signing because returning the questionnaire implied consent, and furthermore, the researcher did not want access to foster parent names.

3.9.2 Questionnaire follow-up

Following distribution of the survey instrument, steps had to be taken to ensure that the response rate was as high as possible prior to cleaning the data set and analyzing the findings. The initial questionnaire distribution yielded a 41% (n=20) response rate from Kingston, and a 27% (n=31) response rate from Cornwall. Four weeks following the mailing of the questionnaire, all families received a reminder in the mail to remember to return the questionnaire (see Appendix E). This was done through the agency and the researcher had no access to family names or addresses.

In addition, a second letter of reminder was sent eight weeks following the initial distribution (see Appendix E). In this letter, foster parents were afforded the opportunity to obtain another questionnaire and stamped return envelope in the event that they had misplaced or discarded the first one received. Once again, this was done through the agency and the researcher had no access to family names or addresses. The response rate increased yielding a 57% (n=28) response rate from Kingston, and a 33% (n=38) from Cornwall. Overall, the response rate for both regions combined was 41% (n=66).

3.10 Research limitations

The following limitations to this study of research are noted, although they may not be exhaustive:

1. The overall response rate (41%) to the questionnaire was low. In a study such as this, a higher response rate is always preferable, making the findings more reliable in terms of generalizability. However, questionnaire response rate does tend to be low in most studies, and therefore should not be compared to other instruments. Furthermore, the researcher did take appropriate steps to increase response rate, and was successful. The value of these findings, although based on lower numbers than desired, should not be minimized; they constitute some of the very few findings specifically regarding foster parent support ever collected.
2. The use of a questionnaire, instead of in-person or phone interviews, to elicit information from foster parents has certain disadvantages. First, and related to point one, there is generally a lower response rate than other methods, however, two follow-ups were implemented in an effort to increase the response rate. Second, the element of self-selection impinges upon the response rate. For example, poorly educated respondents or those with reading or language deficiencies tend to exclude themselves from this form of survey more often than from surveys administered by an interviewer. This creates a bias. Third, the lack of interviewer involvement can create problems. The fact that no interviewer is present means that unclear questions cannot be explained, and spontaneous volunteered reactions and information are not likely to be recorded by the respondent and cannot be probed by an interviewer as would be the case with other methods. However, the benefits of reduced interviewer-induced bias was seen as more important in this study. Finally, and creating another bias in the results, is the lack of response to open-ended questions. It is more likely that questions requiring an original

written response in lieu of fixed answers will be avoided. It was found, however, that respondents generally did answer the open-ended questions, which may point to the concern that only respondents with reasonably good literacy skills responded.

3. The demographics of the sample region may not completely match all other regions in Canada where foster parents offer services. Although the researcher had no compelling reasons to believe that responses would be substantially different elsewhere it is important to recognize that social class, rural/urban location of foster home, culture/ethnicity and different agency policy context could affect the generalizability of the findings. These are always issues that affect any study; however, there were no glaring differences in general agency policy, there is a mix of both rural and urban foster parents working for both agencies, there is a wide mix of social classes offering foster care services and finally, in southern Ontario there is a wide mix of ethnic groups, including Aboriginal foster homes and children.

3.11 Methods of data analysis

The questionnaire was designed for ease in coding and inputting into a standard spreadsheet (Excel 5), which was used for manipulations of the data. All close-ended questions were coded (see code sheets in Appendix C) and entered as such into the spreadsheet. If the question was not answered a letter value of n/a was assigned, which is easier than a numeric value in analysis. Subsequently, a cleaning process was implemented to ensure that there were no errors caused during input. This process involved having an individual, not the researcher, go through the data and confirm the entry as accurate and consistent with the initial entry.

Excel 5 on a Macintosh IIsi was used to store and manipulate all of the data. There were 8 spread sheets in total. Background information was compiled on one spreadsheet for each region. Part II was divided into two parts, due to the enormity of this section, giving two spreadsheets for each region. Part III and IV were lumped together due to the small amount of data yielded from each; one spreadsheet was used for each region. Excel 5 is capable of doing univariate, bivariate and multivariate analysis. This includes summary averages, modes, means, medians, and standard deviations.

The first method employed to summarize the data was univariate analysis, which is the examination of the distribution of cases one variable at a time. This single variable analysis was done for most questions and provides basic core information from the questionnaire. The results are presented either as raw numbers or as a percentage of those respondents who selected certain responses.

The second method employed to summarize the data is called bivariate analysis. In contrast to univariate analysis, subgroup comparisons constitute a kind of bivariate analysis in that two variables are involved. The purpose of bivariate analysis is largely descriptive - independently describing the subgroups - but the element of comparison is added. Several non-directional and directional queries and hypotheses were identified following the generating of univariate results and bivariate analysis performed. All of these queries lead to the overall and central theme of investigation: what do foster parents perceive as the important elements in foster family support. These, mostly non-directional, hypotheses were generated by cross-referencing variables in the demographic section with variables in sections II, III & IV.

With each of these methods, percentages were calculated and variables presented as such. In addition, data is reported in the form of summary averages or measures of central tendency. Mode, the easiest average to calculate reports the most

frequent response/value to a specific question. Mean calculates the arithmetic average of all of the responses, and median represents the middle value in the ranked distribution of responses. Mode was calculated for many of the responses, whereas mean was only selectively calculated. Averages have the advantage to the reader of reducing the raw data to the most manageable form: a single number or attribute.

Although descriptive analysis yields some very important and interesting results, it does not provide a completely sound basis for generalizing beyond the particular study. Even the results of bivariate or multivariate analyses that show relationships between different variables in this study do not provide sufficient grounds for inferring that those relationships exist in general or have any theoretical meaning. Throughout the design and distribution of the questionnaire, consideration was given to potential sources of error impinging on my ability to make inferences about the results and relationship between variables. These sources of biases, threats to internal validity and other extraneous variables represent rival hypotheses if not adequately managed. However, another rival hypothesis is chance, which has to do with sampling error or simply the luck of the draw. No matter how rigorous the research methods are, there is always the chance that the data we obtain may be a fluke and not representative of any broader population. There is sometimes a solution to this dilemma, one that enables us to infer, whether the results/relationship is strong enough to be generalized. The solution is to test to see if the relationship is statistically significant. In cases where bivariate analyses were generated the chi-square test was used to determine whether it is likely that two categorical variables are associated. These computations were completed manually (Schuerman, 1983; Rubin & Babbie, 1993; and Blalock, 1972). The computation begins with the determination of the expected counts in each cell of the table. The expected

count for a cell is computed by multiplying the total number of cases in that cell's row by the column total, then dividing by the total number of cases in the table. Chi-square is computed by subtracting the expected count from the observed count in each cell, squaring that number and dividing by the expected count. These values are then added up for all the cells. The computed Chi-square is then looked up in a table (Blalock, 1972). To use the table it is necessary to determine the degrees of freedom for the computed number. The degrees of freedom are found by subtracting one from the number of rows and one from the number of columns and multiplying these numbers together. To use the Chi-square table we find the line for our degrees of freedom and determine the largest entry in that line which is smaller than our computed number. We look at the probability listed at the top of that column (Schuerman, 1983).

3.11.1 Analyzing the open-ended responses

The questionnaire was designed with numerous open-ended questions which were intended to provide some richer answers to flesh out and enhance the close-ended data. Upon receipt of the questionnaires the open-ended questions were manually transcribed into lists corresponding to each question. Responses were transcribed verbatim and where answers were identical a notation of a duplicate response has been made for purposes of tabulating.

For each such question and list of responses, categories were devised based on the responses (see Appendix D). Following this, responses were assigned to the most logical category. The decision to place a certain response into a certain category was based on a set of rules (see Appendix D).

In an effort to ensure that the categorizing was reliable, the researcher implemented a reliability checking process for the qualitative open-ended data set. Following the researcher categorizing the responses and assigning responses following a set of decision rules, an independent individual repeated the exercise for 50% of the responses. More specifically, this person looked at each question's list of responses and categorized the first 50% of the responses. Upon completion of this, the researcher and the individual assisting in this process reviewed the chosen category in contrast with the category previously chosen by the researcher. 88% of the categories chosen by the assisting reviewer were identical to that of the researcher. The remaining 12% were discussed and several were altered. Many of the discrepancies resulted from a difference in understanding of the rules associated with the categories. For the most part, following discussion and debate a consensus was reached. Although 88% is an acceptable number for reliability of this form of data set, the researcher chose to have this assisting individual review the remaining 50% to ensure a higher level of reliability. In the second half of the data, 94% of the categories chosen by the assisting reviewer were identical to that of the researcher. Again, the remaining 6% were discussed and several were altered and a consensus reached on which category the response should be slated into.

As a result of discussion with the assisting reviewer and the researcher's advisor, many of the initial categories were collapsed during data analysis. Many of the categories were similar and the numbers low in some categories, so it was beneficial to collapse several categories, making the discussion more manageable.

Results were simply tabulated and are reported as both raw numbers and percentages. In addition, results are reported, where appropriate, in the form of summary averages or measures of central tendency. Mode, reporting the most frequent response/value to a specific question, is the main central tendency reported.

The richness and in-depth nature of the open-ended responses was useful when discussing the close-ended data. Where helpful, full responses are transcribed and discussed.

3.12 Feedback to participants

Upon completion of the final report, an executive summary was produced and is accessible to all foster families through the foster parent association office. The Foster Parent Association and CAS offices were given a complete copy of the report.

4.0 Data analysis and findings

Chapter four presents all of the univariate and bivariate results of the questionnaire for both agencies. This includes both close-ended findings and open-ended responses. The format of presentation for this chapter follows the structure of the questionnaire, methodically reporting the overall findings, whereas Chapter 5 discusses trends and patterns which emerged from the study. Charts and graphs are interspersed throughout for easier reference.

The results from Kingston and Cornwall have been combined, and are generally presented as such, for two main reasons. First, the findings were similar for both agencies; large differences in the frequency counts between Kingston and Cornwall results are noted. Second, the overall response rate was low (Kingston $n=28$ and Cornwall $n=38$), therefore it was beneficial to combine the n ($N=66$) to be able to discuss a larger group and make general inferences about the broader foster care population. It is important to remember that the purpose in presenting these results, as with the entire thesis, is not to evaluate specific agencies and their programs, but to offer general findings and conclusion regarding foster care support.

4.1 Background information (Questionnaire part I)

Eighty eight percent ($n=58$) of the respondents who completed the questionnaire were the mother in the foster home. Overall, 55% ($n=36$) reported that both parents were the main caregivers of the foster children. However, in Cornwall 32% ($n=12$)

stated that the mother was the main caregiver, while in Kingston 64% ($n=18$) reported that the mother was the main caregiver of the foster children. This is connected with the report that in Cornwall, 82% ($n=31$) of foster families have two parents in the home on a regular basis, while in Kingston only 61% ($n=17$) reported same.

Overall, 24% ($n=16$) of all responding foster parents have fostered for less than three years, while 53% ($n=35$) have fostered for more than 10 years (see Figure 1). Respondents from Cornwall generally have fostered for a longer period of time than those who responded from Kingston. There was a difference in the demographics for the two agencies. Sixty six percent ($n=25$) of Cornwall respondents reported that they have fostered for more than 10 years, whereas 36% ($n=10$) of Kingston respondents reported same.

Figure 1:

Years fostering for Kingston or
Cornwall CAS

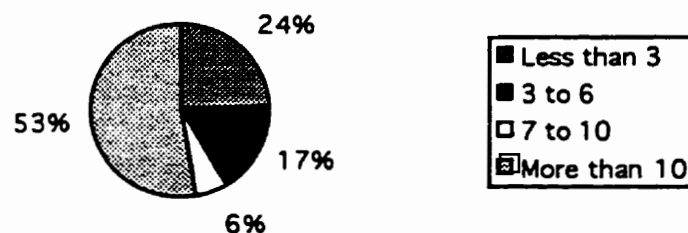
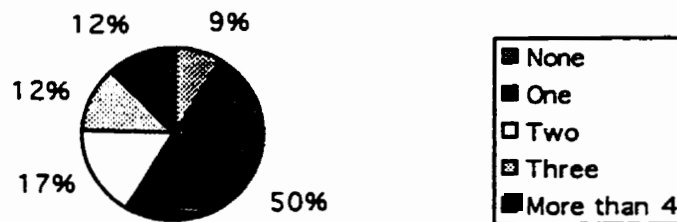


Figure 2:

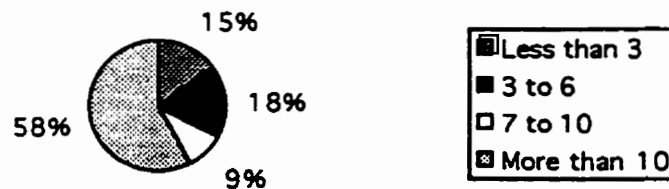
Number of children currently fostering



A large percentage of respondents (50%; $n=35$) reported that they were currently fostering either one child or none (Figure 2). In Kingston there were no responding foster families fostering more than 3 children, whereas 21% ($n=8$) of Cornwall families reported that they were fostering four or more children.

Figure 3:

Total number of children fostered for Kingston or Cornwall CAS



The responses to the question of how many different children the respondent had fostered for the agency were consistent and similar between agencies (Figure 3).

Fifteen ($n=10$) had fostered less than three different children. Eighteen percent ($n=12$) had fostered between three and six children. Nine percent ($n=6$) had fostered seven to ten children, and 58% ($n=38$) had fostered more than ten different children.

In total, 66 respondents reported that they were currently fostering 112 children; 59 boys and 53 girls.

With regard to any other children residing in the home, besides the foster children, 61% ($n=40$) overall responded that "yes, there are other children in the home".

4.2 Foster care support services (Questionnaire Part II)

The following section presents findings from Part II of the questionnaire (Appendix B). Several questions have been collapsed into smaller sections for easier reading and reference.

4.2.1 What is foster family support?

Forty four percent of families believe that *support* is primarily **emotional help**, including recognition, caring, celebrating, talking, sharing concerns and respect. Included in the myriad of responses categorized under emotional help are the following:

- "...support means when stress levels are high, being able to call someone and share areas of concern without being seen as not being able to cope."

- "...support is understanding, caring CAS staff who don't criticize and judge."
- "...recognition of the added time, energy and stresses on a family."
- "...respect for us as professionals."
- "...someone at CAS who cares about your and your needs."

In contrast to this, 30% of families reported that *support* is **concrete**, including areas of finances, relief, physical help, and concrete crisis help. Sixteen percent of respondents gave broad, all encompassing answers to this question, indicating that "support is everything". These responses generally included an indication that support is made up of both emotional and concrete supports. The final 10% were not specific about the content of contact that they associated with *support*. One respondent stated that support "is an unbiased person to assist you in times of trouble and pat you on the back in the good times". Another stated "...support includes a right to my views and the right to express them without retribution from CAS." And, another stated that support is "keeping foster parents informed of available supports" .

Foster parents were asked to check the types of support they feel are important in their foster home (Part II, question 2 - Appendix B). The list was compiled from previous foster care studies, the literature and interviews with agency staff. In addition, respondents were asked to select the five most important supports and rank order them. However, it was necessary to eliminate rank from this question when analyzing the data because a large percentage of respondents either did not understand the instructions or simply failed to do the rank ordering. Therefore, if there was indication that the question was completed in any way (for example - six choices checked), each choice was categorized as either important or not important. If the choice was checked or ranked it was categorized as important. If the choice had no marking, but other choices had been

checked, it was alternately categorized as not important. All respondents ($N=66$) answered this question, with a majority of the choices on the list being identified as important. With the exception of three categories (**support when a foster child leaves the home, meetings & assistance from the psychologist (Cornwall agency) and other**), the remaining selections were identified as important elements in support by over 50% of respondents. The following list identifies those selections which were chosen by more than 70% of the respondents as important:

- Assistance in crisis situations - 92% ($n=61$)
- Regular visits from the child's social worker - 77% ($n=51$)
- Support when a child is initially placed in the home - 76% ($n=50$)
- New foster parent orientation and training - 73% ($n=48$)
- Plan of care meetings every 90 days - 73% ($n=48$)

4.2.2 Pre-service training & pre-placement visits

Foster parents were asked if information nights and initial pre-service/core-training for new foster parents is a helpful support (see Figure 4). Eighty six percent ($n=56$) reported that core-training is definitely or at least generally helpful, while 14% ($n=9$) reported that they were unsure or the training was not really important. This question was followed by an inquiry into what topics foster parents felt should be included in the information nights and initial pre-service/core-training for new foster parents.

With the exception of the **other** category, over 60% of respondents reported that all of the topics listed were important elements of information nights and initial pre-service training. The topic rating which was the highest was **CAS policies and procedures**, which 71% ($n=46$) of foster parents reported as being important.

Figure 4:

Usefulness of pre-service & core training for new foster parents

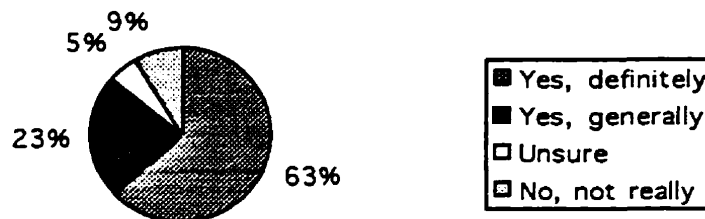
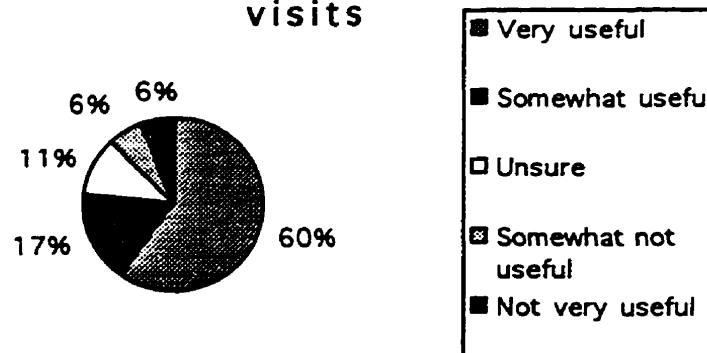


Figure 5:

Usefulness of pre-placement visits



Similarly, foster parents were asked how useful pre-placement visits by the social worker and the child (see Figure 5). Sixty percent ($n=39$) of respondents ($n=65$)

stated that these visits are *very useful*; 17% ($n=11$) said they are *somewhat useful*; 12% ($n=8$) said they are either *somewhat not useful* or *not very useful*; and 11% ($n=7$) said they were *unsure*.

The questionnaire continued by asking two open-ended questions regarding pre-placement visits in an effort to elicit more in-depth responses. First, foster parents were asked to "describe how pre-placement visits by the social worker and child would be helpful". Forty four respondents answered this question. However, there were 53 separate citations noted in the responses, therefore percentages refer to citations rather than respondents. For the most part, this question was answered in two major ways. 51% ($n=27$) of respondents focused on the benefit of the visit to the foster family, including an opportunity for the foster family to meet and assess the child, a chance for the family to obtain information, set rules and routines, for the family to get a hands on feeling of the child and to familiarize existing family members with the child. Some of the responses to that end include the following:

- "...the preplacement visit is an initial indicator of what the foster family can expect."
- "...gives the foster parent a chance to know if it is a good match."
- "...breaks the ice for the foster family and other children in the home."
- "...an opportunity for the foster family to find out any difficulties the child is having."

Alternately, 36% ($n=19$) of respondents focused on the benefit of the visit to the foster child coming into the home, including an opportunity for the child to meet and assess the foster family, an opportunity for the child to request that certain needs be met and a chance for the child to familiarize him/herself with the foster family. Thirteen

percent ($n=7$) of foster parents specifically identified preplacement visits as most helpful with teenagers, and not with very young children or babies.

The second open-ended question related to preplacement visits asked foster parents to “describe how preplacement visits are not helpful.” Forty three respondents did not answer this question, reducing the n to 23. Of those 23 responses, 57% ($n=13$) reported that the behaviour at these visits either by the child or the foster family is not typical of daily behaviour. Several verbatim responses related to this percentage include the following:

- “...the child does not act like themselves for a few days, so premature misconceptions can occur.”
- “...visits are overly friendly and not typical of daily behaviour expectations.”
- “...it takes a while for the child to really adjust to a new home.”

Twenty two percent of respondents felt that preplacement visits that are too short are not helpful. Four percent stated that visits with very young child and babies are not helpful. Nine percent of respondents felt that social worker negativity and lack of support is not helpful at these visits, while another 9% stated miscellaneous reasons, including the feeling that preplacement visits are time consuming and that they create apprehension.

4.2.2.1 Pre-placement visits and years fostering

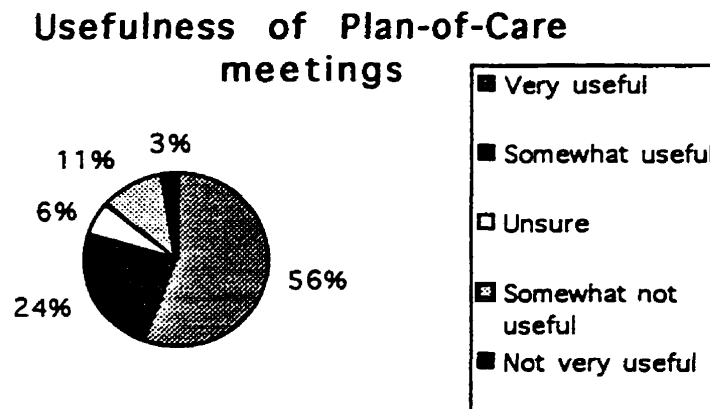
Bivariate analysis was completed looking at years fostering with usefulness of pre-placement visits. Sixty five respondents answered the question regarding usefulness of pre-placement visits. Thirty eight foster parents reported that they had seven or more years of fostering experience, whereas 27 had less than seven years experience. Of those 38 respondents who have had seven or more years fostering experience, 79% ($n=30$) said that pre-placement visits were *very useful*; 18% ($n=7$) said they were *somewhat useful*; and one respondent was *unsure*. There were no respondents with more than seven years fostering experience who reported that pre-placement visits were *somewhat not useful* or *not at all useful*. On the other hand, 27 foster parents reported that they had less than seven years of fostering experience. Of those 27 respondents, 33% ($n=9$) said that pre-placement visits were *very useful*; 15% ($n=4$) said they were *somewhat useful*; 11% ($n=3$) said they were *unsure*; 15% ($n=4$) said the visits were *somewhat not useful*; and 26% ($n=7$). Significance testing (Chi-square) showed that there is sufficient grounds to claim there is a relationship between years of fostering and perception regarding the importance of pre-placement visits; Chi-square = .001. As fostering experience increases the perception of the positive value of pre-placement visits also increases.

4.2.3 Plan-of-care meetings & initial support

Plan-of-care meetings are held every 90 days with the foster family, natural family if available and/or appropriate, the foster child, and several representatives from the Children's Aid Society. Figure 6 illustrates that 80% of respondents indicated that such

meetings are *very useful* or *somewhat useful*, while 9% felt that they were either *not very useful* or *somewhat not useful*. Another 11% were unsure of how useful Plan-of-Care meetings were.

Figure 6:



Expanding on the close-ended question relating to Plan-of-Care Meetings, foster parents were asked to describe how the meetings are helpful and not helpful. Forty six people gave a total of 52 responses to the first question, asking respondents to discuss how POC meetings are helpful. This part of the question was answered in two main ways. Seventy one percent of the citations related to the positive, helpful **outcome** of the POC, whereas 29% related to what needs to occur **at the POC** meeting to make it helpful. Referring to *helpful* outcome, 25% ($n=13$) of the responses indicated that "direction is given to foster parents and expectations and responsibilities are outlined" at the POC. Twenty one percent ($n=11$) of the citations pointed to "the child's needs and routines being identified and outlined at the POC" as being helpful. Fifteen percent ($n=8$) of the citations suggested that "evaluation of the placement" is useful, and another 13% ($n=7$) said that the POC meeting is "a good opportunity for open discussion and a chance

to express feelings". One foster parent stated "the POC is a good forum to express our concerns, feelings and apprehensions". Another foster parent reported "the POC gives you a chance to sit with the social worker and the child and go over the past months - and discuss things to be worked on and point out accomplishments". On the other hand, of those respondents who answered the question in the light of what needs to occur at the POC meeting to make it helpful (entirely from the Cornwall region) 13% ($n=7$) of the citations stated that it is helpful when "foster parents have input and are listened to".

The question asking foster parents to describe what is not helpful at POC meetings, was also answered in two ways. Thirty three percent of respondents referred to an overall/ broad purpose or outcome of the POC, whereas 67% referred to what was specifically not helpful at the POC meeting. Within the first section of respondents, 18% ($n=6$) stated that POC's are "not helpful with crown-ward cases and long-term situations". Within the second section of respondents, 21% ($n=7$) felt that involvement of natural family was not helpful"; 18% ($n=6$) stated that "problems with social workers made the POC's not helpful"; and 12% ($n=4$) felt that the POC is not useful when "there is no input offered from or asked from the foster parents". Several miscellaneous, yet interesting comments made in response to this question include the following:

- "...what goes on paper looks simple - life is not simple and frustration or failure to meet expectations can occur."
- "...generally not realistic because the child has his/her own agenda".
- "...POC should be every 6 months because they never change".
- "...POC is not helpful if the social worker has it written up and completed before the foster parents arrive".

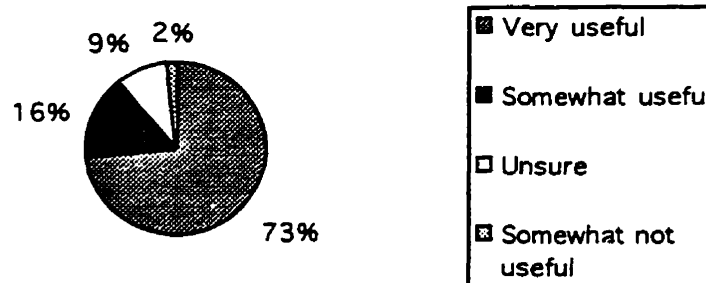
Finally, and related to Plan-of-care meetings, foster parents were asked if they felt that it is important to have input at the regular Plan-of-Care meetings? One hundred percent ($N=66$) of all respondents from both agencies answered "yes". The open-ended continuance of this question asked foster parents to describe why or why not. Twenty five respondents answered this question, with a total of 27 separate citations, therefore percentages refer to citations in this summary. Forty four percent ($n=12$) said that foster parent input is important because "foster parents have important information to offer about the child whom they know best". Another 41% ($n=11$) indicated that it is the foster parent who has to implement the POC, therefore they should have input. Some notable responses include the following:

- "...foster parenting is a big commitment and we need to know we have input and some say that the plans will respect our family life style".
- "...the key to success fall on the foster parent who should have input".
- "...I am the stand in parent and therefore should have a lot of say into things that affect him/her".
- "...there is a greater chance that things will work out if the foster parent and social workers can openly talk and discuss".

Foster parents generally felt that initial support when a child is first placed in a foster home is very useful (Figure 7). Seventy three percent ($n=47$) said "very useful"; 16% ($n=10$) said "some what useful"; 9% ($n=6$) were unsure; 2% ($n=1$) said "somewhat not useful"; and there were no respondents who felt that this form of support was "not very useful".

Figure 7:

Usefulness of initial support when a child is first placed



Fifty five foster parents gave 74 responses to the open-ended continuance of the query into initial support usefulness. Forty five percent ($n=33$) of the citations indicated that the most useful support is simply "information on the child", including general information, background information, family history, history of placements, behaviour information. Twenty six percent ($n=19$) suggested that the most useful support when a child is initially placed is to have "basic needs organized", including clothing, medical, dental and school issues organized and paperwork completed in these areas. Finally, 24% ($n=18$) felt that "contact and visits by both the social worker and the foster care worker" were the most useful support when the child is initially placed in their home.

Several verbatim responses related to the final percentage include the following:

- "...regular phone and occasional in-person contact by the social worker and foster care resource person to offer assistance".
- "...someone to talk to on a daily basis for the first several days".
- "...social worker should phone and see how the child is doing".

4.2.3.1 Initial support and years fostering

Bivariate analysis was completed looking at years fostering with usefulness of initial support. Sixty four respondents answered the question regarding usefulness of pre-placement visits. Thirty seven foster parents reported that they had seven or more years of fostering experience, whereas 27 had less than seven years experience. Of those 37 respondents who have had seven or more years fostering experience, 81% ($n=30$) said that pre-placement visits were *very useful*; 19% ($n=7$) said they were *somewhat useful*; and no respondents said they were *unsure*, or that pre-placement visits were *somewhat not useful* or *not at all useful*. On the other hand, 27 foster parents reported that they had less than seven years of fostering experience. Of those 27 respondents, 63% ($n=17$) said that pre-placement visits were *very useful*; 11% ($n=3$) said they were *somewhat useful*; 22% ($n=6$) said they were *unsure*; and 4% ($n=1$) said the visits were *somewhat not useful*. Significance testing (Chi-square) showed that there is sufficient grounds to claim there is a relationship between years of fostering and perception of the need for initial support; Chi-square = .05. As fostering experience increases the perception of the positive value of initial support also increases.

4.2.4 Ongoing training

Figure 8 represents the responses to the question of how helpful ongoing training for all foster parents is. There were 64 responses to this question. Ninety percent ($n=57$) reported either *yes, definitely* or *yes, generally*. Four percent ($n=3$) were *unsure*, and only 6% ($n=4$) reported *no, not really*.

Figure 8:

Ongoing training: Is it a helpful support?

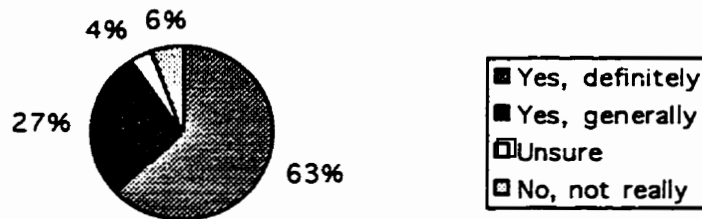
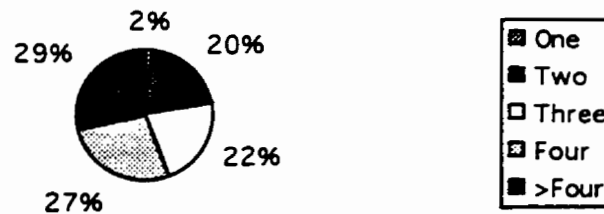


Figure 9:

Number of training sessions foster parents should be offered annually



As indicated in Figure 9, 29% ($n=16$) of foster parents who responded felt that they should be offered *more than four training sessions per year* ; 27% ($n=15$) said *four per year* ; 22% ($n=12$) said *three per year* ; 20% ($n=11$) said *two per year* ; and 2% ($n=1$) said *one per year*.

Respondents identified the type of training sessions they would find helpful and supportive if offered by the agency. The two most frequently cited categories identified as being important training sessions were **dealing with breakdown and its impact**

on the family and child (86%; $n=55$) and behaviour management (83%; $n=53$).

Besides the other category, the two least frequently cited categories identified as being important training sessions were fetal alcohol syndrome/ effect (47%; $n=30$) and teaching healthy sexuality (47%; $n=30$). Table 2 outlines how the categories were selected in terms of importance.

Table 2: Most helpful types of training sessions

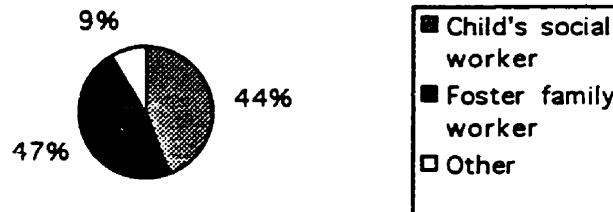
Training session types	Important	Not Important
Dealing with breakdown	86%	14%
Behaviour management	83%	17%
Separation and loss	72%	28%
Emotional abuse	70%	30%
Dealing with natural family	69%	31%
Physical abuse	63%	37%
Sexual abuse	59%	41%
Dealing with disclosures	52%	48%
Non crisis intervention	50%	50%
Fetal alcohol syndrome/ FAE	47%	53%
Teaching healthy sexuality	47%	53%

4.2.5 Foster care worker & child social worker support

Figure 10 represents the findings from the question of who the respondent feels can provide them with the most useful support to their foster family as a whole? Forty seven percent ($n=30$) selected *resource support worker (foster family worker)*; 44% ($n=28$) selected *child's social worker*, and 9% ($n=6$) selected *other*, of which many specified *foster parent association, other foster parents and relatives*.

Figure 10:

Who provides the most useful support to your foster family?



Of those respondents who selected *foster family worker*, 68% stated that “the foster care worker focus is the family as a whole and is an advocate for the family.”

Several statements to that effect include the following:

- “...the foster care worker should know our family best, our needs and should be able to help meet those needs”.
- “...I want to talk to and deal with someone who is on my side. I also think it is important for the child to have someone on their side - this should be the child's social worker”.
- “...the foster care worker mediates for you, the foster parent”.
- “...the foster care worker is more open in conversations because of a developed relationship”.

Of those foster parents who selected *child's social worker* as the person who is the most useful support to their foster family as a whole, 52% said the reason for this is

because “the social worker has the most information on the child”. Several statements to that effect include the following:

- “...the social worker has the child’s complete historical files”.
- “...they know more about the child and what’s going on with the child than anyone else”.

Another 24% stated that the *child’s social worker* was “the person who knows the child best and has dealt most frequently with him/her”. Verbatim statements to that effect include:

- “...they know the child and circumstances well - together we work for the child’s welfare and benefit”.
- “...this person knows the child best and should be most interested in ensuring that the child is in the best possible environment”.

A small number ($n=6$) of respondents selected *other* in response to the question of who can provide the foster family with the most useful support. Fifty percent ($n=3$) of these respondents identified the *Foster parent association* as the *other party*. The reasons given for this selection include the following:

- “...they are volunteers and experienced foster parents who are non-biased.”
- “...because CAS workers have to protect their own welfare. The foster care worker and the social worker works for the CAS not for the foster parents; this is not the case with the foster parent association”.

4.2.5.1 Foster care worker support

Several questions related specifically to support received from the foster care worker. The three most frequently cited categories identified as being the types of support the foster families would like to receive from the foster care worker were in-home support during crisis situations (90%; $n=52$); immediate phone support during crisis situations (86%; $n=50$); and someone to talk to specifically about the child's behaviour (78%; $n=45$). Besides the other category, the least frequently cited category identified as being the types of support the foster families would like to receive from the foster care worker was 30 day visit following the child's placement in the foster home (45%; $n=26$). Table 3 outlines how the remaining categories were selected in terms of importance.

Table 3: Types of support foster parents would like to receive from the F.C.W.

Types of support - foster care worker	Important (n)	Important (%)	Not important (n)	Not important (%)
Pre-placement meeting	33	57%	25	43%
7 day visit	29	50%	29	50%
30 day visit	26	45%	32	55%
Regular visits throughout placement	33	57%	25	43%
In-home support during crises	52	90%	6	10%
Phone support during crises	50	86%	8	14%
Someone to talk to about stresses	36	62%	22	38%
Someone to talk to about behaviours	45	78%	13	22%
Someone to talk to following removal	39	67%	19	33%
Other	7	12%	51	88%
Total n	n=58		n=58	

Table 4: When foster parents want to have phone contact with F.C.W.

Phone support - foster care worker	Important (n)	Important (%)	Not important (n)	Not important (%)
Initial stages of child's placement	37	61%	24	39%
On a regular basis	38	62%	23	38%
During crisis situations	45	74%	16	26%
Only when you initiate contact	18	30%	43	70%
Other	6	10%	55	90%
Total n	n=61		n=61	

With regard to when foster parents feel it is helpful to have phone contact with the foster care support worker, and as indicated Table 4, the most frequently selected category was **during crisis situations** (74%; $n=45$), while the least frequently selected category was **only when the foster parent initiates contact** (30%; $n=18$).

Respondents were asked to expand on this topic and if they checked regular visits as a support they would like to receive from the foster care support worker, describe what is most helpful and supportive during those home visits. Forty three percent ($n=18$) of respondents reported that "listening and talking about the child and placement" is the most important element of regular visits from the foster care worker. Several statements which were categorized to that effect include the following:

- "...general discussion about the child".
- "...talking about the child's actions and reactions in the new family setting".
- "...someone to be totally honest with about the placement - a nonjudgmental ear".

Another 21% ($n=9$) identified a variety of nonspecific emotional supports, including understanding, caring, reassurance, respect and overall concern as the most important

element of regular visits from the foster care worker. Some statements within this category include:

- "...to let the foster parent know everything is okay and to reassure them they are doing a good job".
- "...to be reassured that your worker is concerned about your well-being all the time, not just during crises".

4.2.5.2 Child social worker support

Several questions related specifically to support received from the child's social worker. The three most frequently cited categories identified as being the types of support the foster families would like to receive from the child's social worker were **immediate phone support during crisis situations (73%; $n=47$); someone to talk to specifically about the child's behaviour (69%; $n=44$); and a 7 day visit following the child's placement in the foster home (67%; $n=43$)**. Besides the other category, the least frequently cited category identified as being the types of support the foster families would like to receive from the child's social worker was **someone to talk to about the daily stresses of fostering (22%; $n=14$)**. Table 5 outlines how the remaining categories were selected in terms of importance.

Table 5: Types of support foster parents would like to receive from the C.S.W.

Types of support - child's social worker	Important (n)	Important (%)	Not important (n)	Not important (%)
Pre-placement meeting	24	38%	40	62%
7 day visit	43	67%	21	33%
30 day visit	28	44%	36	56%
Regular visits throughout placement	31	48%	33	52%
In-home support during crises	36	56%	28	44%
Phone support during crises	47	73%	17	27%
Someone to talk to about stresses	14	22%	50	78%
Someone to talk to about behaviours	44	69%	20	31%
Someone to talk to following removal	19	30%	45	70%
Other	6	9%	58	91%
Total n	n=64		n=64	

Table 6: When foster parents want to have phone contact with C.S.W.

Phone support - child's social worker	Important (n)	Important (%)	Not important (n)	Not important (%)
Initial stages of child's placement	39	60%	26	40%
On a regular basis	38	58%	27	42%
During crisis situations	50	77%	15	23%
Only when you initiate contact	13	20%	52	80%
Other	6	9%	59	91%
Total n	n=65		n=65	

With regard to when foster parents feel it is helpful to have phone contact with the child's social worker, and as indicated in Table 6, the most frequently selected category was **during crisis situations (77%; n=50)**, while the least frequently selected category was **only when the foster parent initiates contact (9%; n=6)**.

Respondents were asked to expand on this topic and if they checked regular visits as a support they would like to receive from the foster care support worker,

describe what is most helpful and supportive during those home visits. Thirty eight percent ($n=13$) of respondents reported that “assistance with behaviour problems and situations” is the most important element of regular visits from the foster care worker. This includes problem solving, discussion of the child’s needs and direction on effectively disciplining the child. Some statements within this category include:

- “...social worker may be able to point out any differences and difficulties in the child’s behaviour and give constructive advice on these matters”.
- “...general discussion of child’s needs and how to meet them”.

Another 35% ($n=12$) identified a variety of nonspecific emotional supports, including understanding, caring, reassurance, respect and overall concern as the most important element of regular visits from the child’s social worker. And, 15% ($n=5$) specifically wanted the social worker to “spend time with the foster child” during the *regular visits*. Several comments to that effect include the following:

- “...talk to the child - to inform them of what is happening with their natural family”.
- “...someone to focus on the foster child - to spend quality time with them”.
- “...for the social worker to reassure the child that someone is monitoring the foster family and is their advocate”.
- “...it would be nice if the social worker saw the foster children more often than just at the Plan-of-Care meetings”.

4.2.6 Crisis support

The two most frequently checked answers, indicating that they are an important support during crises were **direction on how to handle the situation** (73%; $n=48$); and **someone to talk to over the phone** (71%; $n=47$). With the exception of the other category, the two least frequently checked answers were **someone to come in-home and handle the crisis** (9%; $n=6$); and **relief following the crisis** (29%; $n=19$). However, it should be noted that there was a great difference in response to the last cited percentage between agencies. Only 4% ($n=1$) of Kingston foster parents indicated that **relief following the crisis** was important, whereas 47% ($n=18$) of Cornwall foster parents thought it was important. Table 7 outlines the overall selected categories:

Table 7: Crisis support needs

Crisis support	Important (n)	Important (%)	Not important (n)	Not important (%)
Someone to talk to by phone	47	71%	19	29%
Someone to talk to in-person	33	50%	33	50%
In-home back-up support	27	41%	39	59%
Direction on how to handle situation	48	73%	18	27%
Someone to handle situation	6	9%	60	91%
Someone to talk to after crisis	38	58%	28	42%
Relief following the crisis	19	29%	47	71%
Other	3	5%	63	95%

When asked to expand on the same topic, 79% ($n=50$) of responding foster parents said that they wanted workers to "offer assistance and direction both in-home

and via phone”, but generally did not want them to handle the situation. Statements to that effect include the following:

- “...someone to come in-home and mediate a solution”.
- “...suggestions on how to handle the situation”.
- “...direction on how to handle the situation so that you can carry on with the child in your home”.
- “...someone to talk to on the phone immediately - this can often prevent a disaster”.

Another 16% ($n=10$) indicated that they needed emotional support, including affirmation, caring and respect. Statements include:

- “...need a sounding board”.
- “...confirmation that we are handling everything appropriately”.
- “...the truth about where the agency stands in regards to you and your home”.

4.2.7 Group support meetings

With regard to whether or not foster parents would find group support meetings helpful, overall, 58% ($n=37$) said *yes* ; 28% ($n=18$) said *unsure* ; and 14% ($n=9$) said *no*. However, only 39% of Kingston respondents said *yes*, whereas 72% of Cornwall parents said the same.

Of those respondents who said that group support meetings would be helpful, 66% ($n=21$) stated that the helpful component of such meetings would be “sharing experiences and eliciting advice based on commonalities”. Comments along that line include the following:

- “...we have common frustrations, difficulties and common sense of helping kids”.
- “...there is nothing like experience from other foster parents to share with you and to problem solve”.
- “...exchange/ evaluation of parenting problems and solutions”.
- “...a good sounding board resource of experienced ears”.
- “...sharing experiences with other foster parents is always rewarding. We realize then that we are not isolated”.
- “...these meetings would be made up of nonbiased and experienced foster parents who do not have a hidden agenda”.

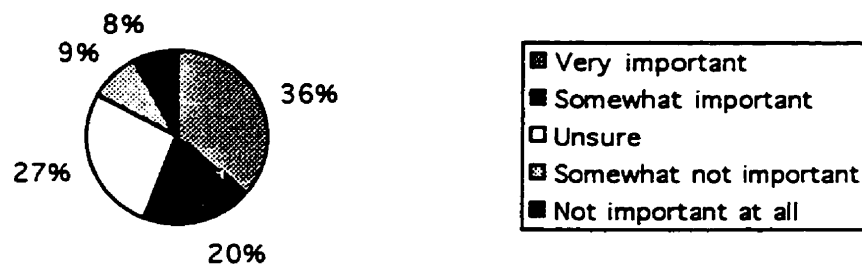
4.2.8 Foster parent association support

Overall, 56% ($n=37$) reported that the Foster Parent Association (FPA) was either *very important* or *somewhat important*, 27% ($n=18$) stated that they were *unsure* of the importance of the FPA, and 17% ($n=11$) reported that the FPA was either *somewhat not important* or *not important at all* in terms of support to their family (Figure 11). Kingston respondents stated that the FPA was of more importance than did the Cornwall respondents. Sixty one percent of Kingston responding foster parents reported that the FPA was either *very important* or *somewhat important*, whereas 53% of Cornwall

respondents reported the same. On the other hand, only 8% of Kingston foster parents stated that the FPA was either *somewhat not important* or *not important at all*, while 24% of Cornwall foster parents felt this way.

Figure 11:

How important is the Foster Parent Association?



When asked to identify the types of support which would be useful to receive from the foster parent association, the two most frequently checked answers to this question were **foster parent support group meetings** (62%; $n=37$) and **assistance in crisis situations** (60%; $n=36$). The two least frequently checked answers to this question were **family counseling** (23%; $n=14$) and **someone to talk to about the child's behaviour** (27%; $n=16$). Generally the responses from both agencies were similar. However, the most frequently checked answer to this question by Kingston foster parents was **someone to talk to about daily/ general fostering stresses** (80%; $n=20$). Two categories (Employee assistance program and communicator's group) were only included in the Cornwall questionnaire because these programs do not exist in Kingston. With specific regard to those categories, 43% of Cornwall respondents identified the employee assistance program as being important, and 57% identified the

communicator's group as important. Table 8 outlines the percentages for each category by agency.

Table 8: Foster Parent Association support

Support from FPA	Important (n)	Important (%)	Not important (n)	Not important (%)
KINGSTON AND CORNWALL				
Assistance in crisis situations	36	60%	24	40%
Regular phone contact	18	30%	42	70%
Family counseling	14	23%	46	77%
Support group meetings	37	62%	23	38%
Referrals to outside support	27	45%	33	55%
Someone to talk to about stresses	34	57%	26	43%
Someone to talk to about behaviours	16	27%	44	73%
Foster parent training	28	47%	32	53%
Other	3	5%	57	95%
Total n	n=60		n=60	
CORNWALL ONLY				
Employee assistance program	15	43%	20	57%
Communicator's group	20	57%	15	43%
Total n	n=35		n=35	

4.2.9 Overall support

Several questions were devoted to addressing the issue of who is most helpful to the foster parents in raising their foster children. Respondents were asked to rank order the selections up to six by placing a number one through six. However, a large percentage of the respondents did not rank up to six, but most did rank up to at least three. As a result, the analysis only focuses on the first three rankings. Tables 9 through 13 present all of these responses and percentages in completion.

First, foster parents were asked to identify who is most helpful in raising their foster children, besides their spouse"? The most frequently identified person/group ranked as 1st most helpful was the **child's social worker (39%)**. The most frequently identified person/group ranked as 2nd most helpful was the **foster care support worker (32%)**. And, the most frequently identified person/group ranked as 3rd most helpful in raising their children was again the **child's social worker (28%)**.

Second, foster parents were asked a similar question to the previous one with situation qualifiers "Who would you usually contact if you needed help with one of the following fostering situations"? Tables 10, 11, 12, and 13 present all of these responses and percentages in completion. Seventy seven percent of foster parents reported that they would contact the child's social worker 1st for help during a **major crisis**; while 51% stated that the foster care support worker would be their 2nd choice of who to call during a crisis. With regard to **someone to talk to about daily fostering stresses**, respondents evenly reported (28%) that their 1st choice would be the child's social worker, a relative, or another foster parent. Sixty two percent of foster parents reported that they would contact the child's social worker 1st for advice on how to solve a **behavioural problem** with one of their foster children, and 66% stated that the foster care worker would be their 2nd choice in this situation. Finally, 87% of responding foster parents indicated that the child's social worker was the 1st person they would contact for **additional financial assistance** with foster children essentials, and 72% stated that the foster care worker would be their 2nd choice in this situation.

Table 9: Who is most helpful in raising the foster children?

OVERALL MOST HELPFUL	1st (n)	1st (%)	2nd (n)	2nd (%)	3rd (n)	3rd (%)
Child's social worker	26	39%	9	16%	12	28%
Foster care worker	10	15%	18	32%	5	12%
Foster parent association	2	3%	0	0%	4	9%
A relative	14	21%	7	12%	6	14%
Another foster parent	6	9%	13	23%	10	23%
A friend who is not a foster parent	6	9%	10	18%	5	12%
Other	2	3%	0	0%	1	2%
Total n	n=66		n=57		n=43	

Table 10: Who foster parents would choose to help them during a major crisis

HELP DURING A MAJOR CRISIS	1st choice (n)	1st choice (%)	2nd choice (n)	2nd choice (%)	3rd choice (n)	3rd choice (%)
Child's social worker	49	77%	8	15%	0	0%
Foster care worker	7	11%	31	51%	5	11%
Foster parent association	2	3%	1	2%	12	27%
A relative	0	0%	5	10%	8	18%
Another foster parent	4	7%	4	8%	14	32%
A friend who is not a foster parent	0	0%	3	6%	2	4%
Other	1	1%	0	0%	3	7%
Total n	n=61		n=52		n=44	

Table 11: Who foster parents would choose to talk to about fostering stress

SOMEONE TO TALK TO - STRESSES	1st choice (n)	1st choice (%)	2nd choice (n)	2nd choice (%)	3rd choice (n)	3rd choice (%)
Child's social worker	19	29%	4	8%	5	13%
Foster care worker	9	14%	14	26%	9	23%
Foster parent association	0	0%	4	8%	2	5%
A relative	18	27%	4	8%	2	5%
Another foster parent	18	27%	20	37%	6	15%
A friend who is not a foster parent	2	3%	7	13%	15	38%
Other	0	0%	0	0%	0	0%
Total n	n=66		n=53		n=39	

Table 12: Who foster parents would call for advice on a behavioural problem

ADVICE ON BEHAVIOURS	1st choice (n)	1st choice (%)	2nd choice (n)	2nd choice (%)	3rd choice (n)	3rd choice (%)
Child's social worker	41	62%	8	17%	4	10%
Foster care worker	5	8%	31	66%	6	15%
Foster parent association	0	0%	0	0%	6	15%
A relative	5	8%	2	4%	4	10%
Another foster parent	8	12%	2	4%	17	44%
A friend who is not a foster parent	0	0%	0	0%	2	5%
Other	7	10%	2	4%	0	0%
Total n	n=66		n=47		n=39	

Table 13: Who foster parents would call for additional financial assistance

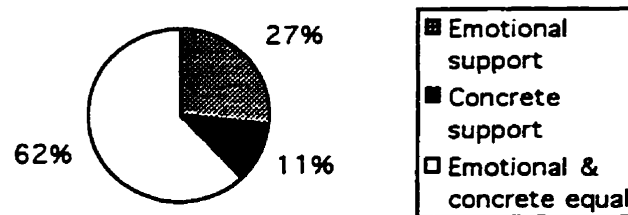
FINIACIAL ASSISTANCE	1st choice (n)	1st choice (%)	2nd choice (n)	2nd choice (%)	3rd choice (n)	3rd choice (%)
Child's social worker	53	87%	7	16%	1	5%
Foster care worker	7	11%	31	72%	0	0%
Foster parent association	1	2%	0	0%	9	47%
A relative	0	0%	0	0%	3	16%
Another foster parent	0	0%	5	12%	4	21%
A friend who is not a foster parent	0	0%	0	0%	0	0%
Other	0	0%	0	0%	2	11%
Total n	n=61		n=43		n=19	

4.2.10 Emotional vs. concrete support

Figure 12 represents the findings from the question which asked which type of support is most important to the maintenance of the foster home? Twenty seven percent ($n=17$) selected *emotional support* ; 11% ($n=7$) selected *concrete support* ; and 62% ($n=39$) selected *emotional and concrete support are equally important*.

Figure 12:

What type of support is most important?



Of those respondents who selected *emotional and concrete support are equally important*, 47% of respondents said the reason why was because “both are essential for coping long-term”. Several statements to that effect include the following:

- “...concrete support is fine, but I need to be emotionally on top because I am more than a baby-sitter. However, if finances become stressful I have to consider if I can continue. So, both need to be there in order for me to feel I can cope and do a good job fostering.”
- “...A fluid balance of those two (emotional and concrete support) are the required ingredients for successful fostering”.
- “...I believe the success of CAS depends on the grade of foster parents it has and to keep these foster parents the agency must show respect and give full support emotionally and physically”.
- “...We have been fostering long enough to know that if we have to financially subsidize CAS we will become frustrated and quit. Left to deal with emotional problems alone would have the same result”.

Another 40% of those respondents who selected *emotional and concrete support are equal* felt that “financial stress leads to emotional stress and ultimately breakdown”, and therefore both are essential.

4.2.11 Relief support

Regarding whether or not relief is a helpful support to foster families, 69% ($n=45$) stated *yes, definitely* ; 14% ($n=9$) stated *yes, generally* ; 6% ($n=4$) reported that they were *unsure* ; and 11% ($n=7$) reported either *no, not really* or *no, definitely not*. These results were also indicated in Figure 13.

Figure 13:

Relief: is it a support to your foster family?



Foster parents were afforded the opportunity to describe how relief is helpful and how it is not helpful. Regarding how relief is helpful, 52% ($n=26$) said that “relief gives foster parents a break, a rest or a holiday”. Another 22% ($n=11$) gave responses to the effect that “foster parents are able to refocus, re-group and re-build parental strength”;

this included comments such as “fresh start, new life, self-analysis and a coping mechanism”. Statements categorized in this manner include the following:

- “...it gives me new life - gets me in high gear again when I was feeling sluggish”.
- “...I even miss them after a few days of rest, whereas I may have been wanting them *out of my hair* prior to relief”.
- “...gives us space and time to regain our self-composure - rest, so that we can try again”.
- “...an opportunity to revive and rest yourself so you are ready to provide quality care again”.
- “...relief is an opportunity to get away with your family”.
- “...it is a chance to do activities with your own children”.

Only 12% ($n=6$) focused on the benefits to the foster child and said that relief is helpful because “the child gets a break from the foster family”.

Regarding how relief is not helpful, 67% ($n=14$) said that “it has a negative effect on the child or the child has bad feeling towards relief, including resentment or being scared”. Statements to that effect include the following:

- “...it upset the foster child to be moved from one home to another”.
- “...resentment of foster children not being taken on the family holiday”.
- “...the child often becomes unsettled and acts out at the relief home; the foster family has to then deal with the fall out”.
- “child gets scared they are moving permanently”.

Twenty four percent ($n=5$) of respondents felt that relief was not helpful because “the relief homes are not competent”. This includes not following foster family rules, lack of training and lack of support to foster family.

A large percentage (52%; $n=25$) of foster parents said they needed relief *once monthly* ; 25% ($n=12$) stated *once yearly* (within this category is once yearly, 1 week per year, 2 weeks per year and not often); 10% ($n=5$) reported that they require relief *twice monthly* ; 6% ($n=3$) said *bi-monthly* ; 4% ($n=2$) said *once weekly* ; and only 2% ($n=1$) said *never*.

4.2.11.1 Relief and years fostering

Bivariate analysis was completed looking at years fostering with perceived usefulness of relief. Sixty five respondents answered the question regarding usefulness of relief. Thirty eight foster parents reported that they had seven or more years of fostering experience, whereas 27 had less than seven years experience. Of those 38 respondents who have had seven or more years fostering experience, 53% ($n=20$) said that relief was *definitely a support*, 21% ($n=8$) said relief was *generally a support*, 8% ($n=3$) said that they were *unsure*; another 8% ($n=3$) said that relief was *not really a support*; and 10% ($n=4$) said that relief was *definitely not a support*.

On the other hand, 27 foster parents reported that they had less than seven years of fostering experience. Of those 27 respondents, 92% ($n=25$) said that relief was *definitely a support*; 4% ($n=1$) said relief was *generally a support*; and another 4% ($n=1$) said they were *unsure*, There were no foster parents with less than seven years

experience who said that relief was *not really a support* or *definitely not a support*.

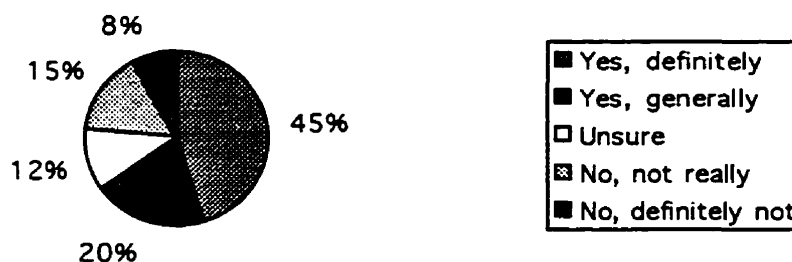
Significance testing (Chi-square) showed that there is sufficient grounds to claim there is a relationship between years of fostering and perception of relief; Chi-square = .01. As fostering experience increases the **negative** perception of the usefulness of relief increases.

4.2.12 Support following a child's removal

Many foster parents reported that it is helpful and necessary to receive support following a child's removal from their home (see Figure 14); 65% ($n=43$) reported either *yes, definitely* or *yes, generally*; 12% ($n=8$) stated they were *unsure*; and 23% ($n=15$) reported either *no, not really* or *no, definitely not*.

Figure 14:

Is support following a child's removal necessary?



Expanding on this topic, foster parents were asked to describe what type of support they would find most helpful following a child's removal from their home. Forty six percent ($n=19$) stated that following the removal of a child they needed "someone to

talk to and to listen, including emotional support and most importantly reassurance”.

Statements to that effect include:

- “...to talk about whether we did everything we could have done for the child”.
- “...need to know that we have not been cut off from the agency”.
- “...someone to let you know it wasn’t your fault”.
- “...a pat on the back”.
- “...assurance you did a good job”.

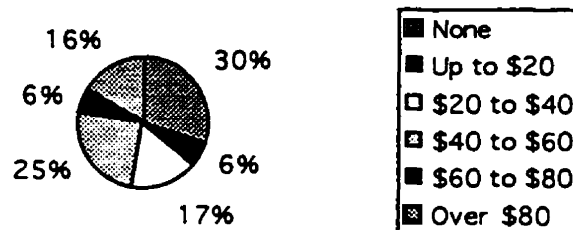
Thirty seven percent ($n=15$) reported that what they needed following the removal of a child was “information on how the child is doing”.

4.2.13 Additional financial support

Finally in Part II of the questionnaire (see Appendix B), foster parents were asked to estimate the amount of money they felt they would need per monthly pay cheque from CAS, in addition to the amount they normally receive, to successfully maintain their foster home. They were asked to estimate on average for one child. Thirty percent ($n=19$) said *none* ; 23% ($n=15$) said *between \$0 and \$40* ; 31% ($n=20$) said *between \$40 and \$80* ; and 16% ($n=10$) said *over \$80*. Figure 15 graphs these numbers in greater detail.

Figure 15:

**Additional money needed
per pay cheque to maintain
foster home? (Per child)**



4.3 General fostering questions (Questionnaire Part III)

Several questions in Part III of the questionnaire: General fostering questions (see Appendix B), were not completed by a majority of the respondents and were therefore eliminated from the data analysis and findings for this thesis. However, there were two questions completed satisfactorily and will be discussed in the following paragraphs.

Respondents were asked to identify the difficult behaviours or situations which would benefit from CAS support. The three most frequently checked answers to this question were **foster child is aggressive or violent towards other children (82%); foster child exhibits depressive behaviour (75%); and foster child runs away (68%)**. On the other hand, the least frequently checked answer to this question of which difficult behaviors or situations would benefit from CAS support was **other children exhibit jealousy of foster child (29%)**.

The questionnaire also inquired into breakdown situations, looking to discover which support services could be offered to foster families to help alleviate this occurrence from happening. Unfortunately most of these questions were not answered and therefore the data set was not large enough or reliable enough to be used in analysis and discussion. The only question relating to breakdown situations which was answered was the one asking if the respondents had had any fostering situations end in breakdown over the past two years. Twenty nine percent ($n=19$) stated *yes* ; and 71% ($n=47$) stated *no*.

4.4 Program specific questions (Questionnaire Part IV)

Part IV of the questionnaire (see Appendix B) was designed primarily for the benefit of the agencies which were used in this study, and did not yield a great deal of information to directly answer the central thesis inquiries. Ratings in response to the question were based on a scale from 1 to 5, with 1 being **not at all helpful**, and 5 being **very helpful**.

Question 1, Part IV asked foster parents "Over the past two years, how would you rate the **support services offered to you by CAS, in general**"? The average response ($N=66$) was 3.5 on a scale of 1 to 5 (see Table 14). Kingston's average response to this question was 4.6. Cornwall rated CAS support services on average at 3.4. It is interesting at this point to note a certain paradox which emerged within the Kingston findings. The agency in Kingston reported during the staff interviews that policy generally says that support to and on behalf of foster parents is not supplied in a formal way, with the foster care worker "holding the hand" of the foster parents. This *policy*

came into effect during agency restructuring approximately one year prior to this study. However, the Kingston subgroup seemed more satisfied in terms of the support they received. What may be occurring, and was discussed during the staff interviews, is that agency (particularly foster care staff) front line personnel, having difficulty with this *policy* and restructuring, are softening the *rule*, and continuing to offer support services to families as they did previously. This explanation may also account for the findings to the following question.

Question 2, Part IV asked foster parents "In general, how would you rate the **support services offered to you by the foster care worker at CAS**"? The average rating ($n=60$) was 3.6 on a scale of 1 to 5 (Table 15). Kingston's average response to this question was 4.4. Cornwall rated foster care worker support services on average at 3.1.

Question 3, Part IV asked foster parents "In general, how would you rate the **support services offered to you by the child's social worker at CAS**"? The average response ($N=66$) was 3.3 on a scale of 1 to 5 (Table 16). Kingston's average response to this question was 3.3, as was the average rating from Cornwall foster parents regarding child social worker support services.

Question 4, Part IV asked foster parents "How would you rate the **support services offered to you by the Foster Parent Association in your region**"? The average rating ($n=60$) was 2.8 on a scale of 1 to 5 (Table 17). Kingston's average response to this question was 3.2. Cornwall rated the foster care association support services on average at 2.6.

Table 14: Rating of support services from CAS, in general.

CAS support overall rating	n	%
Rating 1	10	15%
Rating 2	4	6%
Rating 3	15	23%
Rating 4	19	29%
Rating 5	18	27%
Total n	n=66	
Average rating	3.5	

Table 15: Rating of support services from the foster care worker.

Foster care worker support rating	n	%
Rating 1	9	15%
Rating 2	3	5%
Rating 3	12	20%
Rating 4	15	25%
Rating 5	21	35%
Total n	n=60	
Average rating	3.6	

Table 16: Rating of support services from the child's social worker.

Child's social worker support rating	n	%
Rating 1	12	18%
Rating 2	7	11%
Rating 3	15	23%
Rating 4	14	21%
Rating 5	18	27%
Total n	n=66	
Average rating	3.3	

Table 17: Rating of support services from foster parent association

Foster parent association rating	n	%
Rating 1	11	18%
Rating 2	14	23%
Rating 3	14	23%
Rating 4	16	27%
Rating 5	5	8%
Total n	n=60	
Average rating	2.8	

Several questions in this section of the questionnaire related only to Cornwall, since the programs being rated do not exist in Kingston.

Question 5, Part IV asked foster parents "if you have ever used the **employee assistance program** please rate the services you received". One hundred percent of the respondents chose *not applicable; we have never used this service*. Therefore, there is no rating to report for this service.

Question 6, Part IV asked foster parents "if you have ever used the support services of a communicator, in **what capacity did the communicator assist you**"? Only 3 respondents answered this question, therefore the results will not be included due to insufficient data set reliability.

Question 7, Part IV asked foster parents "if you have ever used the **services of a communicator** please rate the services you received". The average rating ($n=10$) was 3.7 on a scale of 1 to 5.

4.5 Final questions (Questionnaire Part V)

The final questions (Part V of the questionnaire) were all posed in an open-ended manner, allowing foster parents an opportunity to express their feelings regarding services offered to them by CAS, and a chance to provide more information on what they are and are not receiving.

First, respondents were asked to list the types of support services they would like to receive, but are not currently receiving from CAS. Of all the final questions, this was the one that was answered most frequently and in depth. Thirty three percent of respondents said they “wanted more contact with and support from the child’s social worker”. Statements to that effect include the following:

- “...would like occasional contact from the child’s social worker to see how the child is doing”.
- “...more contact by the child’s social worker with the child. They tend to leave the child feeling abandoned”.
- “...more attention from the child’s social worker - not just a response in crises situations”.
- “...more relief - what other employee of the agency would work without holidays”.

Twenty two percent stated that they would like more “concrete support” such as money and relief. Several notable statements linked to this category were:

- “...enough funding to treat the foster child as you treat your own child”.
- “...increased financial support, especially the child’s allowance and activity money”.

- "...relief made easier to get".
- "...more relief; not necessarily overnight".

Twenty eight percent of respondents had comments which could not be categorized other than miscellaneous. A sample of these statements include the following:

- "...foster parents must be given background information early in the placement".
- "...we would like our own support worker hired and paid by FPA, with no loyalty to CAS".
- "...would like staff with knowledge of the particular challenges of a child - especially special needs children".
- "...would like the opportunity to take training alongside the workers".
- "...more training to help us develop a better professional attitude and provide a better home for children in care".

Second, foster parents were asked to identify the helpful support services they are currently receiving from CAS. Twenty two percent ($n=8$) stated that they were "receiving positive assistance from their foster care worker". Another 19% ($n=7$) said that they have "positive contact with and assistance from the child's social worker". Nineteen percent ($n=7$) gave nonspecific general comments about "good support from CAS, including availability of workers and reassurance". Seventeen percent ($n=6$) spoke directly of "relief" as the helpful support services they are receiving. And, 22% ($n=8$) gave miscellaneous responses, including access to professional assistance and training.

Third, foster parents listed any other suggestions about how support services could be improved by CAS in their region. There were too few responses to this question to create categories, and therefore a sample of the responses are included below:

- "...more recreational activities offered by CAS".
- "...foster parents compensated for extra running around and social outings".
- "...have organized foster parent support group meetings regularly".
- "...I'd like an occasional phone call to see if everyone is okay - my experience is that they drop the child off and then forget about them and me".
- "...more knowledge on how to or who to contact for help".
- "...lots more information is needed on children's court day and outcomes".
- "...more support when the child leaves".
- "...an additional foster care support worker".

Similarly, there were too few responses to the final question asking respondents to list any other comments about support services or this study to create categories, therefore a sample of the responses are included below:

- "...I have never been more rewarded than by being a foster mother. I reap the thousands of benefits each day and laugh when people say I must be "special"; they don't know how lucky I am".
- "...I feel like I am all alone. I know nothing about the FPA - they have never contacted me. It is difficult to go to the meetings with four small children. Not only does the CAS ignore you, so does the FPA".

- **"...our agency used to be known as the best agency in Ontario. Since all the cut backs the workers cannot do their jobs properly and therefore children's needs are not being met. This causes stress between foster parents and the CAS".**

5.0 Discussion of findings and conclusions

The following chapter discusses the findings presented in Chapter four in light of the original thesis questions. Major themes and trends which emerged during data analysis and processing of the data set are identified and discussed. All discussion revolves around the central questions of this study: What is foster family support; and Foster parents' perceptions regarding what they need in terms of support to successfully maintain their foster family.

5.1 What is foster family support?

It can be concluded emphatically that the giving of support to foster parents needs to be a vital component of any professional system of foster care. There is no question that foster parents perceive they need adequate support services to fulfill the expectations placed upon them in the '90s and into the new century. This pervasive theme ran throughout the responses from Kingston and Cornwall CAS, and matches that same theme running throughout the 1990 document on foster care published by the Ontario Ministry of Community and Social Services. It is logical therefore to predict that foster parents nation-wide would need and want similar types of support services.

Support has been previously defined, in this research paper and others, as any assistance that is given, received, or exchanged between people, either individually, or, in a group setting. It may include emotional and physical comfort, material goods, or

financial resources. The focus of this research study, however, was to highlight the form such support should take to best meet the needs of foster parents today.

Prior to identifying the major trends and patterns which emerged in the data, it is useful to profile the average respondent, thus providing a clearer understanding of what central demographics are behind the results and analysis. The majority of respondents were the foster care mother, who in almost half the case are the main caregiver. If she responded from Cornwall, she has probably fostered for more than 10 years, whereas if she responded from Kingston, she has probably fostered for less than 10 years. The average responding foster mother fosters, in more than half the cases, one foster child, and has fostered more than 10 children for either Kingston or Cornwall CAS. It is interesting to note from these demographics that the majority of responses came from fostering mothers, indicating that foster parenting is still largely done by the mother in the home. Although not a major focus of interpretation and analysis, this fact surely has some effect on the results and responses. Feminist researchers have been pointing out over the past few decades that the mothering role within the family historically has not been respected, and certainly not recognized and acknowledged. Throughout the responses, there was a strong call for respect and recognition. It is possible to suggest that the high percentage of mothers who responded may have contributed to this finding.

This study isolated three major types of support, which are all important and need to be addressed by agencies placing children in foster homes: 1. Emotional help, with a primary focus on respect and recognition; 2. Concrete help, with a primary focus on financial compensation; and 3. Crisis assistance. From the beginning of the questionnaire, first in question 1, Part II (Describe what foster family support means to you and your family?) and running throughout the responses, foster parents identified

these three stated types of support as most critical to successfully sustaining and maintaining their foster home. It is interesting to note that respect, recognition and financial compensation were also identified in the 1990 document of foster care published by the Ministry of Community and Social Services as essential forms of support which need to be urgently addressed by foster care agencies. Eight years later, foster parents are still asking for respect, recognition and financial compensation.

Emotional support was the most frequently identified form of assistance needed by foster families. This repeatedly included as a central theme, respect, recognition and acknowledgment. To reiterate several verbatim comments made by responding foster parents, the following confirm this finding: "Support is recognition of the added time, energy and stresses fostering places on a family"; "Support is respect for us as professionals"; "Support is reassuring the foster parent that they are doing a good job"; "Fostering is a big commitment and we need to know we have input and respect"; and "Support is understanding and caring CAS staff who do not criticize and judge." Similarly, CAS staff stated, when interviewed prior to the development of this questionnaire, that "Agency staff are **supposed** to respect all foster families and acknowledge the importance of their position in the system." However, when staff were asked to describe their role with foster families, there was not one mention of respect, recognition or acknowledgment of foster parents. In fact, emotional support was one of the key areas that agency staff identified as not being met; one staff specifically said "the emotional needs of foster parents are not being dealt with". Additionally, some staff reported a feeling that foster parents do not receive the following supports on a regular basis: "someone to talk to without being judged"; "acknowledgment and reward for a job well-done"; and "nonjudgmental CAS attitudes". Interestingly, the 1990 report by the Ministry of Ontario also pointed out the need for recognition and respect for foster

parents' skills and efforts as it relates to their needs. This was also the finding of Triseliotis (1990), who says that as we request foster parents to take on increasingly difficult and problematic children it stands to reason that they will need continued support, including recognition (and respect). Many of the other types of supports frequently identified by foster parents in this study reflect, as well, this underlying need for respect and recognition.

Concrete supports, primarily with a focus on financial compensation, were the second main type of support which emerged from the responses to the questionnaire in this study. As was also pointed out in the 1990 document by the Ministry of Ontario, providing adequate levels of financial compensation can do more than simply cover a foster child's expenses. It can convey a message to foster parents that their contribution to the child's overall care is recognized and valued. Financial compensation can also be used to reinforce the perception of foster parents as professionals who are compensated for providing their expertise. One foster parent summarized this feeling of needing adequate financial compensation by stating: "We have been fostering long enough to know that if we have to financially subsidize the Children's Aid Society we will become frustrated and quit". Seventy percent of all responding foster parents reported that they needed additional monies per pay cheque to successfully maintain their foster home. In fact, almost 50% reported that they needed over \$40.00 per child per pay period to achieve that goal. One foster parent reported that this additional money merely allows them the opportunity to treat foster children the same way they treat their own children. When CAS staff were interviewed prior to the development of the questionnaire, several of them reported that financial support to foster parents is inadequate; specifically, one agency staff member stated that "the foster parent must subsidize agency money, which creates a great financial burden."

In conjunction with the call for adequate financial supports, were repeated requests for other tangible/concrete supports such as adequate training, obtaining information on the child, and relief; although relief was not cited as frequently as the other supports in terms of being an essential element of ongoing support from the agency. This final finding is somewhat contrary to the findings in the 1988 Ontario Association of Children's Aid Society study, where foster parents strongly reported that family relief is a must. It is interesting to note that although foster parents did not rate relief services as a particularly high priority in terms of support, foster care staff at both agencies did. In fact, one staff believes and stated that increased respite will result and has resulted in longer placements.

The third support theme identified in this study was crisis assistance. Foster families expressed a number of areas within this type of support which they feel are essential to successful fostering. Parents want direction on how to handle the crisis situation, as opposed to someone handling the situation for them. Several comments indicated that foster parents want a mediator in crisis situations, as well as immediate phone contact with someone, but they were not specific as to whether this should be the foster care worker or the child's social worker. Statements, including the following, point to this area as an important realm of support: During crisis situations, "(we want) someone to come in-home and help mediate a solution"; "(we want) suggestions on how to handle the situation"; (foster parents need) someone to talk to on the phone immediately - this can often prevent a disaster". Supporting this call for crisis assistance, foster care support workers at the two agencies used in this study reported that included in their role with foster families is providing emergency services as a key and important focus. Throughout the responses relating to crisis support, was frequently the underlying need for respect and affirmation; this is evidenced by the following

statements: During crisis situations, "(foster parents need) "confirmation that we are handling everything appropriately"; and "the truth about where the agency stands in regards to you and your home." These findings equate with those presented in 1995 by the Child Welfare League of America, which emphatically stated that support in times of crisis is essential. In their national U.S.A. study, 89% of the respondents said that support within 24 hours of a crisis is an important aid to retention. In addition, that study found that even immediate contact during times of crisis can positively affect retention (CWLA, 1995). In this study, 92% of respondents reported that crisis assistance is an important element of overall support from the agency to help foster parents successfully maintain their foster placements.

Entwined within the three major types of support identified by foster parents were several secondary themes, including: 1. Foster parents care more about quality support than quantitative standards being upheld and adhered to; 2. Foster parents indicate that there is an ambiguity in their relationship with the agency; and 3. Many foster parents seem to be struggling with the ability and/or desire to fully integrate foster children into their family.

Foster parents expressed a want for more quality contact, as opposed to an increase in frequency of contact. For example, foster parents responding in this study do not value the required 7 day, 30 day and 90 day visits and Plan of Care meetings as much as they value quality informal assistance and visits from agency personnel, whether that be the foster care worker, the child's social worker or a representative from the Foster Parent Association. Foster parents know that such standard visitations are mandated by provincial guidelines and often feel that such contact is merely a formality and foster parents are included because it is a requirement. Similarly, foster parents did not express an implicit need to be supported by a specific person or type of

agency worker; they repeatedly talked about the quality of support: needing an advocate, knowing that someone was there for them, someone they could turn to who would be on their side. In fact, they did not express a need for this advocate to necessarily be the same person every time. In some situations, the child's social worker might be more appropriate to assist the family through a crisis; under other circumstances, the foster care worker, who should probably know the family more intimately, might be the key support person.

Repeatedly, respondents pointed to an ambiguous, undefined relationship with the agency and personnel at the agency, as well as with the Foster Parent Association; although, the latter appeared less ambiguous and more understood by foster parents. Foster parents referred to themselves as employees, partners, surrogate parents, and agents of the agency. For example, one foster parent said "...we are agents of the CAS, and therefore should be entitled to input at Plan of Care meetings." Another said "...what other employees of the agency would work without holidays (referring to relief time)". The literature showed similarly that there has been a changing and not clearly defined definition of the foster parent role, from surrogate parents to a more supplemental one. Similarly, agency staff spoke of foster parents in a variety of different ways, including some of the above mentioned. They also referred to a partnership agreement with foster parents, although this term was never mentioned by foster parents in the questionnaires. It was evident after interviewing agency staff, and summarizing the questionnaire responses, that many foster parents and staff are very unclear about what their relationship is with each other. Furthermore, foster parents obviously are struggling with understanding and defining their role with foster children and with the agency.

Finally, and related to the previously discussed theme, is the struggle that foster parents have with how to and whether or not they should fully integrate foster children

into their natural families. Particularly with reference to relief services foster parents indicated their confusion over the integration issue. For example, one respondent stated that "relief is an opportunity to get away with your family", and similarly another said "it is a chance to do activities with your own children". Clearly these foster parents make a distinction between their own children and the foster children, and do not integrate them fully into their home. This is not only an issue discussed and facing foster families, but is an ongoing and quite heated debate among child welfare professionals. Several questions emerge from the responses, including: Are foster parents surrogate parents and should they be able to completely blend foster children into their home - is this possible and/or reasonable? In light of the financial constraints facing agencies, and the mere pittance foster parents receive, is it feasible to expect that they would be able to treat foster children as they treat their own? The questionnaire responses pointed to this ongoing confusion of whether foster parents should, would want to, or would be able to integrate foster children completely into their family unit, and have them treated as *one of their own*.

Therefore, it can be concluded from this investigation that the foster parents of Kingston and Cornwall feel that foster family support should be comprised of three main elements: emotional help, concrete help, and crisis assistance. More specifically, however, they call for respect, recognition, adequate financial compensation and immediate contact during crisis situations. The following section will follow these identified areas and trends throughout several questions in the questionnaire, as well as further discuss the secondary themes of quality support vs. quantity, ambiguous relationships and integration of foster children.

5.2 Discussion of trends & patterns which emerged from the questionnaire

The previously identified support areas of respect, recognition, financial compensation and crisis assistance repeatedly emerged to some degree in most of the questions in the questionnaire. Certainly there were many other areas identified as important elements of support, but the frequency at which the above stated areas appeared should be considered seriously by foster care agencies generally, as well as the two agencies in this study. Furthermore, these areas have been previously identified in other foster care studies in the U.S.A. and in Ontario, and therefore it is logical to assume that foster parents nation-wide could have similar needs and perceptions regarding foster family support.

In addition, foster parents repeatedly pointed to an ambiguous relationship with the agency, caring more about the quality of service than quantity, and the issue of integrating foster children into the family unit. These themes are discussed alongside the three support themes, although they are considered secondary and are not given as much weight as is the call for emotional, concrete and crisis assistance.

The first several questions in the questionnaire yielded responses which focused primarily on the perceived need for concrete-type / tangible supports. Foster parents feel that information nights and initial pre-service / core-training is very important. Similarly, foster care staff at both agencies, when interviewed in the preliminary research stage, identified the offering of initial training sessions to new foster families as an important element of support. Providing initial training (and support) to new foster families was described by foster care support workers as a key and important focus of the FCW. Such preservice training helps prepare future foster parents for the realities, benefits,

difficulties and politics of fostering. Triseliotis (1990) suggested that research is starting to show that there are few breakdowns among foster parents who have been prepared for the job of fostering. Foster parents specifically identified *agency policy and procedures* as the most important area that they would like discussed and covered during these initial training sessions. This area could be described as quite concrete; foster parents wanting to obtain concrete information on the inner workings of the Children's Aid Society. It is suggested that agencies use the opportunity of pre-service training to define and discuss the relationship between foster parents and the agency. The questionnaire responses indicated that foster parents are not clear on what their relationship is with the agency: are they employees, partners, or surrogate parents? Admittedly, this is not an issue that can be resolved at pre-service training, but is a topic that can be introduced at such time and agency workers might receive some insight, even at the early onset of fostering, how prospective foster parents see their upcoming role with the agency and with foster children.

Foster parents reported that prior to a foster child entering their home, pre-placements visits by the social worker and potential foster child are very useful. Burke and Dawson (1987) in Ontario (1990) suggest that pre-placement visits should be required/ mandatory tangible supports, given to all foster parents. Pre-placement visits often serve to ensure that the match between foster child and foster parent is appropriate. Poor and inappropriate matching has been cited frequently as one of the main reasons for foster family breakdown. Triseliotis (1990) suggests that foster parents should not be pressured into taking on children they don't feel confident about or taking on more children than they feel able to cope with; this can ultimately lead to breakdown. During the pre-placement visit foster parents and social workers can assess the match and decide if the foster family is comfortable with the potential

fostering situation. It is essential that at this early stage foster parents' wishes be respected and recognized. It must never be seen as a failure if the foster family decides that they are not able to cope with a child or that they are not an appropriate match with the potential foster placement. In their responses to some of the open-ended questions foster parents discussed the content of such visits with a strong focus on the tangible / concrete benefit to the foster family. Certainly there were several respondents who also pointed to the benefit of such visits to the foster child, but there was a stronger focus on the positive outcome and benefits to the foster parents and their existing families. Specifically, respondents pointed to the need for and benefit of receiving (concrete) information on the child, their histories and any potential behaviour problems which could emerge. Foster care workers went further and spoke of a connection between pre-placement visits and breakdown; one worker had this to say: "Matches between foster parents and children are sometimes not the best, there is often not enough information to share with the family, and resources are scarce - this ultimately leads to stress on the foster family and breakdowns result."

It was hypothesized by the researcher that fostering experience would affect the respondents' ranking of the importance of pre-placement visits. Bivariate analyses, looking at years fostering (examined in questionnaire part I: demographics) with usefulness of pre-placement visits found that more experienced foster parents (7 plus years experience) value pre-placement visits more than foster parents with less experience (less than 7 years experience). The computation of Chi-square showed that at .001 there is sufficient grounds to claim there is a strong relationship between years of fostering and perception of the value of pre-placement visits. Specifically, 79% ($n = 30$) of the respondents with more than seven years fostering experience said that pre-placement visits were very useful, whereas only 33% ($n=9$) of respondents with less

than seven years experience said the same. This is not surprising however, considering that seasoned foster parents would have learned the benefits of pre-placement visits, may have experienced poor matches as a result of no pre-placements visits, and possibly experienced a negative outcome resulting from poor matches and insufficient pre-placement visits.

Regular plan-of-care meetings were cited as being very useful or somewhat useful in 80% of the cases, in an overall sense. However, it is interesting to note that foster parents did not rank Plan-of-Care meetings with the child's social worker and foster care worker as overly important. In fact, 7 day visits and 30 day visits, where the first plan-of-care usually occurs, were ranked the lowest in importance out of 10 categories, specifically with regard to contact with foster care worker. More important, though, were the open-ended comments that foster parents are far more concerned about the content of these meetings, than the actual quantity and regularity. The province sets guidelines dictating the frequency of such meetings, but is less rigorous about the content. There were two main themes which emerged from discussion on plan-of-care meetings. Foster parents want to receive and see the concrete direction which is given at these meetings as positive and helpful. Second, respondents feel that the plan-of-care meetings should be an opportunity to express their feelings. One foster parent stated that "the POC is a good forum to express our concerns, feelings and apprehensions". It should be noted that the 15% of respondents who suggested that the plan-of-care meetings are primarily a time to evaluate the placement were made up solely of Kingston foster parents.

Regarding input at regular plan-of-care meetings, 100% of respondents (n=66) felt that it is important for foster parents to have input at such meetings. Throughout the open-ended responses was woven the thread of respect. By asking foster parents to

share their input and participate fully as a team member, foster parents will feel respected and valued. Repeatedly, respondents stated that they are with the child 24 hours a day, that they know the child best and therefore they have, perhaps, the greatest insight to the child's functioning and the greatest contribution to make at such meetings. Unfortunately, it was reported by foster care staff, when interviewed prior to the development of the questionnaire, that "often the plan-of-care meetings do not include the foster parents." If foster parents are not valued enough to be invited and present at all POC meetings, it is not surprising that they do not feel respected as an equal and important team member. Furthermore, if foster parents are not regularly participating in such meetings, there will surely continue an ambiguous relationship and understanding of the importance of their role within the fostering team. Foster parents are the key influence and players in the child's immediate situation, and must be included in such meetings where foster care plans are being made for the child.

Foster parents definitely want extra support when a child is first placed in their home; especially in the first week. For the most part, they want concrete information on the child and visits from the child's social worker. The latter meets both the emotional support need and a concrete visit for the child. It is encouraging to note that foster care support workers, when interviewed in the preliminary research stage, reported that providing initial support to new foster families is a key and important focus of the foster care support worker. However, several foster parents expressed a concern that sometimes children are simply dropped off at the foster home and abandoned by the child's social worker; such incidents certainly have to be detrimental to the child's functioning and sense of being cared for by the social worker.

As with the pre-placement visits, the researcher hypothesized that fostering experience would have an effect on the response parents gave to the question of how useful initial support is. Furthermore, following the outcome of the bivariate analysis in

the area of pre-placement visits and fostering experience, it was hypothesized that similarly, foster parents with 7 plus years experience would rank initial support as more useful. Bivariate analysis found that 100% of foster parents with 7 plus years experience, who responded to the question of initial support usefulness, reported that it was *very useful or somewhat useful*, whereas only 74% of foster parents with less than 7 years fostering who responded to this question reported the same. As noted in chapter four, Chi-square computation at .05 shows that there is sufficient grounds to claim there is a relationship between years of fostering and perception of the usefulness of initial support.

Ongoing training is overwhelmingly seen as a helpful support, with most foster parents wanting at least three training sessions per year. Supporting this, foster care staff were consistent in their feeling that ongoing training should be mandatory for all foster parents. However, foster parents no longer want to be offered the typical training topics, such as FAS/FAE and teaching healthy sexuality, but want tangible assistance and teaching of behaviour management techniques, and emotionally how to deal with breakdown. Two of the themes identified earlier were apparent in these open-ended responses; that being training support in the areas of concrete and emotional. These training topic areas were very different from those reported in a 1994 PEI study; foster parents in that study identified specific training needs to include drug addictions, fetal alcohol syndrome and fetal alcohol effects, sexual abuse and eating disorders. There could be several reasons for this difference. Issues such as fetal alcohol syndrome/effect and sexual abuse have received a great deal of *press* in the last five to ten years; as a result, new foster parents may be under the press-informed belief that these are the topic areas that they should be trained in. Second, seasoned foster parents have likely been trained in the area of FAS/FAE and sexual abuse, and as such

feel more capable than less experienced foster parents to deal with these situations; they would subsequently not want more training in these topic areas.

It would probably be helpful for agencies to poll their foster parents with regard to training topics seen as necessary; there obviously is a wide range of topics which are important for all foster parents to be exposed to at some point, but the immediate needs of foster parents in each region will likely vary to some extent. Furthermore, a variety of training seminars should be offered to accommodate the interest and need of different levels (years fostered) of foster parents.

A large section of the questionnaire was devoted to eliciting perceived feelings around who provides foster parents with the most useful support. The reason questions were asked separately regarding the child's social worker and the foster care worker is because at both Kingston CAS and Cornwall CAS there are different functions for these two workers, but they both potentially support the foster family, albeit in different ways. Foster care staff clarified and confirmed that support to foster families is provided by both the foster care support worker and the child's worker. Specifically, they said that "the role of the foster care support worker is to focus on and ensure the well being of the foster family and parents, whereas the role of the child's social worker is to focus on and ensure the well being of the child in the foster home." However, although foster parents were able to identify the differences that the agency defines, there was clearly and repeatedly a strong indication of an ambiguous relationship with the agency, the foster care worker and the child's social worker. Not only do many foster parents not really understand what their function is with the agency (are they employees, surrogate parents, partner?), but they do not have a sense of what role the foster care worker and child's social worker is supposed to play in their foster family unit.

Foster parents felt that both the foster care worker and the child's social worker could provide the foster family with useful support, albeit in slightly different ways. It is

assumed that the difference in the ways the foster parents felt the two different streams of workers would be helpful to their family is in large part based on their experience with this division of labour. Foster parents have learned to expect and request different types of support from different workers, but did not say in the questionnaire that they would prefer certain help only from a certain person. Foster parents require support in general, not specifically from one worker or another. What is perhaps more relevant to this thesis in broad terms is the content of the support from either the child's social worker or the foster care worker. This is what will be more helpful to foster care agencies more generally.

The most frequently cited type of support foster parents reported that they would like to receive from either the foster care worker or the child's social worker, but not specifically one or the other was both in-home support during crisis situations and immediate phone support during crisis situations. However, respondents also reported that they do not want someone to come in-home and handle the situation, but rather would like a type of mediator. The second most frequently cited type of support respondents want to receive is concrete advice about the child's behaviour, especially when there are serious problems. Finally, foster parents stated that they want frequent visits from both the foster care worker and the child's social worker. This supports the finding of the Ontario Association of Children's Aid Society's report in 1988 that cited foster parents as saying "there is a definite need for at least weekly contact with a child care worker by telephone ". More importantly, foster parents in this study identified that during these visits they want two things. First, they want emotional contact and to make an emotional connection - this would include showing respect for the foster parents' position and hard work and reassurance that they are doing a good job. Secondly, they want concrete assistance and dialogue about behaviour problems.

Some of the notable statements to that effect, when questioned about the content of the support foster parents would like to receive from either the foster care worker or the child's social worker, include "to be reassured that your worker is concerned about your well-being all the time, not just during crises"; "to have someone to be totally honest with about the placement - a nonjudgmental ear"; and "someone to let the foster parent know everything is okay and to reassure them they are doing a good job".

Specifically during times of crisis, foster parents want concrete direction on how to handle the situation and tangible contact, preferably by phone. As previously noted, foster parents do not want the worker to come in home and handle the situation; on the other hand they would like direction and someone to act as a mediator. The only foster parents who indicated that they wanted the worker to come in home and handle the situation were foster parents who have had less than three years fostering experience. There were no foster parents with more than seven years fostering experience who said that they wanted the worker to come in home and handle the crisis situation. Again, foster parents were not specific about who they would prefer to have assist them during times of crisis; the key is that somebody assist them as soon as possible.

Only half of the respondents said that they would find foster parent support group meetings helpful. However, of those respondents a large proportion spoke to the emotional benefits of such group meetings, making comments such as: "sharing experiences with other foster parents is always rewarding...we realize then that we are not isolated". Foster parents also felt that the tangible benefits of support group meetings would be helpful; they made comments such as: "exchange/evaluation of parenting problems and solutions". Once again, two of the themes identified earlier were apparent in these open-ended responses; that being assistance through foster parent support group meeting in the areas of concrete and emotional help. Furthermore, in 1992

Chamberlain's foster care study (in CWLA, 1995) indicated that weekly support meetings can be a factor in retention, as did the Child Welfare League of America report in 1995.

Similar to the above percentages, only half of the respondents said that the Foster Parent Association (FPA) is important in terms of support to their foster family. It is interesting to note, however, that the most frequently cited type of support foster parents would like to receive from the FPA was foster parent support group meetings. In terms of identifying areas which follow the previously specified common trends emerging from the questionnaire, respondents stated emphatically that they felt the FPA could provide them with someone to talk to about daily fostering stresses (emotional support connection) and could provide them with assistance in crisis situations (crisis support connection). Foster care staff, when interviewed prior to the development of the questionnaire, reported that the FPA supplements and generally compliments the agency in terms of giving support to foster families. FPA representatives went further, saying that "foster parents often call the president of the FPA because they feel there is no formalized agency support". Although the numbers did not overwhelmingly say that the FPA is important, there were very few negative comments made by either foster parents in the questionnaire, or foster care staff in the preliminary research stage, about the FPA. It should, therefore, be considered a useful liaison to the CAS, acting as a peer support network and providing a collective voice for foster families,

The questionnaire had another large question/section devoted to evaluating who is most helpful to the foster parents in raising the foster children. Overall, respondents reported that either the foster care worker or the child's social worker was the person they would choose to contact first or second in most situations involving the foster child. There wasn't a lot of detail gleaned in this section regarding content of contact with the foster care worker or child's social worker, and no direct connections to the common trends emerging from the questionnaire.

When asked which type of support is most important, a large percentage of respondents indicated that emotional and concrete support are equally important; especially when the open-ended responses are examined, the responses to this question clearly connect to all of the trends identified previously - emotional support, concrete/tangible support, respect and crisis support. In particular, one foster parent's response to this question embodies all of these trends: "I believe the success of CAS depends on the grade of foster parents it has and to keep these foster parents the agency must show respect and give full support both emotionally and physically". Similarly, another foster parent said "Concrete support is fine, but I need to be emotionally on top because I am more than a baby-sitter. However, if finances become stressful I have to consider if I can continue. So, both need to be there in order for me to feel I can cope and do a good job fostering".

When discussing the usefulness of relief and its connection to support for a foster family, a very large proportion of respondents felt that relief is essential; however, this does not equate to the response given in question 2, part II, where foster parents did not identify relief as an element that was overwhelmingly connected to support. Notably, only half of Kingston foster parents felt that relief is an important support to their foster family, whereas over three-quarters of the Cornwall respondents felt this way. Following the completion of bivariate analysis, it was found that seasoned foster parents with more than seven years experience do not see relief as useful a support as do foster parents with less than seven years fostering experience. Chi-square computation at .01 shows that there is sufficient grounds to claim there is a relationship between years of fostering and perception of the usefulness of relief. Specifically, 53% ($n=20$) respondents with more than seven years fostering experience said that relief was *definitely a support*, whereas 92% ($n=25$) of respondents with less than seven years

experience said the same. Consistent with what most agencies offer, many responding foster parents requested relief once per month. Again, the results tend to suggest that the longer one fosters, the less relief might be requested.

Within the open-ended responses to both “how is relief helpful” and “how is relief not helpful” there were two themes worth noting. Many foster parents spoke of relief in terms of an opportunity to separate from the foster child and spend time with their own family; in other words, suggesting that the foster child has not been fully integrated into the family unit and fostering for those foster parents is clearly a job, with clear boundaries between the foster child and the foster family and their natural children. This is not to suggest that the child is mistreated or there is some malicious feeling or attempt by the foster parent to segregate the foster child, but a view of fostering which is different from other foster parents. These responding foster parents discussed relief only in terms of it being beneficial to the foster parents. It is interesting to note that foster parents with more than seven years experience were not the parents who identified relief as only beneficial to the parents; those comments almost exclusively came from foster parents with less than three years experience. On the other hand, there are many foster parents who do not see fostering as a job, and have difficulty even with relief because it gives the children the impression and feeling that they are being abandoned and separated from their family. These responding foster parents generally pointed out the negatives of relief, or found the benefits to the child.

The responses regarding difficulty with relief points to an important issue that emerged in several of the open-ended sections of the questionnaire, the issue of foster child integration. Agencies and child welfare policy often speaks in terms of foster children being fully integrated into the foster family unit, or of having foster parents take on a type of surrogate parent role. However, the reality of this happening is often not realistic or feasible. One of the primary reasons that foster families are unable to fully

integrate children is a lack of funding. It is very difficult for many families to treat foster children as their own when they barely receive enough money for basic food, shelter and clothing. That said, should foster families be expected to dip into their own pockets to pay for special outings, meals out, fashionable clothing, holidays for foster children - all the extras that many natural children would receive? If not, foster children will not be treated as the other members of the foster family, and essentially not integrate into the family unit. As a result, agencies reap the outcome of children not blending and thriving in many foster homes, and ultimately foster home drift increases, costing the agency and province more money than if there was a special fund for families to access for special events such as holidays, meals out and weekend outings.

One of the last questions in part II of the questionnaire inquired of foster parents whether or not support following a child's removal was necessary and helpful. Although many respondents did suggest that it is necessary, over 35% were unsure or said it was not necessary. Of those foster parents who do feel that such support and contact is helpful and necessary, most pointed out the emotional benefits and the need for respect, reassurance and affirmation. In the open-ended responses came through a fear that there would be retribution from the agency if a child had to be removed, and a strong call for reassurance that the foster parents are still "okay" following such an incident.

Finally in part II, foster parents emphatically stated that they require a great deal more money to successfully maintain their foster homes. This clearly fits in with one of the overall themes (need for concrete supports) which emerged from respondents to the questionnaire. Seventy percent of responding foster parents feel they need additional money per child, with almost 75% of those feeling that they require more than \$40.00 per pay cheque per child. This was one of the very strongest statements in request of concrete support. Perhaps the biggest impact that a lack of money has is on the ability of the foster family to fully integrate the foster child. As previously discussed, foster

parents have an ongoing struggle of how to treat the foster children as they would and do treat their own children. If there is a lack of funding, how are foster parents supposed to finance extra outings, holidays, treats, etc.? Surely they cannot be expected to pay out of their own pockets. But, the consequence of them not doing this is that foster children will not be integrated into the family unit.

The answers to the questions in the final section of the questionnaire, which were solely comprised of open-ended responses, support the overall themes previously identified in this section. Many of these responses were more specific, identifying certain individuals from whom they receive services or from whom they would like to receive services. Several of those verbatim comments were listed in chapter four and will probably be interesting, if not useful, to the two agencies used in this study. What is important in this study is the fact that the final comments support the three trends which emerged throughout the questionnaire.

5.3 Final conclusions

Support to foster families needs to be a key component of all foster care agencies. This must extend from the early stages of pre-training of potential foster parents to the final stages of assistance following the departure of a foster child from the home.

Foster parents in this study identified three main areas of support, which they feel are most critical to successful fostering. Emotional help, with a primary focus on respect and recognition was the main support area identified, followed by concrete help, with a focus on financial compensation, and finally, crisis assistance.

Respondents reported repeatedly and emphatically that they want respect, affirmation, acknowledgment of a job well done and to be treated equally as part of a professional team. Respect, according to the Oxford dictionary, is a deferential esteem felt or shown towards a person, including the avoidance of harm, degradation, insulting or interrupting said person. Practically and consistent with definition, respect was described in several ways in the open-ended responses which could have implications for practice. Respect is including foster parents at all meetings regarding the child in their care and listening to their ideas, input and complaints at such meetings. Respect is expressing gratitude for doing the extremely difficult and challenging job of fostering. Respect is returning foster parents' phone calls immediately, and letting them know that all of their concerns, queries and discussions are important to the agency and ultimately important to the success of the placement. Respect is not blaming a foster parent when a child runs away, has to be removed or acts out. Respect is offering all foster parents the same training that is offered to employees of the agency. These are only some of the examples of respect which were identified and discussed throughout this section and in chapter four.

The theme of respect resounded throughout many of the responses, and could be the basis of assisting in the retention of many foster parents who have felt the extreme stresses of fostering without an adequate support system. The connection between fostering breakdown and a lack of support was identified repeatedly in the findings, as well as identified by foster care staff at both agencies during the preliminary interviews. Furthermore, the literature is starting to document research studies which support such assertions. Certainly there must be some degree of connection, and as a result, foster care agencies need to address the support they are offering foster families, or risk further breakdown and decreased retention rates. Agencies are faced with financial constraints, and may attempt to explain and justify a less than adequate support system

with discussion of such difficulties, but for the most part, the emotional type of support pointed to in this study is certainly the kind of support which can be provided by CAS, even in the face of financial cutbacks and constraints.

Foster parents call for more concrete support, especially an increase in financial compensation. Although money is only one aspect of effective and successful fostering, many foster parents pointed out that it is difficult to integrate the child fully into your family setting if there is not adequate funding to treat the foster child as you treat your own child. Parents also made the connection between financial stress leading to emotional stress, which may ultimately lead to breakdown situations. Parents do recognize, however, that the agencies are in very difficult positions with regards to funding and have extremely tight budgetary constraints. What foster parents want, at a minimum, in light of this knowledge, is to know that the agency is doing everything it possibly can, on behalf of foster parents, to apply for funding increases. Foster parents also need to be kept abreast of any movement in this area, and know where they stand, in advance, in terms of per diem decreases and increases. These points clearly tie in with one of the other main requests of foster parents in terms of support - respect.

Third, foster parents plead for immediate crisis support, either by phone or in-person. Without such support foster families may continue to breakdown and children move from home to home at an unacceptably high rate. Parents have to know, with complete certainty, that there will be someone there to assist them in difficult and dangerous situations. We expect foster parents to accept more and more difficult children each year, with a whole myriad of problems and potential for violence; immediate crisis support has to be a guarantee.

In addition to the three key support areas of emotional, concrete and crisis assistance, foster parents pointed to some very critical issues which definitely warrant exploration by all agencies, including both Kingston and Cornwall Children's Aid Society.

First, foster parents want quality time with agency workers, not quantity. In short, they would rather have fewer contacts that are in-depth and respectful, including foster parents as equal team members, than several half-hearted Plan-of-care meetings. Second, respondents describe an ambiguous relationship between the agency and foster parents. Foster parents, as well as agency workers, are unclear as to whether foster parents are employees, partners, surrogate parents or something else. Furthermore, it is unclear to most foster parents and workers in this study what the relationship is between foster parents, foster care workers, child's social worker, management at the agency and who is the support person or where the line of support is drawn. Repeatedly, foster parents indicated that they did not really feel that they have an advocate, or that they are unsure as to who the advocate really is. This relationship needs to be discussed, explored and finally, defined by the both the agency and fostering parents. Third, foster parents express difficulty and confusion with the issue of foster child integration; should they be fully integrated and is this financially feasible? Agencies could bring this concern and debate to the forefront of discussion and at a minimum, allow foster parents the opportunity to express their feelings and ideas. This would be the respectful way to treat foster parents.

The emotional areas of respect, acknowledgment and affirmation need to be non-debatable supports; crisis assistance must be available and an attempt to increase financial compensation for the exceptionally challenging and difficult job these parents are doing take centre stage of priority in foster care units nation-wide. If agencies attempt to fulfill these basic requirements of fostering support, the issues of ambiguous relationships and debate over integration may resolve themselves. It is imperative that agencies and workers within agencies, along with provincial policy makers acknowledge that foster children deserve real quality care, not minimal basics and that foster parents have a right to be respected and supported. Currently these are not mandated rights.

5.3.1 Implications for further research

Relatively little research has been completed in the area of foster family support, which provided and continues to provide an exciting opportunities to expand on the literature base and knowledge base in this area. The research study just completed could be seen as a stepping stone to further research about the topic. Each of the key findings calls for and warrants exploration in greater depth, perhaps through the use of in-person interviewing, as opposed to mail-out survey. This would surely yield richer, more in-depth findings to enhance the basic core information gathered during this study. Components of such research could include investigation into the integration issue (many foster parents identified throughout this study that they are struggling with the desire and/or ability to fully integrate foster children into their foster home) and the perception of an ambiguous relationship (several foster parents described an ambiguous, undefined relationship with the agency). A broadening of the sample group would be beneficial for purposes of generalizability; perhaps a sampling of families across Canada, across more varied cultural, ethnic and social class backgrounds would produce results which would conclusively be applicable to all agencies in Canada.

It is the researcher's hope that this study has highlighted the need for further study in the area of foster family support, and that agencies will heed foster parents' call for acknowledgment of their need for greater support services. Foster parents deserve the right to be heard, they certainly indicated in this study that they have very strong opinions and feelings about the topic. These opinions and feelings need to be investigated and documented - for the benefit of not only the participating foster parents, but for the purposes of knowledge and ultimately improving services to children and families everywhere.

References

- Aldridge, M.J., & Cautley, P.W. (1975, June). The importance of worker availability in the functioning of new foster homes. Child Welfare, LIV(6), 444-452.
- Babbie, E. (1989). The practice of social research. Belmont, CA: Wadsworth Publishing Company.
- Benedict, M.I., & White, R.B. (1991, January-February). Factors associated with foster care length of stay. Child Welfare, LXX(1), 45-58.
- Berridge, D. (1987). Foster home breakdown. Oxford, UK: B. Blackwell Ltd.
- Blalock, H. (1972). Social statistics. New York, NY: McGraw-Hill Book Company.
- Campbell, L., & Heinrich, K. (1993, May). Macdonald Youth Services: Evaluation of the alternative parent home program. Winnipeg, MB: Campbell & Heinrich Research Associates.
- Child Welfare League of America. (1995). Foster parent retention and recruitment. Washington, DC: CWLA.
- Child Welfare League of America. (1991). A blueprint for fostering infants, children and youths in the 1990s. Washington, DC: National Commission on Family Foster Care.
- Children's Aid Society of Ottawa-Carleton. (1992, December). Child and youth counsellor – Non-residential: Job description.
- Children's Aid Society of Ottawa-Carleton. (1995, August). Quarterly report for foster/adoption support program.
- Children's Aid Society of Ottawa-Carleton. (1995, October). Child and youth counsellor – Foster care and adoption support: Job description.
- Children's Aid Society of the Frontenac-Kingston region. (1994, October). Treatment Foster Care Program Manual. Kingston, ON: CAS.
- Children's Aid Society of the United Counties of Stormont, Dundas and Glengary. FCRU Policy and Procedure Manual.
- Cleaver, H. (1994). An evaluation of the frequency and effects of foster home breakdown. In B. McKenzie (Ed.). Current perspectives on foster family care for children and youth. (pp. 132-144). Toronto, ON: Wall & Emerson, Inc.

Coley, S.M., & Scheinberg, C.A. (1990). Proposal writing. Newbury Park, CA: SAGE Publications.

Darnell, D. (1988). Foster care reports: CAS of Ottawa-Carleton/OACAS comparative summary of recommendations. Toronto, ON.

Department of Health. (1991). Patterns and outcomes in child placement: Messages from current research and their implications. London, England: HMSO.

Doelling, J.L., & Johnson, J.H. (1989, February). Foster placement evaluation scale: Preliminary findings. Social Casework: The Journal of Contemporary Social Work, 96-100.

Eastman, K. (1979, November). The foster family in a systems theory perspective. Child Welfare, LVIII(9), 564-570.

Fein, E., Davies, L.J., & Knight, G. (1979, March). Placement stability in foster care. Social Work, 156-157.

Fein, E., Maluccio, A.N., & Kluger, M.P. (1990). No more partings: An examination of long-term foster family care. Washington, DC: Child Welfare League of America.

Ferguson, R.V., & Anglin, J.P. (1985, Summer). The child care profession: A vision for the future. Child Care Quarterly, 14(2), 85-102.

Gabor, P., & Charles, G. (1994). The evaluation of specialist foster care: Current approaches and future directions. In B. McKenzie (Ed.). Current perspectives on foster family care for children and youth. (pp. 162-182). Toronto, ON: Wall & Emerson, Inc.

Gabor, P.A., & Collins, D.G. (1985). Family work in child care. Journal of Child Care, 2(5), 15-27.

Garfat, T., & Newcomen, T. (1992, August). AS*IF: A model for thinking about child and youth care interventions. Child & Youth Care Forum, 21(4), 277-285.

Health and Community Services. (1994, October). Foster care review committee: Final report. Prince Edward Island: Health and Community Services Agency.

Hepworth, H.P., & Drew, C. (1980). Foster care and adoption in Canada. Ottawa, ON: The Canadian Council on Social Development.

Herman, J.L., Lyons-Morris, L., & Taylor Fitz-Gibbon, C. (1987). Evaluator's handbook. Newbury Park, CA: SAGE Publications.

Johnston, P. (1983). Native children and the child welfare system. Toronto, ON: Canadian council on social development in association with James Lorimer & Company, Publishers.

Jones, A., & Rutman, L. (1981). In the children's aid: J.J. Kelso and child welfare in Ontario. Toronto, ON: University of Toronto Press.

Kagan, R., & Schlosberg, S. (1989). Families in perpetual crisis. New York, NY: W.W. Norton & Company, Inc.

Katz, L., & Robinson, C. (1991, May-June). Foster care drift: A risk-assessment matrix. Child Welfare, LXX(3), 347-358.

Krueger, M. (1991, December). A review and analysis of the development of professional child and youth care work. Child & Youth Care Forum, 20(6), 379-388.

Kufeldt, K., & Allison, J. (1990, Spring). Fostering children-fostering families. Community Alternative: International Journal of Family Care, 2(1), 1-17.

Mackenna, P. (1994). Ontario Association of Child and Youth Counsellors: Effectiveness and future directions. Journal of Child and Youth Care, 9(4), 1-10.

Magura, S., & Silverman Moses, B. (1986). Outcome measures for child welfare service: Theory and applications. Washington, DC: Child Welfare League of America.

Maier, H.W. (1991, December). An exploration of the substance of child and youth care practice. Child & Youth Care Forum, 20(6), 393-412.

Martin, H.P., & Beezley, P. (1976). Foster placement: Therapy or trauma. In H. Martin & C. Kempe (Eds.). The abused child: A multidisciplinary approach to developmental issues and treatment. Cambridge, MS: Ballinger Publishing Company.

McKenzie, B. (1994). Current issues in foster family care. In B. McKenzie (Ed.) Current perspectives on foster family care for children and youth. (pp. 1-16). Toronto, ON: Wall & Emerson, Inc.

Milner, J.L. (1987, March-April). An ecological perspective on duration of foster care. Child Welfare, LXVI(2), 113-123.

Ontario. (1987). The child and family services act, 1984. Toronto, ON: Queen's printer for Ontario.

Ontario Association of Children's Aid Society. (1988). The future of foster care: Towards a redesign for '89. Toronto, ON: OACAS.

Ontario Association of Children's Aid Society Journal. (1992, May).

Ontario Ministry of Community and Social Services. (1990). Foster care as a residential family resource: A background paper. Ottawa, ON.

Oppenheim, A.N. (1992). Questionnaire design, interviewing and attitude measurement. New York, NY: Pinter Publishers.

Pardeck, J.T. (1984, November-December). Multiple placement of children in foster family care: An empirical analysis. Social Work.

Pecora, P., Whittaker, J., & Maluccio, A. (1992). The child welfare challenge: Policy, practice, and research. Hawthorne, NY: Aldine De Gruyter.

Prosser, H. (1978). Perspectives on foster care. Windsor, Berks, England: NFER Publishing Company Ltd.

Rea, L. & Parker, R. (1997). Designing and conducting survey research: a comprehensive guide. San Francisco, CA: Jossey-Bass Publishers.

Reistroffer, M. (1972). Participation of foster parents in decision-making: The concept of collegiality. Child Welfare, 51, 25-29.

Rest, E.R., & Watson, K.W. (1984, July-August). Growing up in foster care. Child Welfare, LXIII(4), 291-306.

Rosenbluth, D. (1995). Moving in and out of foster care. In J. Hudson & B. Galaway (Eds.). Child welfare in Canada: Research and policy implications. (pp. 233-244). Toronto, ON: Thompson Educational Publishing.

Rubin, A. & Babbie, E. (1983). Research Methods for Social Work. Pacific Grove, CA: Brooks/Cole Publishing Company.

Schuerman, J. (1983). Research and Evaluation in the Human Services. New York, NY: The Free Press.

Small, R.W., & Dodge, L.M. (1988, Spring). Roles, skills, and job tasks in professional child care: A review of the literature. Child & Youth Care Quarterly, 17(1), 6-23.

Stecher, B.M., & Davis, W.A. (1987). How to focus an evaluation. Newbury Park, CA: SAGE Publications.

Stone, N.M., & Stone, S.F. (1983, January). The prediction of successful foster placement. Social Casework, 64(1), 11-17.

Swift, K., & Longclaws, L. (1995). Foster care programming: Themes, policy implications and research agenda. In J. Hudson & B. Galaway (Eds.). Child welfare in Canada: Research and policy implications. (pp.245-251). Toronto, ON: Thompson Educational Publishing.

Steinhauer, P.D. (1991). The least detrimental alternative: A systematic guide to case planning and decision making for children in care. Toronto, ON: University of Toronto Press.

Triseliotis, J. (1990). Developments and current trends in foster care. London, ENGLAND: Routledge & Kegan Paul.

Twigg, R. (1991). The next step in foster care. Journal of Child and Youth Care, 6(1), 79-85.

Ure, J. (1995, February). Fostering: A community service strategy for the year 2000. Halifax, NS: Joint Committee on Foster Care Change.

Walsh, J.A., & Walsh, R.A. (1990, March-April). Studies of the maintenance of subsidized foster placements in the Casey Family Program. Child Welfare, LXIX(2), 99-114.

Walsh, J.A., & Walsh, R.A. (1990). Quality care for tough kids: Studies of the maintenance of subsidized foster placements in the Casey Family Program. Washington, DC: Child Welfare League of America.

Ward, H. (1994). Assessing outcomes in child care: The looking after children project. In B. McKenzie (Ed.) Current perspectives on foster family care for children and youth. (pp. 183-197). Toronto, ON: Wall & Emerson, Inc.

Appendix A

Interview schedule 1: Foster Care staff and Foster parent association staff
(Kingston CAS and CAS of the United Counties of Stormont, Dundas & Glengarry)

Name:

Agency/ FPA:

Position:

Years in this position:

1. Please describe the foster care support system available to foster families from the Children's Aid Society (CAS) in your region:
2. Is there any one person (or more) specifically designated to the role of foster care support to families?
3. Please describe the foster care support system available to foster families from the Foster Parent Association (FPA) in your region:
4. What is your role in supporting foster families generally or in times of crisis?
5. Do you feel that the CAS is providing foster families with the necessary supports they require to successfully maintain their home and foster child placements?
6. Do you feel that the FPA is providing foster families with the necessary supports they require to successfully maintain their home and foster child placements?
7. What support are foster families not currently receiving that they require, in your opinion, to successfully maintain their home and foster child placements?
8. What supports are foster families currently receiving to help them maintain their home and foster child placements?
9. What are the main situations facing foster families which require regular support?
10. Do you feel that there is a connection between foster family breakdown and a lack of regular support or alternately between foster family stability and regular support? Please expand.
11. What changes to foster parent support should be made by your agency?

Appendix B

FOSTERCARESUPPORTSTUDY

Dear Foster Parent:

You are being asked to participate in a study which examines **foster care support** services in your region. Your participation will ensure that foster parents have the opportunity to express their views on the issue of foster care support and how it might be improved. This study is an independent assessment conducted by a social work student, approved and encouraged by the Foster Parent Association and Children's Aid Society in the Cornwall Region.

The results of the study will be reported in a summary form, which will not include any information that would identify you or your family. Agency and Foster Parent Association staff will not be able to link your responses to you and your family in any way. You will be provided with the opportunity to obtain a summary of the findings.

Participation in this study is completely voluntary. Of course, I hope that you will agree to be a part of the study because it is very important to hear from those who have had experience with the Foster Care Program at CAS. If you decide not to participate, this decision will not have a negative effect on the services you are receiving or might receive in the future.

Thank you for taking the time to consider participating. If you decide to participate, please return the completed questionnaire in the stamped envelope. Please do not include your name or return address on the questionnaire or envelope.

Yours sincerely,

Karen M. LeVasseur

INFORMED CONSENT INFORMATION (you do not need to return this page)

Before you make a decision about participating I want you to understand your rights as a potential participant.

You should be aware that:

You do not have to answer every question. If you decide to participate and encounter questions that you would rather not answer, you do not have to respond. Of course, I would appreciate if you could respond to most of the questions so that my information is more complete.

Your responses will be kept completely confidential. Information from your responses will be identified by a number for analysis and will not contain any identifying information. The investigator is legally and ethically bound to maintain total confidentiality.

Participation in this study is completely voluntary. It is up to you to decide to participate. **The services you are currently receiving or require in the future will not be negatively affected by your decision.**

FOSTER CARE SUPPORT STUDY
(*Cornwall Region*)

Please answer each question by placing an X in the appropriate box or by writing your answer in the space provided. Do not indicate your name or the names of foster children on these pages. This will help to ensure confidentiality and anonymity. If possible please have the main caregiver of the foster children fill out this questionnaire.

PART I: BACKGROUND INFORMATION

1. Are you the mother or father in this foster home?
 Mother Father

2. Who is the main caregiver of the foster children in your home?
 Mother Father Both

3. Are there two parents in you home on a regular basis?
 Yes No

4. How many years have you been a foster parent for the Children's Aid Society of the United counties of Stormont, Dundas & Glengarry?
 Less than 3 years 3 to 6 years 7 to 10 years
 More than 10 years

5. How many children are you currently fostering?
 None 1 2 3 4 or more

6. Please identify your current foster children by gender, age, and how long they have resided with you (ex; Boy - 10 years old - 1 year)

7. How many different children have you fostered for this agency?
 Less than 3 3 to 6 7 to 10 More than 10

8. Besides the foster children, are there any other children residing in your home?
 Yes No

If yes, please identify them by gender and age.

PART II: FOSTER CARE SUPPORT SERVICES

This research study is interested in what support means to you as a foster parent, and what supports you need to successfully maintain your foster home and foster children. Please think back over your years of fostering, and answer the following questions as completely as possible. Thank you.

1. In your own words please describe what foster family support means to you and your family? This may include support from the agency and external to the agency.
-
-

2. In previous foster care studies foster parents and social service staff have identified the following supports as necessary to successfully maintain foster families. Please check the types of *support* you feel are important in you foster home. You may check as many as apply. In addition, please select the five most important supports and rank order them by writing the corresponding number beside the chosen support (ie. 1, 2,3,4,5 with 1 being most important and 5 being fifth important).

- New foster parent orientation & training
- Pre-placement visit and meeting with child and social worker
- A 7 day visit by the social worker
- A Plan-of-Care meeting at 30 days
- Plan-of-Care meetings every 90 days
- Support when a foster child is initially placed in the home
- Ongoing training
- Regular visits from the resource support worker (foster family worker)
- Regular phone calls from the resource support worker (foster family worker)
- Regular visits from the child's social worker
- Regular phone calls from the child's social worker
- Foster parent support group meetings
- Meetings and assistance from the consulting psychologist(Cornwall only)
- Foster parent association
- Assistance in crisis situations
- Relief
- Support when a foster child leaves the home
- Other _____

3. A) Do you feel that information nights and initial preservice/core-training for new foster parents is a helpful support?

- Yes, definitely
- Yes, generally
- Unsure
- No, not really
- No, definitely not

B) What topics do you feel should be included in the information nights and initial preservice/core-training for new foster parents? Please check as many as apply. In addition, please select the three most important topics and rank order them by writing the corresponding number beside the chosen topic (ie. 1, 2,3 with 1 being most important and 3 being third most important). Topics continue on following page.

- Overview of the Children's Aid Society
 Discussion about working with the child's family
 The foster child, including stages of separation
 Child management , including constructive discipline
 The fostering experience in general
 CAS policies and procedures
 Other _____

4. A) Prior to a foster child entering your home, how useful are pre-placement visits by the social worker and child?

- Very useful
 Somewhat useful
 Unsure
 Somewhat not useful
 Not very useful

B) Please describe how pre-placement visits by the social worker and child would be helpful?

C) Please describe how pre-placement visits by the social worker and child would not be helpful?

5. A) How useful are Plan-of-Care meetings in terms of support to the foster family?

- Very useful
 Somewhat useful
 Unsure
 Somewhat not useful
 Not very useful

B) Please describe how Plan-of-Care meetings would be helpful?

C) Please describe how Plan-of-Care meetings would not be helpful?

D) Do feel that it is important for you to have input at the regular plan-of-care meetings?

Yes No

Why or why not?

6. A) How useful is initial support when a child is first placed in your home?

Very useful
 Somewhat useful
 Unsure
 Somewhat not useful
 Not very useful

B) Please describe what types of support are most useful when a child is first placed?

7. A) Do you feel that ongoing training for all foster parents (not including initial training) is a helpful support to foster parents?

Yes, definitely
 Yes, generally
 Unsure
 No, not really
 No, definitely not

B) How many training sessions do you feel foster parents should be offered each year?

None
 One
 Two
 Three
 Four
 More than four per year

C) Please identify the type of training sessions you would find helpful and supportive if offered by the agency. Check as many as apply and please list other types of training you would find helpful. In addition, please select the three most important topics and

rank order them by writing the corresponding number beside the chosen topic (ie. 1, 2, 3 with 1 being most important and 3 being third most important).

- Behaviour management
- Fetal alcohol syndrome/ Fetal alcohol effect
- Sexual abuse
- Physical abuse
- Emotional abuse
- Dealing with disclosures
- Dealing with natural family involvement
- Separation and loss
- Teaching healthy sexuality
- Non crisis intervention
- Dealing with breakdown and its impact on the family and child
- Other _____

8. A) Who do you feel can provide you with the most useful support to your foster family as a whole? Please select one only.

- Child's social worker
- Resource support worker (foster family worker)
- Other (please specify) _____

B) Why?

9. A) Please identify the types of support you would like to receive from the **foster care support worker**? Please check as many as apply and add any that are not included in the list. In addition, please select the five most important supports and rank order them by writing the corresponding number beside the chosen support (ie. 1, 2, 3, 4, 5 with 1 being most important and 5 being fifth important).

- Pre-placement meeting with the social worker and child
- 7 day visit following the child's placement in your home
- 30 day visit following the child's placement in your home
- Regular visits throughout the child's placement in your home
- In-home support during crisis situations
- Immediate phone support during crisis situations
- Someone to talk to about the daily stresses of fostering
- Someone to talk to specifically about the child's behaviour
- Someone to talk to following a child's planned or unplanned removal from your home
- Other _____

- B) When is it helpful to have phone contact with the **foster care support worker**? Please check as many as apply.

- During initial stages of a child's placement in your home
- On a regular basis to check on the placement

- During crisis situations
 Only when you initiate contact
 Other (please identify) _____

- C) If you checked *regular visits* as a support you would like to receive from the foster care support worker, please describe what is most helpful and supportive during those home visits. More specifically, what is it you want the social worker to be doing for you or with you:
-
-
-

10. A) Please identify the types of support you would like to receive from the child's CAS social worker? Please check as many as apply and add any that are not included in the list. In addition, please select the three most important supports and rank order them by writing the corresponding number beside the chosen support (ie. 1, 2, 3, with 1 being most important and 3 being third important). Topics continue on next page.

- Pre-placement meeting with the social worker and child
 7 day visit following the child's placement in your home
 30 day visit following the child's placement in your home
 Regular visits throughout the child's placement in your home
 In-home support during crisis situations
 Immediate phone support during crisis situations
 Someone to talk to about the daily stresses of fostering
 Someone to talk to specifically about the child's behaviour
 Someone to talk to following a child's planned or unplanned removal from your home
 Other _____

- B) When is it helpful to have phone contact with the child's social worker? Please check as many as apply.

- During initial stages of a child's placement in your home
 On a regular basis to check on the placement
 During crisis situations
 Only when you initiate contact
 Other (please identify) _____

- C) If you checked *regular visits* as a support you would like to receive from the child's social worker, please describe what is most helpful and supportive during those home visits. More specifically, what is it you want the social worker to be doing for you or with you:
-
-
-

11. A) In times of crisis, what do you need from CAS workers? Please check all categories which apply and add any other which are not included in the list. In addition, please select the three most important supports and rank order them by writing the corresponding number beside the chosen support (ie. 1, 2, 3 with 1 being most important and 3 being third important).

- Someone to talk to over the phone
- Someone to talk to in-person
- In-home back-up support
- Direction on how to handle the situation
- Someone to come in-home and handle the crisis
- Someone to talk to after the crisis
- Relief following the crisis
- Other _____

B) What type of supports are **most** important during crisis situations? You may select from the list above if you wish.

C) What type of supports are **most** important immediately following a crisis situation? You may select from the list above if you wish.

12. A) Would you find foster parent support group meetings for foster parents helpful?

Yes Unsure No

B) If yes, why do you think they would be helpful?

13. A) How important do you feel the Foster Parent Association is in terms of support to your family?

- Very important
- Somewhat important
- Unsure
- Somewhat not important
- Not important at all

B) Please identify the types of support which would be useful to receive from the Foster Parent Association. Check all applicable boxes and please include any other supports which are not listed. In addition, please select the five most important supports and rank order them by writing the corresponding number beside the chosen support (ie. 1, 2, 3, 4, 5 with 1 being most important and 5 being fifth important).

- Assistance in crisis situations
- Regular phone contact initiated by either side
- Family counseling
- Foster parent support group meetings

- _____ Referrals to outside support
- _____ Someone to talk to about daily/general fostering stresses
- _____ Someone to talk to about child's behaviour
- _____ Foster parent training
- _____ Employee assistance program (Cornwall only)
- _____ Communicator's group (Cornwall only)
- _____ Other _____

14. A) Generally, who is most helpful to you in raising your foster children, besides your spouse? Please rank order by placing a number one through six (seven if you have included other) beside each answer. One is most helpful; six is least helpful.

- _____ Child's social worker
- _____ Foster care support worker
- _____ Foster parent association
- _____ A relative
- _____ Another foster parent
- _____ A friend who is not a foster parent
- _____ Other _____

- B) Who would you usually contact if you needed help with one of the following fostering situations, besides your spouse. Please rank order by placing a number one through six (seven if you have included other) beside each answer. One is person you would call first, while six is the last person you would call.

Help during a major crisis (CAS serious occurrence)

- _____ Child's social worker
- _____ Foster care support worker
- _____ Foster parent association
- _____ A relative
- _____ Another foster parent
- _____ A friend who is not a foster parent
- _____ Other _____

Someone to talk to about daily fostering stresses

- _____ Child's social worker
- _____ Foster care support worker
- _____ Foster parent association
- _____ A relative
- _____ Another foster parent
- _____ A friend who is not a foster parent
- _____ Other _____

Advice on how to solve a behavioural problem with one of your foster children

- _____ Child's social worker
- _____ Foster care support worker
- _____ Foster parent association
- _____ A relative

- Another foster parent
- A friend who is not a foster parent
- Other _____

Additional financial assistance with foster children essentials

- Child's social worker
- Foster care support worker
- Foster parent association
- A relative
- Another foster parent
- A friend who is not a foster parent
- Other _____

15. A) In general, which type of support is most important to the maintenance of your foster home?

- Emotional support (ex: someone to talk to about fostering stresses)
- Concrete support (ex: money, respite/relief)
- Emotional and concrete support are equeally important

B) Please explain why you chose the reponse you did in a) above:

16. A) Do you feel that relief is a type of support to you and your foster family?

- Yes, definitely
- Yes, generally
- Unsure
- No, not really
- No, definitely not

B) Please describe how relief is helpful?

C) Please describe how relief is not helpful?

D) How often do you feel you need relief?

-
-
17. A) Do you feel that support following a child's removal from your home (unplanned or planned) is necessary?

Yes, definitely
 Yes, generally
 Unsure
 No, not really
 No, definitely not

- B) If you checked yes, please describe what type of support you would find most helpful following a child's removal from your home?
-
-

18. A) Please estimate the amount of money you feel you would need per pay cheque from CAS, in addition to the amount you normally receive, to successfully maintain your foster home? Please estimate on average for one child.

None
 Up to \$20
 \$20 to \$40
 \$40 to \$60
 \$60 to \$80
 Over \$80

PART III: GENERAL FOSTERING QUESTIONS

1. In your fostering experience please identify the difficult behaviours or situations which would benefit from CAS support. Please check as many as apply and identify all other behaviours and/or situations which you feel would benefit from regular CAS support.

Disruptive behaviour by foster child
 Foster child is aggressive or violent towards other children
 Foster child does not follow the rules of the home
 Foster child exhibits depressive behaviour
 Other children exhibit jealousy of foster children
 Foster child runs away
 Other _____

2. Breakdown refers to an unplanned situation where the child and family can no longer live together for a variety of reasons, therefore the child is either removed or runs away, and not returned to the foster family. Based on this definition please answer the following questions:

- A) Over the past two years have you had any fostering situations end in breakdown?

Yes No

B) If yes, how many fostering situations have ended in breakdown?

C) For the last two breakdown situations please briefly describe the situation, and identify what you felt led to the breakdown. Please also identify the gender of the child and his or her age. Following this please check which support services you feel would have helped to save the fostering situation, and keep the child in your home (from your perspective). You may select as many boxes as apply.

Breakdown # 1:

Support Services which would have helped alleviate the breakdown

- ___ More information on the child upon his/her entering your family
- ___ Better support by CAS during crisis situations
- ___ More contact with the foster care support worker on a regular basis
- ___ More contact with the child's social worker on a regular basis
- ___ Better teaching of and assistance with behavioural management techniques
- ___ More frequent training sessions
- ___ Different types of and more relevant training sessions
- ___ Increase in per diem to foster parents
- ___ Other _____

Breakdown # 2:

Support Services which would have helped alleviate the breakdown

- ___ More information on the child upon his/her entering your family
- ___ Better support by CAS during crisis situations
- ___ More contact with the foster care support worker on a regular basis
- ___ More contact with the child's social worker on a regular basis
- ___ Better teaching of and assistance with behavioural management techniques
- ___ More frequent training sessions
- ___ Different types of and more relevant training sessions
- ___ Increase in per diem to foster parents
- ___ Other _____

PART IV: PROGRAM SPECIFIC QUESTIONS

1. Over the past two years, how would you rate the support services offered to you by CAS, in general? Please rate on a scale from 1 to 5, with 1 being **not at all helpful**, and 5 being **very helpful**.

1 2 3 4 5

2. In general, how would you rate the support services offered to you by the foster care worker at CAS? Please rate on a scale from 1 to 5, with 1 being **not at all helpful**, and 5 being **very helpful**.

1 2 3 4 5

3. In general, how would you rate the support services offered to you by the child's social worker? Please rate on a scale from 1 to 5, with 1 being **not at all helpful**, and 5 being **very helpful**

1 2 3 4 5

4. How would you rate the support services offered to you by the Foster Parent Association? Please rate on a scale from 1 to 5, with 1 being **not at all helpful**, and 5 being **very helpful**

1 2 3 4 5

5. If you have ever used the employee assistance program please rate the services you received. Please rate on a scale from 1 to 5, with 1 being **not at all helpful**, and 5 being **very helpful** (Cornwall only)

1 2 3 4 5

____ Not applicable; we have never used this service

6. If you have ever used the support services of a communicator, in what capacity did the communicator assist you? Please check as many as apply. (Cornwall only)

____ Support during a crisis situation

____ Support during a dispute with the agency or with agency staff

____ Support during an allegation

____ In-home support regarding child's behaviour

____ Phone support regarding child's behaviour

____ Other _____

____ Not applicable; we have never used the services of a communicator

7. If you have ever used the services of a communicator please rate the services you received. Please rate on a scale from 1 to 5, with 1 being **not at all helpful**, and 5 being **very helpful** (Cornwall only)

1 2 3 4 5

____ Not applicable; we have never used this service

PART V: FINAL QUESTIONS

1. Please list the types of support services you would like to receive, but are not currently receiving from CAS.

2. Please list the helpful types of support services you are currently receiving from CAS.

3. Do you have any other suggestions about how support services could be improved by CAS in your region?

4. Do you have any other comments about support services or this study?

Thank you for taking time to complete this questionnaire. Please return only the questionnaire pages in the addressed stamped envelope. **REMEMBER: Do not include your name and address anywhere on the questionnaire or envelope.** This will ensure that CAS, the FPA and the researcher will not know who you are. A copy of the results of this study will be made available to you through the foster parent association upon the completion of the research.

Appendix C

QUANTITATIVE CODING SHEETS

FOSTER CARE SUPPORT STUDY (Kingston Region)

Please answer each question by placing an **X** in the appropriate box or by writing your answer in the space provided. Do not indicate your name or the names of foster children on these pages. This will help to ensure confidentiality and anonymity. If possible please have the main caregiver of the foster children fill out this questionnaire.

Note: questions that are not answered are assigned: n/a, which is different than answers that have a not applicable choice - these are assigned a numeric value.

Note: questions where there is a choice for "other", the assigned numeric value will be entered into the database, but the actual response will be found listed with the qualitative data during the processing phase.

PART I: BACKGROUND INFORMATION

1. Are you the mother or father in this foster home?

1.1.1 1 Mother 2 Father

2. Who is the main caregiver of the foster children in your home?

1.2.1 1 Mother 2 Father 3 Both

3. Are there two parents in you home on a regular basis?

1.3.1 1 Yes 2 No

4. How many years have you been a foster parent for the Children's Aid Society of the City of Kingston?

1.4.1 1 Less than 3 years 2 3 to 6 years 3 7 to 10 years
 4 More than 10 years

5. How many children are you currently fostering?

1.5.1 1 None 2 1 3 2 4 3 5 4 or more

6. Please identify your current foster children by gender, age, and how long they have resided with you (ex; Boy - 10 years old - 1 year)

1.6.1.1 **Boy - 1 Girl - 2**
1.6.1.2 **Age in years to nearest year**
1.6.1.3 **Years to nearest year**

7. How many different children have you fostered for this agency?

1.7.1

1__Less than 3 2__3 to 6 3__7 to 10 4__More than 10

8. Besides the foster children, are there any other children residing in your home?

1.8.1

1__Yes 2__No

If yes, please identify them by gender and age.

1.8.2.1 **Boy - 1 Girl - 2**

1.8.2.2 **Age in years to nearest year**

PART II: FOSTER CARE SUPPORT SERVICES

This research study is interested in what support means to you as a foster parent, and what supports you need to successfully maintain your foster home and foster children. Please think back over your years of fostering, and answer the following questions as completely as possible. Thank you.

1. In your own words please describe what foster family support means to you and your family? This may include support from the agency and external to the agency.

2.1.1

2. In previous foster care studies foster parents and social service staff have identified the following supports as necessary to successfully maintain foster families. Please check the types of *support* you feel are important in you foster home. You may check as many as apply. In addition, please select the five most important supports and rank order them by writing the corresponding number beside the chosen support (ie. 1, 2,3,4,5 with 1 being most important and 5 being fifth important).

2.2.1

Rank is eliminated from this question because a large percentage of respondents either did not understand the instructions or simply failed to do the rank ordering. Therefore, if the question was completed as per the first part of the instructions, each choice will be assigned either a 1 or 2 value. If the the choice was checked or ranked it is assigned a 1 indicating that the choice is important. If the choice has no marking it is assigned a 2 indicating that it is not important. Where the question is not answered, each choice is assigned an n/a to indicate no answer.

- New foster parent orientation & training
- Pre-placement visit and meeting with child and social worker
- A 7 day visit by the social worker
- A Plan-of-Care meeting at 30 days
- Plan-of-Care meetings every 90 days
- Support when a foster child is initially placed in the home
- Ongoing training

- Regular visits from the resource support worker (foster family worker)
- Regular phone calls from the resource support worker (foster family worker)
- Regular visits from the child's social worker
- Regular phone calls from the child's social worker
- Foster parent support group meetings
- Foster parent association
- Assistance in crisis situations
- Relief
- Support when a foster child leaves the home
- Other _____

3. A) Do you feel that information nights and initial preservice/core-training for new foster parents is a helpful support?

2.3.1

- 1 Yes, definitely
- 2 Yes, generally
- 3 Unsure
- 4 No, not really
- 5 No, definitely not

- B) What topics do you feel should be included in the information nights and initial preservice/core-training for new foster parents? Please check as many as apply. In addition, please select the three most important topics and rank order them by writing the corresponding number beside the chosen topic (ie. 1, 2,3 with 1 being most important and 3 being third most important). Topics continue on following page.

2.3.2

Rank is eliminated from this question because a large percentage of respondents either did not understand the instructions or simply failed to do the rank ordering. Therefore, if the question was completed as per the first part of the instructions, each choice will be assigned either a 1 or 2 value. If the the choice was checked or ranked it is assigned a 1 indicating that the choice is important. If the choice has no marking it is assigned a 2 indicating that it is not important. Where the question is not answered, each choice is assigned an n/a to indicate no answer.

- Overview of the Children's Aid Society
- Discussion about working with the child's family
- The foster child, including stages of separation
- Child management , including constructive discipline
- The fostering experience in general
- CAS policies and procedures
- Other _____

4. A) Prior to a foster child entering your home, how useful are pre-placement visits by the social worker and child?

2.4.1

- 1 Very useful
- 2 Somewhat useful
- 3 Unsure
- 4 Somewhat not useful

5 Not very useful

B) Please describe how pre-placement visits by the social worker and child would be helpful?

2.4.2

C) Please describe how pre-placement visits by the social worker and child would not be helpful?

2.4.3

5. A) How useful are Plan-of-Care meetings in terms of support to the foster family?

2.5.1

1 Very useful

2 Somewhat useful

3 Unsure

4 Somewhat not useful

5 Not very useful

B) Please describe how Plan-of-Care meetings would be helpful?

2.5.2

C) Please describe how Plan-of-Care meetings would not be helpful?

2.5.3

D) Do feel that it is important for you to have input at the regular plan-of-care meetings?

2.5.4.1

1 Yes 2 No

Why or why not?

2.5.4.2

6. A) How useful is initial support when a child is first placed in your home?

2.6.1

1 Very useful

2 Somewhat useful

3 Unsure

4 Somewhat not useful

5 Not very useful

B) Please describe what types of support are most useful when a child is first placed?

2.6.2

7. A) Do you feel that ongoing training for all foster parents (not including initial training) is a helpful support to foster parents?

2.7.1

1 Yes, definitely

2 Yes, generally

3 Unsure

- 4 No, not really
 5 No, definitely not

B) How many training sessions do you feel foster parents should be offered each year?

2.7.2

- 1 None
 2 One
 3 Two
 4 Three
 5 Four
 6 More than four per year

C) Please identify the type of training sessions you would find helpful and supportive if offered by the agency. Check as many as apply and please list other types of training you would find helpful. In addition, please select the three most important topics and rank order them by writing the corresponding number beside the chosen topic (ie. 1, 2,3 with 1 being most important and 3 being third most important).

2.7.3

Rank is eliminated from this question because a large percentage of respondents either did not understand the instructions or simply failed to do the rank ordering. Therefore, if the question was completed as per the first part of the instructions, each choice will be assigned either a 1 or 2 value. If the the choice was checked or ranked it is assigned a 1 indicating that the choice is important. If the choice has no marking it is assigned a 2 indicating that it is not important. Where the question is not answered, each choice is assigned an n/a to indicate no answer.

- Behaviour management
 Fetal alcohol syndrome/ Fetal alcohol effect
 Sexual abuse
 Physical abuse
 Emotional abuse
 Dealing with disclosures
 Dealing with natural family involvement
 Separation and loss
 Teaching healthy sexuality
 Non crisis intervention
 Dealing with breakdown and its impact on the family and child
 Other _____

8. A) Who do you feel can provide you with the most useful support to your foster family as a whole? Please select one only.

2.8.1

- 1 Child's social worker
 2 Resource support worker (foster family worker)
 3 Other (please specify) _____

B) Why?

2.8.2

9. A) Please identify the types of support you would like to receive from the **foster care support worker**? Please check as many as apply and add any that are not included in the list. In addition, please select the five most important supports and rank order them by writing the corresponding number beside the chosen support (ie. 1, 2,3,4,5 with 1 being most important and 5 being fifth important).

2.9.1

Rank is eliminated from this question because a large percentage of respondents either did not understand the instructions or simply failed to do the rank ordering. Therefore, if the question was completed as per the first part of the instructions, each choice will be assigned either a 1 or 2 value. If the the choice was checked or ranked it is assigned a 1 indicating that the choice is important. If the choice has no marking it is assigned a 2 indicating that it is not important. Where the question is not answered, each choice is assigned an n/a to indicate no answer.

- Pre-placement meeting with the social worker and child
- 7 day visit following the child's placement in your home
- 30 day visit following the child's placement in your home
- Regular visits throughout the child's placement in your home
- In-home support during crisis situations
- Immediate phone support during crisis situations
- Someone to talk to about the daily stresses of fostering
- Someone to talk to specifically about the child's behaviour
- Someone to talk to following a child's planned or unplanned removal from your home
- Other _____

- B) When is it helpful to have phone contact with the **foster care support worker**? Please check as many as apply.

2.9.2

Each choice will be assigned either a 1 or 2 value. If the the choice was checked it is assigned a 1 indicating that the choice is important. If the choice has no marking it is assigned a 2 indicating that it is not important. Where the question is not answered, each choice is assigned an n/a to indicate no answer.

- During initial stages of a child's placement in your home
- On a regular basis to check on the placement
- During crisis situations
- Only when you initiate contact
- Other (please identify) _____

- C) If you checked *regular visits* as a support you would like to receive from the **foster care support worker**, please describe what is most helpful and supportive during those home visits. More specifically, what is it you want the social worker to be doing for you or with you:

2.9.3

10. A) Please identify the types of support you would like to receive from the **child's CAS social worker**? Please check as many as apply and add any that are not included in the list. In addition, please select the three most important supports and rank order them by writing the corresponding number beside the chosen support (ie. 1, 2,3. with 1 being most important and 3 being third important). Topics continue on next page.

2.10.1

Rank is eliminated from this question because a large percentage of respondents either did not understand the instructions or simply failed to do the rank ordering. Therefore, if the question was completed as per the first part of the instructions, each choice will be assigned either a 1 or 2 value. If the the choice was checked or ranked it is assigned a 1 indicating that the choice is important. If the choice has no marking it is assigned a 2 indicating that it is not important. Where the question is not answered, each choice is assigned an n/a to indicate no answer.

- Pre-placement meeting with the social worker and child
- 7 day visit following the child's placement in your home
- 30 day visit following the child's placement in your home
- Regular visits throughout the child's placement in your home
- In-home support during crisis situations
- Immediate phone support during crisis situations
- Someone to talk to about the daily stresses of fostering
- Someone to talk to specifically about the child's behaviour
- Someone to talk to following a child's planned or unplanned removal from your home
- Other _____

- B) When is it helpful to have phone contact with the child's social worker?
Please check as many as apply.

2.10.2

Each choice will be assigned either a 1 or 2 value. If the the choice was checked it is assigned a 1 indicating that the choice is important. If the choice has no marking it is assigned a 2 indicating that it is not important. Where the question is not answered, each choice is assigned an n/a to indicate no answer.

- During initial stages of a child's placement in your home
- On a regular basis to check on the placement
- During crisis situations
- Only when you initiate contact
- Other _____

- C) If you checked *regular visits* as a support you would like to receive from the child's social worker, please describe what is most helpful and supportive during those home visits. More specifically, what is it you want the social worker to be doing for you or with you:

2.10.3

11. A) In times of crisis, what do you need from CAS workers? Please check all categories which apply and add any other which are not included in the list. In addition, please select the three most important supports and rank order them by writing the corresponding number beside the chosen support (ie. 1, 2,3 with 1 being most important and 3 being third important).

2.11.1

Rank is eliminated from this question because a large percentage of respondents either did not understand the instructions or simply failed to do the rank ordering. Therefore, if the question was completed as per the first part of the instructions, each choice will be assigned either a 1 or 2 value. If the the choice was checked or ranked it is assigned a 1 indicating that the choice is important. If the choice has no marking it is assigned a 2 indicating that it is not important. Where the question is not answered, each choice is assigned an n/a to indicate no answer.

- Someone to talk to over the phone
- Someone to talk to in-person
- In-home back-up support
- Direction on how to handle the situation
- Someone to come in-home and handle the crisis
- Someone to talk to after the crisis
- Relief following the crisis
- Other _____

- B) What type of supports are **most** important during crisis situations? You may select from the list above if you wish.

2.11.2

- C) What type of supports are **most** important immediately following a crisis situation? You may select from the list above if you wish.

2.11.3

12. A) Would you find foster parent support group meetings for foster parents helpful?

2.12.1

1 Yes 2 Unsure 3 No

- B) If yes, why do you think they would be helpful?

2.12.2

13. A) How important do you feel the Foster Parent Association is in terms of support to your family?

2.13.1

- 1 Very important
- 2 Somewhat important
- 3 Unsure
- 4 Somewhat not important
- 5 Not important at all

- B) Please identify the types of support which would be useful to receive from the Foster Parent Association. Check all applicable boxes and please include any other supports which are not listed. In addition, please select the five most important supports and rank order them by writing the corresponding number beside the chosen support (ie. 1, 2,3,4,5 with 1 being most important and 5 being fifth important).

2.13.2

Rank is eliminated from this question because a large percentage of respondents either did not understand the instructions or simply failed to do the rank ordering. Therefore, if the question was completed as per the first part of the instructions, each choice will be assigned either a 1 or 2 value. If the the choice was checked or ranked it is assigned a 1 indicating that the choice is important. If the choice has no marking it is assigned a 2 indicating that it is not important. Where the question is not answered, each choice is assigned an n/a to indicate no answer.

- Assistance in crisis situations
- Regular phone contact initiated by either side
- Family counseling
- Foster parent support group meetings
- Referrals to outside support
- Someone to talk to about daily/general fostering stresses
- Someone to talk to about child's behaviour
- Foster parent training
- Other _____

14. A) Generally, who is most helpful to you in raising your foster children, besides your spouse? Please rank order by placing a number one through six (seven if you have included other) beside each answer. One is most helpful; six is least helpful.

2.14.1

A large percentage of the respondents did not rank up to six, however, most did rank up to a least three. Therefore, the analysis will only focus on the first three rankings.

- 1 Child's social worker
- 2 Foster care support worker
- 3 Foster parent association
- 4 A relative
- 5 Another foster parent
- 6 A friend who is not a foster parent
- 7 Other _____

- B) Who would you usually contact if you needed help with one of the following fostering situations, besides your spouse. Please rank order by placing a number one through six (seven if you have included other) beside each answer. One is person you would call first, while six is the last person you would call.

A large percentage of the respondents did not rank up to six, however, most did rank up to a least three. Therefore, the analysis will only focus on the first three rankings.

Help during a major crisis (CAS serious occurrence)

2.14.2.1

- 1 Child's social worker
- 2 Foster care support worker
- 3 Foster parent association
- 4 A relative
- 5 Another foster parent
- 6 A friend who is not a foster parent
- 7 Other _____

Someone to talk to about daily fostering stresses

2.14.2.2

- 1 Child's social worker
- 2 Foster care support worker
- 3 Foster parent association
- 4 A relative
- 5 Another foster parent
- 6 A friend who is not a foster parent
- 7 Other _____

Advice on how to solve a behavioural problem with one of your foster children

2.14.2.3

- 1 Child's social worker
- 2 Foster care support worker
- 3 Foster parent association
- 4 A relative
- 5 Another foster parent
- 6 A friend who is not a foster parent
- 7 Other _____

Additional financial assistance with foster children essentials

2.14.2.4

- 1 Child's social worker
- 2 Foster care support worker
- 3 Foster parent association
- 4 A relative
- 5 Another foster parent
- 6 A friend who is not a foster parent
- 7 Other _____

15. A) In general, which type of support is most important to the maintenance of your foster home?

2.15.1

- 1 Emotional support (ex: someone to talk to about fostering stresses)
- 2 Concrete support (ex: money, respite/relief)
- 3 Emotional and concrete support are equally important

B) Please explain why you chose the response you did in a) above:
2.15.2

16. A) Do you feel that relief is a type of support to you and your foster family?
2.16.1

- 1 Yes, definitely
- 2 Yes, generally
- 3 Unsure
- 4 No, not really
- 5 No, definitely not

B) Please describe how relief is helpful?
2.16.2

C) Please describe how relief is not helpful?
2.16.3

D) How often do you feel you need relief?
2.16.4

17. A) Do you feel that support following a child's removal from your home (unplanned or planned) is necessary?

- 2.17.1
- 1 Yes, definitely
 - 2 Yes, generally
 - 3 Unsure
 - 4 No, not really
 - 5 No, definitely not

B) If you checked yes, please describe what type of support you would find most helpful following a child's removal from your home?
2.17.2

18. A) Please estimate the amount of money you feel you would need per pay cheque from CAS, in addition to the amount you normally receive, to successfully maintain your foster home? Please estimate on average for one child.

- 2.18.1
- 1 None
 - 2 Up to \$20
 - 3 \$20 to \$40
 - 4 \$40 to \$60
 - 5 \$60 to \$80
 - 6 Over \$80

PART III: GENERAL FOSTERING QUESTIONS

1. In your fostering experience please identify the difficult behaviours or situations which would benefit from CAS support. Please check as many as apply and identify all other behaviours and/or situations which you feel would benefit from regular CAS support.

3.1.1

Each choice will be assigned either a 1 or 2 value. If the the choice was checked it is assigned a 1 indicating that the choice is important. If the choice has no marking it is assigned a 2 indicating that it is not important. Where the question is not answered, each choice is assigned an n/a to indicate no answer.

- Disruptive behaviour by foster child
 Foster child is aggressive or violent towards other children
 Foster child does not follow the rules of the home
 Foster child exhibits depressive behaviour
 Other children exhibit jealousy of foster children
 Foster child runs away
 Other _____

2. Breakdown refers to an unplanned situation where the child and family can no longer live together for a variety of reasons, therefore the child is either removed or runs away, and not returned to the foster family. Based on this definition please answer the following questions:

- A) Over the past two years have you had any fostering situations end in breakdown?

3.2.1

1 Yes 2 No

- B) If yes, how many fostering situations have ended in breakdown?

3.2.2

the actual numeric value is entered _____

- C) For the last two breakdown situations please briefly describe the situation, and identify what you felt led to the breakdown. Please also identify the gender of the child and his or her age. Following this please check which support services you feel would have helped to save the fostering situation, and keep the child in your home (from your perspective). You may select as many boxes as apply.

Breakdown # 1:

- 3.2.3.1** Boy - 1 Age in years to nearest year
 Girl - 2 Age in years to nearest year

3.2.3.2 Support Services which would have helped alleviate the breakdown

Each choice will be assigned either a 1 or 2 value. If the the choice was checked it is assigned a 1 indicating that the choice is important. If the

choice has no marking it is assigned a 2 indicating that it is not important. Where the question is not answered either because there is no corresponding breakdown or there was a breakdown but the question is still not answered, each choice is assigned an n/a to indicate no answer.

- More information on the child upon his/her entering your family
- Better support by CAS during crisis situations
- More contact with the foster care support worker on a regular basis
- More contact with the child's social worker on a regular basis
- Better teaching of and assistance with behavioural management techniques
- More frequent training sessions
- Different types of and more relevant training sessions
- Increase in per diem to foster parents
- Other _____

Breakdown # 2:

- 3.2.3.3 Boy -1 Age in years to nearest year
 Girl - 2 Age in years to nearest year

Support Services which would have helped alleviate the breakdown

3.2.3.4

Each choice will be assigned either a 1 or 2 value. If the the choice was checked it is assigned a 1 indicating that the choice is important. If the choice has no marking it is assigned a 2 indicating that it is not important. Where the question is not answered either because there is no corresponding breakdown or there was a breakdown but the question is still not answered, each choice is assigned an n/a to indicate no answer.

- More information on the child upon his/her entering your family
- Better support by CAS during crisis situations
- More contact with the foster care support worker on a regular basis
- More contact with the child's social worker on a regular basis
- Better teaching of and assistance with behavioural management techniques
- More frequent training sessions
- Different types of and more relevant training sessions
- Increase in per diem to foster parents
- Other _____

PART IV: PROGRAM SPECIFIC QUESTIONS

1. Over the past two years, how would you rate the support services offered to you by CAS, in general? Please rate on a scale from 1 to 5, with 1 being **not at all helpful**, and 5 being **very helpful**.

4.1.1

Actual corresponding numeric values will be entered.

1 2 3 4 5

2. In general, how would you rate the support services offered to you by the foster care worker at CAS? Please rate on a scale from 1 to 5, with 1 being **not at all helpful**, and 5 being **very helpful**.

4.2.1

Actual corresponding numeric values will be entered.

1 2 3 4 5

3. In general, how would you rate the support services offered to you by the child's social worker? Please rate on a scale from 1 to 5, with 1 being **not at all helpful**, and 5 being **very helpful**

4.3.1

Actual corresponding numeric values will be entered.

1 2 3 4 5

4. How would you rate the support services offered to you by the Foster Parent Association? Please rate on a scale from 1 to 5, with 1 being **not at all helpful**, and 5 being **very helpful**

4.4.1

Actual corresponding numeric values will be entered.

1 2 3 4 5

PART V: FINAL QUESTIONS

1. Please list the types of support services you would like to receive, but are **not** currently receiving from CAS.

5.1.1

2. Please list the helpful types of support services you are currently receiving from CAS.

5.2.1

3. Do you have any other suggestions about how support services could be improved by CAS in your region?

5.3.1

4. Do you have any other comments about support services or this study?

5.4.1

Appendix D

Qualitative categorizing & rules

Part II: question 1(a) "What is support?"

1. Concrete support
financial, payment, relief, physical help, obtaining information
2. Emotional support
recognition, caring, celebrating, talking, sharing concerns, emotional help, respect
3. Nonspecific contact
visits, contact - content of contact or by whom may not be specifically identified or qualified
4. Crisis contact
crises, urgency indicated
5. Overall and general support
broad definition encompassing "everything"
6. Miscellaneous answers
spiritual & intellectual help

Part II: question 4(b) "How are pre-placement visits helpful?"

1. General - opportunity for foster family to meet/assess child
talk to/meet child, hands on feeling, familiarize
2. General - opportunity for child to meet/assess foster family
child talk to/meet family, familiarize
3. Specific purpose and outcome of visit to benefit the family
narrow purpose, set rules, getting specific information (possibly on routines, needs)
4. Specific purpose and outcome of visit to benefit the child
narrow purpose, request certain needs be met
5. Miscellaneous reasons
all other (list), with teens, not with younger children

Part II: question 4(c) "How are pre-placement visits not helpful?"

1. Behaviour at these visits are not typical of daily behaviour
child does not act like themselves
2. Visits that are too short
3. Visits with young children
4. Social worker negativity / lack of support
5. Miscellaneous
time consumption, creating apprehension

Part II: question 5 (b) "How are plan-of-care meetings helpful?"

Answered two ways:

A) What positive outcome is there from POC's

1. Direction given to foster parents and others involved
direction, keeping parents on right track
2. Child's needs & routine are identified and outlined
long term plans
3. Expectations & responsibilities are discussed & outlined
goals
4. Evaluation of placement
going over past months
5. Miscellaneous
all other
6. Discussion
opportunity for open discussion, express feelings

B) What has to happen to make POC's positive

1. Foster parents have input / are listened to
2. POC needs to be followed / not filed away

Part II: question 5(c) "How are Plan-of Care's not helpful?"

Answered two ways:

A) An overall/ broad purpose or outcome of POC's

1. Crown ward/long-term situations
2. POC on paper doesn't equal reality
POC not realistic
3. When POC is not followed
4. Too frequently
When POC's occur too frequently
5. Miscellaneous

B) Specifically at the POC meeting

1. When there is no input from foster parents
2. Problems with social workers
3. Involvement of natural family
4. Responsibilities not clearly defined
5. Miscellaneous

Part II: question 5(d): "Yes, it is important to have input at the regular POC - why?"

1. F.P. has imp. information to offer - knows child and his/her needs best
2. F.P. has to augment POC, therefore should have input
deal with children on a daily basis, relates to carrying out POC successfully
3. General - it is F.P. right as a caregiver
respect foster family

4. Miscellaneous reasons
concern

Part II: question 6(b): "What types of support are most useful when a child is first placed?"

1. Information on the child
general information, background information, history
2. Basic needs organized: clothing, medical, dental & school
paperwork done
3. Information on behaviour problems & effective management techniques
4. Contact and visits by s.w. and f.c.w., including general concern & caring
phone calls
5. Miscellaneous reasons

Part II: question 8(b): "Who can provide you with the most useful support to your foster family as a whole?"

1. Child's social worker

1. S.W. has most information on the child
general information
2. S.W. knows the child best & has dealt most frequently with him/her
3. Miscellaneous reasons, including good support person
parent figure

2. Foster family worker

1. F.C.W. focus is the family as a whole, advocate for the family
focus on foster family or foster parent
2. F.C.W. is the most helpful in terms of problem solving and understanding the
children
3. Miscellaneous reasons

4. Comfort level with FCW

3. Foster parent association

1. They are removed from CAS/ not connected to CAS

2. They are foster parents

4. Other

Part II: question 9(c): "Regular visits from the FCW - what is most helpful & supportive during those visits?"

1. Listening and talking about child and placement

2. Problem solving assistance

3. Ensuring basic child needs are met

4. Nonspecific emotional support, including understanding and caring
not specifically talking or listening, reassurance, friend, concern, offering of help

5. Link to CAS and SW
information from CAS

6. Miscellaneous

Part II: question 10(c): "Regular visits from the SW - what is most helpful & supportive during those visits?"

1. Information on the child, natural family & court situation
POCupdates

2. Assistance with behaviour problems/situations - problem solving
discussion of child's needs, discipline

3. Spend time with the child
talking to child, focus on child

4. Nonspecific emotional support, including understanding and caring
affirmation, comfort

5. Ensuring basic child needs are met

Part I: question 11(b): "What types of supports are most important during crisis situations?"

1. In-home assistance/ direction visits
2. Phone assistance/ direction
3. Assistance/direction - not specific help, assistance, direction - doesn't specifically say phone or in-home
4. Nonspecific emotional support, including SW being a sounding board affirmation
5. Other forms of support, including legal and psychological & relief

Part II: question 11(c): "What types of supports are most important immediately following a crisis situation?"

1. Relief
2. Someone to talk to about child and situation - via phone
3. Someone to talk to in-person / follow-up visit
4. Someone to talk to - not specific not specifically phone or in-person
5. Miscellaneous
6. Someone to specifically work with the child

Part II: question 12(b): "How would foster parent support group meetings be helpful?"

1. Sharing experience & eliciting advice based on commonalities being with foster parents

2. Nonspecific emotional support, including understanding
3. Miscellaneous reasons, including upgrading knowledge

Part II: question 15(b): "Which type of support is most important to the maintenance of your foster home?"

A) Emotional support

1. Sharing & talking is most important
2. Miscellaneous reasons, including stress reliever

B) Concrete support

1. Parents reap benefits, including relaxation time
2. Children reap benefits with extra concrete support

C) Emotional & concrete support equally important

1. Both are essential for coping long-term
2. Financial stress leads to emotional stress/ breakdown

Part II: question 16 (b): "How is relief helpful?"

1. Gives FP's a break, rest, holiday
time away
2. FP's are able to refocus, re-group, re-build parental strength.
fresh start, new life, self-analysis, coping mechanism
3. Child gets a break from the foster family
4. A break during/after crisis situations - prevents breakdowns
5. Miscellaneous reasons

Part II: question 16(c): "How is relief not helpful?"

1. Negative effect on the child
outcome is negative on child
2. Relief homes are not competent
don't follow foster family rules, lack of training, lack of support to foster family
3. Poor coordination of relief causes problems
4. Child has bad feeling towards relief
resentment, scared
5. FP personal bad feeling towards relief

Part II: question 16(d): "How often do you feel you need relief?"

1. Once yearly
once yearly, 1 week per year, 10 days per year, 2 weeks per year, not often.
2. Once monthly
3. Once weekly
4. Twice monthly
5. Bi-monthly
6. Never

Part II: question 17(b): "What type of support is most helpful following a child's removal from the foster home?"

1. Information on how the child is doing
2. Someone to talk to and to listen
contact by CAS
3. Other emotional support, including reassurance
counseling for separation

4. Miscellaneous specific support
contact with child

Part III: question 2(c): "Breakdown 1 reasons"

1. Disruptive behaviour
aggression, violence, abuse
2. Depression
3. Generally a bad match from the beginning
4. Other

Part III: question 2(c): "Breakdown 2 reasons"

1. Disruptive behaviour
aggression, violence, abuse
2. Depression
3. Generally a bad match from the beginning

Part IV: question 1: "What types of support services you would like to receive but are NOT currently receiving?"

1. More contact with child's social worker
support from
2. Financial increase
money, payment increase
3. More relief
4. More visits and phone calls - not specifically from whom
5. Miscellaneous reasons - list

Part IV: question 2: "What are the helpful support services you ARE currently receiving from CAS?"

1. Positive assistance from FCW
2. Positive contact and assistance from SW
3. Relief
4. General support from CAS, including availability of workers & reassurance
5. Professional assistance
6. Miscellaneous

Part IV: question 3: "Any other suggestions about how support services could be improved by CAS in your region?"

List individually since there are relatively few responses to this question

Part IV: question 4: "Any other comments about support services of this study?"

List individually since there are relatively few responses to this question

Appendix E

March 23, 1998

Dear Foster Parents:

Several weeks ago you received a questionnaire regarding foster parent support in your region. Many of you have responded already, and I thank you sincerely for this. If you have returned the questionnaire you can disregard this letter.

If you have not had an opportunity yet to complete the questionnaire and return it, I would appreciate if you could as soon as possible. I would like my conclusions to be representative of all the foster parents in your area, so I encourage you to take the time and express your opinions on foster care support. However, please remember that this study is completely voluntary, so you may choose not to participate.

Thank you for your help. I look forward to hearing your responses and opinions.

Sincerely,

Karen M. LeVasseur

April 27, 1998

Dear Foster Parents:

This is a final letter of reminder to please return the recent questionnaire you received regarding foster family support . Many of you have returned it, and once again I thank you. If you have returned the questionnaire you can disregard this letter.

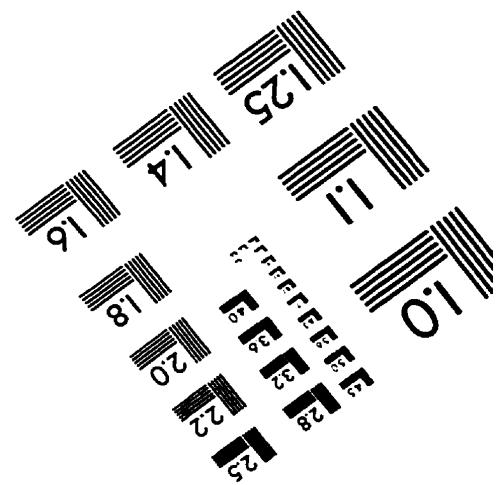
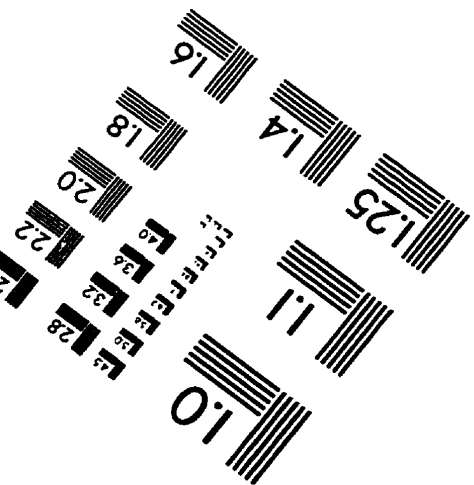
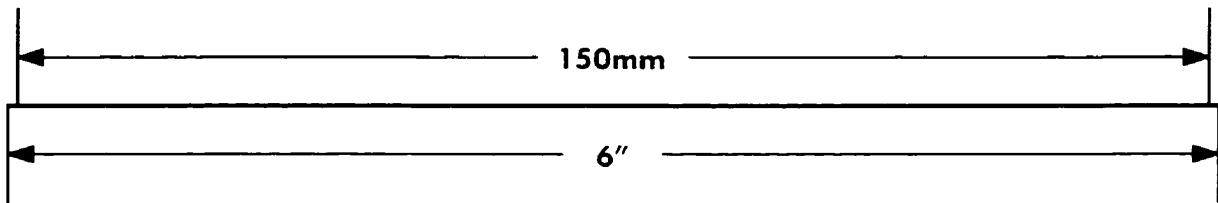
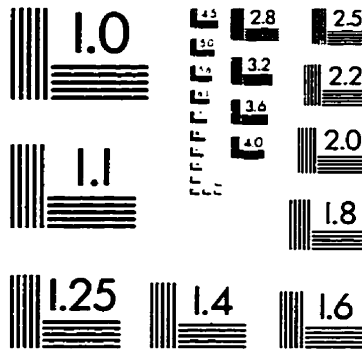
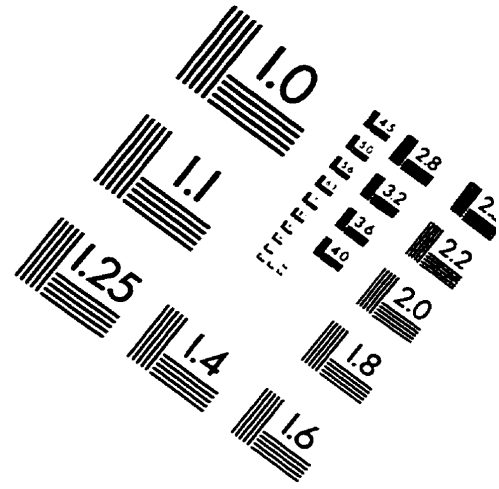
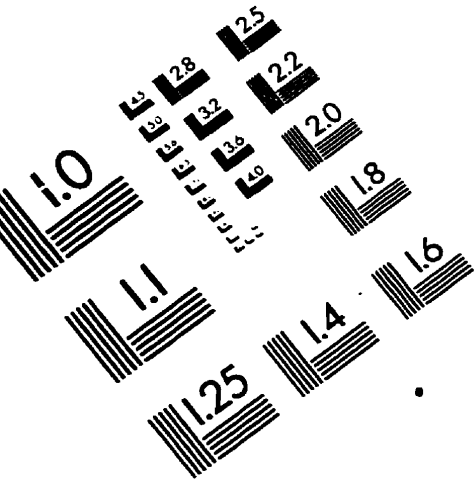
If you would like to return the questionnaire, but have misplaced it or the return envelope, both can be obtained at the Children's Aid Society front desk. Alternately, you can call me collect at XXX-XXX-XXXX and I would be happy to send you another questionnaire and return envelope.

Thank you for your help. I look forward to hearing your responses and opinions.

Sincerely,

Karen M. LeVasseur

IMAGE EVALUATION TEST TARGET (QA-3)



APPLIED IMAGE, Inc
1653 East Main Street
Rochester, NY 14609 USA
Phone: 716/482-0300
Fax: 716/288-5989

© 1993, Applied Image, Inc., All Rights Reserved