

Preventing Placement Breakdowns in Child Welfare  
with a Foster Parent Pre-Service Training Program

by

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### **Abstract**

This study explores the need for a pre-service training program for Manitoba's foster parents for the purposes of preparing and equipping foster parents with the skills necessary to respond to children with complex needs and to create stable placements for children in care. Current literature has found an increase in stable placements and fewer breakdowns when foster parents engage in a pre-service training program. Despite this, Manitoba is one of the only jurisdictions in the world that does not require such training. A total of 13 participants from three different groups (child welfare professionals, foster parents, and previous children in care) were interviewed using a semi-structured, one-on-one interview style. Both critical and standpoint theories were used as guiding theoretical frameworks and mainstream qualitative research design was used for data analysis. Significant findings include that all 13 participants supported a pre-service training program in Manitoba. Most foster parents in this study Manitoba felt unsupported and unprepared for their roles as caregivers to children with complex needs. This finding was corroborated by child welfare professionals, and from previous children in care. The participants provided training recommendations, including communication and documentation, a more comprehensive orientation, a systems training, and child-focused training.

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## **Dedication**

This thesis, and all my research before and after it is dedicated to all five of our children who have inspired me to make changes in child welfare. It is also dedicated to all Manitoba's children in care.

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## Preface

This thesis focuses on exploring the need for a pre-service training program for Manitoba's foster parents with the intention of (a) adequately preparing foster parents to provide quality care to the children they care for; and (b) creating stable placements for children in care, limiting the trauma that comes with temporary and multiple placements. To engage in this research, I believe it is important to first recognize my own social location and the impact it has on my research. Further, in social work as well as other areas of study, a fundamental step in research is to identify one's own social location. Social location is defined as, "the combination of factors including gender, race, social class, age, ability, religion, sexual orientation, and geographic location" (Brown et al., 2019, p. 14). I will start by stating that I have been a treatment foster parent in Manitoba for 10 years. I have had this privilege for several reasons: I am partnered, cisgender, and heterosexual. I am middle-class and both my partner and I have European descendants that are common in Manitoba (German, English, Ukrainian). In addition, my neurotypical brain development and able body allowed me to have this opportunity for research and higher learning.

Of the many children I have helped to raise, the majority are Indigenous. I fully understand that no amount of education or cultural engagement can replace Indigenous children living in their home communities, with their natural families. I refer to our children as *ours* because I acknowledge they will never be solely mine. They never belonged to me, but because I have a large responsibility for their development and healthy attachment, they must feel welcome and have a sense of belonging. The term *our* children refers to my partner and I raising them, but with full understanding and respect that they have natural parents, home communities, cultures, and traditions that we can never (and should never) replace.

Further, I understand that child welfare in Manitoba is in crisis because of the long-standing systemic racism that Indigenous populations have had to endure. I am aware of the complex challenges that make child welfare a complex problem and, therefore, acknowledge that a pre-service multi-session foster parent training program is not sufficient to solve the problems within child welfare in Manitoba. However, until these major changes can take place, this master's thesis research offers a practical proposal that may help prevent many children from unnecessary hurt. It is an opportunity for hope that the child welfare system needs in a dire way. With my education and experience, I do look forward to using my social location and privilege to continue being a fierce advocate for Indigenous communities (including our children) to make these necessary changes.

## **Chapter 1: Introduction**

Manitoba has one of the highest rates of children in care in the world (Brownell & das McMurtry, 2015). The overwhelming majority of the children in care are Indigenous and are often placed in non-Indigenous foster homes (Auditor General of Manitoba, 2019). In addition, many children in care have complex needs related to trauma, attachment, and academic concerns (Canadian Association of Social Workers, 2018). Despite this, many foster parents in Manitoba do not receive any training in preparation for providing exceptional care needed for foster children to thrive. My thesis research examined the need for a pre-service foster parent training program in Manitoba. To investigate the need for a pre-service training program, I utilized a qualitative generic methodological approach to undertaking one-on-one qualitative interviews. The participants involved in this study included previous children in care, foster parents, and child welfare professionals.

### **Statement of the Problem**

#### ***Manitoba's Child Welfare System***

In 2003, *The Child and Family Services Authorities Act* was rolled out, creating four separate child welfare authorities. Three of these authorities ensure that culturally appropriate services are provided to Indigenous children in care. These authorities include the First Nations Authority of Northern Manitoba, the First Nations Authority of Southern Manitoba, and the Métis Authority. The General Authority Child and Family Services Authority is the fourth authority and is not culturally specialized for Indigenous families.

Indeed, it has been well documented that Manitoba's child welfare system is in crisis. In Manitoba, there are nearly 10,000 children in care, which is not only the largest rate of children in care in the country, but also one of the largest rates in the world. First, according to the Centre

on Research on Children and Families (2018), Canada has a rate of 13.8 children in care per 1,000 children. Manitoba's rate is almost triple that, at 35.2 per 1,000 children. Furthermore, Manitoba's rate of children in care is 50 times higher than Germany, 20 times higher than Japan, 10 times higher than Australia, six times higher than England, five times higher than the United States, and three times higher than France (Brownell & das McMurtry, 2015; das McMurtry, 2018).

In addition, several scholars have pointed to systemic racism embedded in Manitoba's child welfare system (Blackstock, 2011; Choate et al., 2019; Hanna et al., 2017; Hart, 2009; Pon et al., 2011). In fact, of the 10,000 children in care, 90% of them are Indigenous (Manitoba Families, 2020). Further, despite a significant majority of Indigenous children in care, the majority of foster parents in Manitoba are non-Indigenous (Auditor General of Manitoba, 2019). This systemic issue is acknowledged and addressed in the Truth and Reconciliation Commission, including its Call to Action 4(iii), which states: "Establish, as an important priority, a requirement that placements of Aboriginal children into temporary and permanent care be culturally appropriate" (Truth and Reconciliation Commission of Canada Calls to Action, 2015, p. 1).

Along with these concerning numbers, Manitoba's child welfare system also struggles with the number of placement breakdowns that children in care must endure. In fact, over one third of children in care experience multiple placement breakdowns in a given year. A review into Manitoba's foster care system found that almost 300 children in care moved homes a minimum of seven times within one year. Perhaps most devastating, the same study found that two children moved more than 100 times within a one-year period (Office of the Children's Advocate in Manitoba, 2015).

Placement breakdowns are a critical factor when it comes to long-term outcomes for children in care. Local research has shown a correlation between homelessness (Holmes, 2015); criminal justice involvement (Manitoba Centre for Health Policy, 2020); disordered attachment, poor educational outcomes (Brownell et al., 2015); and premature death (Manitoba Advocate for Children & Youth, 2019) when children in care experience multiple placement breakdowns. Indeed, over half of Manitoba's homeless population had been wards of Child and Family Services (CFS) at some point in their lives. Holmes (2015) found that those who were homeless had an average of 12 placement breakdowns before becoming homeless. Another study found that children in care are more likely to be accused of a crime than graduate from high school before their 21st birthday (MCHP, 2020). Lastly, the Manitoba Advocate for Children and Youth (2019) found that between 2014 and 2018 15 children died while in care of CFS.

### ***Lack of Training Programs and Requirements for Foster Parenting in Manitoba***

Currently, there is not a mandatory pre-service foster care training program for any of the four child welfare authorities in Manitoba. In fact, there are no training requirements to become a licensed foster parent in Manitoba. Despite the clear evidence indicating the multiple benefits of a pre-service training program (Benesh & Cui, 2017; Child Welfare League of America, 2020; Christenson & McMurtry, 2007; Conn et al., 2018; Connel et al., 2006; Cooley & Petren, 2011; Delaney et al., 2012; Doresey et al., 2008; Dozier et al., 2002; Festinger & Baker, 2013; Gilbertson & Barber, 2003; Hebert & Kulkin, 2017; Krishnamoorthy et al., 2020; Lotty et al., 2020; Price et al., 2009; Puddy & Jackson, 2003; Rork & McNeil, 2011; Strickler et al., 2018; Uretsky & Hoffman, 2017) Manitoba Child and Family Services (CFS) systems have not adopted one. This is in stark contrast to other CFS jurisdictions across Canada.

In order to respond to the training needs of their foster parents, many provinces have adopted models, albeit ones developed in the United States, including the Parent Resource for Information, Development and Education (PRIDE) pre-service training program. In fact, British Columbia, Saskatchewan, Ontario, New Brunswick, Nova Scotia, and Newfoundland and Labrador have all utilized the PRIDE training (Government of Alberta, 2008; Government of British Columbia, 2020; Government of Ontario, 2018; Saskatchewan Foster families Association, 2012). Alberta has developed their own pre-service training program, consisting of 31 different modules foster parents complete over four years (Government of Alberta, 2008). Along with Alberta, Yukon has also developed local training to accommodate prospective foster parents (de Haan, 2019).<sup>1</sup> As mentioned earlier, Manitoba stands in stark contrast to other jurisdictions in Canada, as it has no mandatory pre-service training program. Instead, foster parents can only access optional training programs on their own time (de Hann, 2019).

Although child welfare in Manitoba is in crisis, there are solutions that can help children in care to develop a healthier attachment, including the implementation of an intensive foster care pre-service training program. This thesis research explored the need for a pre-service training foster care program in Manitoba and how such a program could benefit children in care, including the prevention of placement breakdowns.

### **Thesis Research Aims**

The purpose of this qualitative study is to explore the need for pre-service training for foster parents in Manitoba. The overall aim is to determine if a foster parent pre-service training program would be supported among a range of stakeholders, including foster parents, children in

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<sup>1</sup> There is currently no information available for Nunavut, Prince Edward Island, or Quebec regarding a pre-service foster parent training program.

care, and child welfare professionals. The study is based on qualitative interviews with foster care parents, young adults who have aged out of CFS care, and CFS professionals. The results of the study will help determine the training needs and gaps for Manitoba's foster parents and inform the future development of foster parent training programs.

## **Chapter 2: Literature Review**

This literature review includes the various reasons for placement breakdowns, the impacts of these breakdowns, as well as a description of the current foster parent training options. The review also presents the literature on the challenges of training programs and recommendations for better programming. It concludes by identifying the limitations of the current body of research and offers a number of recommendations for future research.

The review originally included searches from 2010 to present; however, to acquire more relevant/useful information, the search was widened to 2003 to present. Furthermore, to create a broad understanding of the complexities of foster care, sources were not limited to North America, but also included literature from Australia and Europe. The databases used in this review included Social Work Abstracts, PsychINFO, PubMed, and Child & Family Data Archive.

### **Introduction**

Being a foster parent is a challenging and incredibly unique profession. Not only is it a 24-hour, seven day a week position, but there are multiple unique demands, including meeting the complex needs of the children they care for (Jedwab et al., 2019). In addition, foster parents are expected to complete the necessary paperwork, and connect with child welfare professionals, natural family members, and other professionals (Lotty et al., 2020). With so many professionals involved in one child's life, foster parents often struggle with role ambiguity; unsure of where their role begins and ends (Cooley & Petren, 2011).

As a result, prior to licensing a home, many areas in the world require a mandatory pre-service training program for foster parents (Benesh & Cui, 2017; Connell et al., 2006; Cooley & Petren, 2011; Gilbertson & Barber, 2003; Hebert & Kulkin, 2018; Jedwab et al., 2019; Konijin et

al., 2019; Oosterman et al., 2007; Puddy & Jackson, 2003; Solomon et al., 2017; Strickler et al., 2018; Vanschoonlandt et al., 2012). Although these training programs vary, most include multi-session classes in a group setting. Prior research has shown that foster parents who engage in a pre-service training program are more successful in their foster parent journeys (Strickler et al., 2018). This success includes a reduction in burnout (Hebert & Kulkin, 2018); increased retention (Cooley & Petren, 2011); higher self-efficacy (Whenan et al., 2009); and an increase in placement stability (Puddy & Jackson, 2003). In addition, there are noted benefits for children in care who have trained foster parents. These benefits include lower external behavioural problems (Whenan et al., 2009); increased attachment (Hebert & Kulkin, 2018); increased impulse control (Dozier et al., 2002), as well as all the benefits that come with a stable placement.

Despite the noted benefits trained foster parents have, there are significant gaps in the training provided to foster parents. In fact, there is no unified approach to foster parent training across Canada's provinces and territories. As noted earlier, some provinces provide pre-service training that was developed in the United States (Government of British Columbia, 2020; Government of Ontario, Saskatchewan Foster Families Association, 2012); some provinces provide their own independently developed training (Government of Alberta, 2008); while others choose to leave it up to the foster parents and individual agencies, as in the case of Manitoba (de Haan, 2019).

The variance in approaches could be due to a lack of options. There were only three pre-service training programs found in the literature; all are developed in the United States (Benesh & Cui, 2016; Delaney et al., 2012; Festinger & Baker, 2013; Puddy & Jackson, 2003). Along with a lack of choice, the scant literature providing evaluations of pre-service training programs has shown questionable evidence. This includes significant methodological limitations (Delaney

et al., 2012; Doresy et al., 2008); findings that suggest the training did not adequately prepare foster parents (Puddy & Jackson, 2003); and trainings that are grounded in values instead of theory (Benesh & Cui, 2016; Puddy & Jackson, 2003; Rork & McNeil, 2011). In addition, the trainings that provided the most positive results were used far less than others (Price et al., 2009).

Other critical findings in the literature include the need to include veteran or retired foster parents in the training experience. These key figures can play a role as a mentor, sharing stories, practical strategies, and improve parent self-efficacy (Cooley & Petren, 2011). In fact, when prospective foster parents did not connect with the training facilitators, there were fewer positive outcomes (Benesh & Cui, 2016). Along with the need for relatable facilitators, foster parents also described the need for practical application in the training. This includes effective strategies to manage challenging behaviour, as well as knowledge and awareness of relevant theories and cultural awareness (Cooley & Petren, 2011; Delaney et al., 2012; Hebert & Kulkin, 2018).

### **Foster Placement Breakdown**

Not surprisingly, children who are taken out of their natural families because of abuse and/or neglect and placed into foster care experience a number of challenges (Aslamazova et al., 2019; Connell et al., 2006; Tucker & MacKenzie, 2012). Perhaps one of the more devastating situations happen when foster care placements breakdown prematurely, and children are moved from their foster family, school, bedroom, and everything that has become familiar to them (Jedwab et al., 2019; Oosterman et al., 2007; van Santen, 2013; Waid et al., 2016). As a result, children in care who experience multiple placement moves are more likely to suffer from adverse outcomes, including a disrupted attachment style (Tucker & Mackenzie, 2012); maladaptive child development (Dozier et al., 2002; Puddy & Jackson, 2003); which is likely to lead to

problematic behaviour (Connell et al., 2006; Cox et al., 2011; Konijin et al., 2019; Oosterman et al., 2007; Unrau, 2007; Van Santen, 2013).

According to Jedwab et al., (2019), the term “placement” in foster care is defined as, “a stay in any out-of-home care setting at which a child stayed at least one night” (p. 58). One of the major criticisms of foster care is the lack of *permanent* placement options, leaving children in care even more vulnerable than necessary. Most of the articles define placement moves as a major instability and disruption in the child’s life that can lead to devastating psychological consequences (Aslamazova et al., 2019; Connell et al., 2006; Gilbertson & Barber, 2003; Jedwab et al., 2019; Unrau, 2007; Vanschoonlandt et al., 2012; Waid et al., 2016). In fact, some suggest the current foster care system is in crisis (Jedwab et al., 2019; Waid et al., 2016). These researchers are justified in classifying various child welfare systems in crisis because of their grim numbers on placement breakdowns.

According to the literature, most children in care experience at least one placement breakdown (Connell et al., 2006); and over one third experience multiple placement breakdowns (Jedwab et al., 2019). Another study found that 22-70% of children in care experience a placement change in any given year (Waid et al., 2016). Perhaps most problematic is a report by Unrau (2007), indicating that children in care were rarely told why they were moving, often causing them to blame themselves. Further, the same report indicated that previous foster children felt ignored and overlooked when the adults around them were making decisions that would directly affect their lives.

### ***Reasons for Placement Breakdowns***

To understand the complexities of placement breakdowns, it is necessary to explore the critical reasons why there is a lack of permanency in foster care. Findings suggest most of these

placements moves can be prevented with added supports and services, including foster parent training (Benesh & Cui, 2017; Gilbertson & Barber, 2003; Hebert & Kulkin, 2018). To explore the reasons for foster care placement breakdowns, the literature has focused on four different areas.

The first focused on the overarching systemic and institutional factors (Cox et al., 2011; Gilbertson & Barber, 2003); next is the characteristics of the child who experienced the placement breakdown (Aslamazova, 2019; Connell et al., 2006; Unrau, 2007; Vanschoonlandt, 2012); the third area of research focused on the foster parent's characteristics and the reasons they cited for terminating the placement (Aslamazova, 2019; Gilbertson & Barber, 2003; Vanschoonlandt, 2012); and the fourth explored the various types of dynamics of the family's home, and whether this affected their stability (Jedwab, 2019; Waid et al., 2016). In addition, the literature also indicates several predictive factors that can lead to an increase in placement breakdowns (Aslamazova et al., 2019; Hurlburt et al., 2010; Jedwab et al., 2019; Vanschoonlandt, 2012).

**Systemic/Institutional Factors.** Foster children come with complex challenges that many of their counterparts do not experience. It is no wonder then, why so few individuals choose to become foster parents. Indeed, an overwhelming trend in child welfare is attempting to address the lack of recruitment and retention of foster parents. In fact, one study found that the median length of foster parents is only eight to 14 months (Cox et al., 2011). Qualitative research studies exploring this have interviewed foster parents to understand the short tenure.

Although Gilbertson and Barber (2003) found that foster parents cited behavioural problems in their foster children as one of the reasons for prematurely quitting their positions, the number one issue foster parents cited was a lack of support, preparedness, and training for such a

complex occupation (Cooley & Petren, 2011; van Saneten, 2013; Vanschoonlandt et al., 2012). Other studies exploring foster parents' experiences found that foster parents struggle with the ambiguity of their role. Foster parents who were interviewed stated that training was sometimes helpful, but they would prefer a step-by-step guide or reference manual to help them walk through their expectations and how to work through the various aspects of foster care. Foster parents stated that abstract concepts are not as helpful as practical tools that can provide clarity in their role as a foster parent (Cooley & Petren, 2011).

Another systemic factor contributing to placement breakdowns in North America, is the lack of resources and training offered to foster parents (Canadian Association of Social Workers, 2018; Cooley & Petren, 2011; Vanschoonlandt et al., 2012). One foster parent poignantly stated that they would do everything different if they were to create a new foster parent training program (Cooley & Petren, 2011). Other respondents in the same study agreed that the foster parent training they received did not adequately prepare them for their new role. Foster parents also identified the need for on-going training as an important support (Cooley & Petren, 2011). In the study by Bronselaer et al., (2011) almost 80% of foster parents had not attended any foster parent training sessions in the past five years.

A lack of resources and training is only further complicated when foster parents must navigate through the complexity of multiple systems (Conn et al., 2018; Cooley & Petren, 2011). When interviewed, some foster parents stated that they do not believe the foster care system is an effective one (Cooley & Petren, 2011). Most comments about the system focused on the lack of empathy and responsibility when caring for children (i.e., foster families not having access to supports for the children in their care such as counselling). Others discussed their learned ability

to network and find resources after years of not receiving such assistance from their social worker (Cooley & Petren, 2011).

Along with a lack of resources, another finding suggests the primary reason placements are terminated is because of a lack of caregiver support from the child welfare system. This includes receiving inadequate information about the child in care before the placement began, including previous placement histories, natural family history (i.e., the reason for the child coming into care), as well as any problematic behavioural patterns and successful strategies that have worked in the past. Lastly, foster parents also noted a lack of resources and supports was a significant stressor (Gilbertson & Barber, 2003).

It is important to acknowledge that social workers may likely be limited in the amount of support they can provide their foster parents because of the sheer workload they must manage. As example, frontline social workers typically manage 25 cases at minimum (McFadden et al., 2015). One Canadian report found that 75% of social workers identified their unmanageable caseloads as the most critical issue in their career (Canadian Association of Social Workers, 2018). The same report found that more than half of Canadian social workers stated that their careers negatively impacted their personal and family life. As a result, social workers are unable to meet the impossible demands of their job.

In fact, one study found that less than half of the foster parents interviewed had contact at least once a month with their social worker (Bronselaer et al., 2011). Limited communication with the social worker is further compounded because foster parents have limited autonomy to make general day to day decisions regarding the care of the child (Vanschoonlandt, 2012). Contact with the social worker is not only necessary to navigate the system, but foster parents also want a relationship with the worker and for them to be empathic, relational, reassuring, and

supportive. Many foster parents found that their unique profession, raising non-relative children, difficult to relate to; thus, feelings of isolation are common (Conn et al., 2018). Therefore, it is clear how some foster parents may not feel supported when social workers are unavailable.

The last systemic factor related to placement breakdowns has to do with child-parent “mismatches”. Foster parents stated that they terminated placements prematurely when they felt that a child-parent mismatch took place because of the rushed process (van Santen, 2013).

Resulting from a lack of options, many foster parents are pressured from the child welfare professionals into taking children who may not be a good fit for their home. A mismatch takes place when there is a discrepancy between what the foster family can provide to the foster child and what the foster child needs in terms of support and care (van Santen, 2013). This type of short-term and/or hurried decision-making results in many preventable placement breakdowns (Aslamazova et al., 2019).

**Child Characteristics.** According to the literature review, external and internal problematic behaviours have been cited as one of the main reasons why foster parents terminate a placement. Child behaviours that may predict a placement breakdown include a lack of self-regulation (e.g., hyperactivity, emotional outbursts, dysmaturity, and attention problems) (van Rooij et al., 2019); violent/aggressive behaviour (e.g., physical and verbal aggression towards foster parents/siblings) (van Rooij et al., 2019); concerning/deceptive behaviour (e.g., lying, making false allegations, and not following curfews, using drugs, and breaking other rules) (Gilbertson & Barber, 2003); and concerning school behaviour (e.g., not attending classes, being disruptive in school, receiving failing grades, and being suspended/expelled) (Connell et al, 2006).

The literature indicates that such behavioural problems can cause high levels of stress for foster parents, are difficult for foster parents to manage, and negatively affect the foster parent’s

self-efficacy, thus causing the foster home to become unstable and increasing the likelihood of a placement breakdown (Holland & Gorey, 2004). Unfortunately, there is a noted gap in the literature about child characteristics that may help contribute to secure placements (Connell et al., 2006; Cooley & Petren, 2011; Vanschoonlandt, 2012). However, the literature did differentiate between children who are at a higher risk of placement breakdowns based on their problematic behaviour. Children in care were considered to be lower risk when their foster parents reported five or fewer behavioural incidents per day. Any more than five incidents per day was considered higher risk, and each incident above the threshold was found to increase the risk of a placement breakdown significantly (van Rooij et al., 2019).

The trauma, disrupted development, and disordered attachment that children in care experience is further exacerbated when children in care experience a placement breakdown. As such, the problematic internal and external behaviours tend to increase as well, resulting in the likelihood of subsequent placements breaking down. Therefore, it is clear to see the vicious cycle taking place: as problematic behaviour increases, so too, do placement breakdowns (Aslamazova et al., 2019; Cox et al., 2011; Dozier et al., 2002; Festinger & Baker, 2013; Konijin et al., 2019; Niec, & Schoonover, 2017; Oosterman et al., 2007; Solomon et al., 2018; Wait et al., 2016).

Further, Aslamazova et al., (2019) found that placement breakdowns significantly increased for children in care who experienced five or more traumatic events. Any type of physical, sexual, emotional, and psychological abuse is considered a traumatic event. Previous placement breakdowns are also considered a traumatic event; and as already mentioned, previous placement breakdowns are a risk factor for future placement breakdowns (van Rooij et al., 2019). Unsurprisingly, most children in care do experience external behavioural issues (likely stemming from their histories of trauma), yet less than half of the available foster parents are willing to care

for children with such behavioural concerns (Cox et al., 2011). As a result, many children with problematic behaviours and long placement breakdown history end up living in institutionalized homes (van Santen, 2013).

Another child factor that impacts placement breakdowns is the reason children were placed into foster care in the first place. Research shows that children who are removed from their natural families because of physical or sexual abuse experience more placement breakdowns than children who experienced neglect (Vanderfaeillie et al., 2018). On the contrary, one study found that foster parent-initiated placement breakdowns made up only 7% of the time when the child in their care was neglected by his or her natural family. Interestingly, foster parents stated that neglect was the simplest problem to solve because they knew how to respond (van Santen, 2013).

Along with previous traumatic experiences and problematic behaviour, there are specific child characteristics that can predict placement breakdowns. In fact, one of the main predictors of placement instability is age. Infants have by far the lowest risk of a placement breakdown (Aslamazova et al., 2019; van Santen, 2013); and as children get older, the risk for a placement breakdown significantly increases, especially among older adolescents (Aslamazova et al., 2019; Connell et al., 2006; Jedwab et al., 2019; Waid et al., 2016; van Santen, 2013; Vanschoonlandt et al., 2012). There are several possible reasons for the increase in placement breakdowns such as children age. First, it is easier for foster parents and young children to develop a mutual bond due to the close relationship one must have with a child under the age of three (van Santen, 2013). As children age, there is less of an opportunity to create a mutual bond as adolescents require more independence. In addition, older children and youth who have been in care longer have accumulated more trauma that is likely to result in increased challenging behaviour, leading to an

increase in placement breakdowns (Aslamazova et al., 2019). As a result, it is critical for children in foster care to be placed in high quality, stable foster homes as early as possible.

Although there is less consensus within the literature, gender and disability are also two predictors for placement breakdown. One study found that female foster youth were more likely to experience placement instability than their male counterparts (Connell et al., 2006); however, Jedwab et al., (2019) found the opposite – that males experience greater placement breakdown than females. Other studies found no difference in gender with regards to predicting placement breakdowns (Aslamazova et al., 2019; Konjin et al., 2019; Waid et al., 2016). One possible explanation for the discrepancy could be due to the variety of placement settings in some studies. For instance, older males tend to experience fewer placement breakdowns in group home type settings but are less often placed in group homes, whereas girls are at greater risk for running away from their placements than boys (Connell et al., 2006). Clearly, the lack of consensus in the literature with regards to gender and placement stability is a gap in the literature that should be further explored.

Lastly, the literature explores whether a child's disability is a predictor of placement instability. Again, the research contains mixed results. Two studies found that a child's disability is likely to increase placement instability because foster parents experienced a lack of support and access to services (Connell et al., 2016; Vanschoonlandt et al., 2012). On the other hand, other research shows there is no difference in placement stability for children who are diagnosed with a disability (Gilbertson & Barber, 2003). Two more studies suggest that it is not the higher needs of the child that causes the breakdown, but the lack of much needed support provided to the foster parents that leads to the instability (Aslamazova et al., 2019; Unrau, 2007).

**Foster Parent Characteristics.** The literature also focused on foster parent characteristics and their reasons for prematurely ending placements. Again, there is a discrepancy within the research here, as some findings suggest the most common cited reason for foster parents to end placements is the foster child's problematic behaviour (Aslamazova et al., 2019; Jedwab et al., 2019).

In addition to a lack of information, other foster parent characteristics that lead to a placement breakdown include a general lack of education regarding relevant subject material such as attachment, trauma, and how to manage difficult behaviour (Vanschoonlandt et al., 2012). Furthermore, another study found that placements were much more likely to breakdown if the parents were unwilling to engage in any interventions or training programs that would help the youth adjust (Gilbertson & Barber, 2003). In addition, Aslamazova et al., (2019) found that when foster parents were unwilling to participate in programs, the intervention team was unable to provide guidance or even detect any problems. Along the same lines, foster parent motivation was a factor in predicting placement breakdowns. Placements were significantly more stable when the original motivation for the parent was to provide care to children in need; as opposed to other motivations, such as providing a playmate for their biological children (van Santen, 2013).

Other foster parent characteristics that might predict a placement breakdown include the family's financial situation. Families with a lower socioeconomic status tend to quit their placements prematurely compared to their counterparts with higher incomes (Aslamazova et al., 2019). There are possible reasons for this. First, in general, one foster parent is required to either stay at home on a full or part-time basis to respond to the needs of the children in care. Because foster care is not an adequate substitute for full-time income, it is more difficult for families with lower socioeconomic status to manage on lower incomes. Foster care is also associated with

significant financial expenses that are often not reimbursed (e.g., sports and recreation costs, clothing replacement costs, travel expenses, damages/repairs to the home). In addition, families with lower socioeconomic status tend to have fewer resources to care for the child (i.e., time to find and access supports for the child); therefore, may feel overwhelmed in a shorter period of time, leading to a placement breakdown (Aslamazova et al., 2019).

Foster parent stress is related to placement breakdowns. One study found that negative life events taking place either shortly before or after a new placement does increase the risk of a placement breakdown (van Santen, 2013). Foster parent stress can be mitigated in several ways, including the opportunity to discuss relevant stressors with the frontline social worker.

Unfortunately, many foster parents are hesitant to divulge personal stress because they are fearful of being perceived as incapable of taking on the stress of raising a child in care (Vanschoonlandt et al., 2012). Furthermore, foster parent stress related to feelings of isolation and non-belonging are also associated with an increase in placement breakdowns (Aslamazova et al., 2019).

In the literature search, other foster parent characteristics were explored to determine whether they effected placement breakdowns. First, the age of the foster parent(s) was not a consistent or reliable factor in predicting placement breakdowns (Oosterman et al., 2007; van Stanten, 2013); nor was the length of the marital relationship of the foster parents considered a predictable factor in placement breakdowns (Oosterman et al., 2007). Lastly, the length of foster parent tenure does not appear to impact placement breakdowns (Butcher, 2005; van Santen, 2013).

**Family Dynamics.** Lastly, as for family dynamics, multiple studies had similar findings with regards to the biological family (as foster parents) increasing the placement stability. For

instance, when children were placed into kinship care<sup>2</sup> or if they were co-placed with a sibling, their placement stability was significantly increased compared to their counterparts who were not placed with relatives (Waid et al., 2016).

Along with being co-placed with a sibling or having a kinship placement, children who were placed in specialized residential treatment centres also had more stable placements than their counterparts who reside in non-relative foster homes and group homes (Connell et al., 2006; Jedwab et al., 2019). Residential treatment centres are group home type settings. The facility operates with rotational shift staff who provide care to the children. This type of care is not ideal, as there are many adults coming in and out of the child's life, only adding to the attachment disruptions (Konjic et al., 2019). However, one possible reason for the increased stability in treatment centres is the increased rules and monitoring, but also the support that takes place (Hurlburt et al., 2010).

Other critical family dynamic factors have been explored to determine whether they play a role in placement breakdowns. First, is whether the foster parents have their own biological children in the home. A review and meta-analysis of disruptions in care found that if foster parents had biological children in the home, it increased the risk of a placement breakdown for the child in care. More specifically, the risk was increased if the biological child and foster child were closer in age; within three years of each other (Oosterman et al., 2007). It is suggested that children within three years of each other can be in more conflict; therefore, increasing the stress of the family dynamic.

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<sup>2</sup> Kinship care is defined in the literature as children who are taken out of their natural parent's home and placed into another relative's home, such as a grandparent or aunt (Gilbertson & Barber, 2003; Jedwab et al., 2019; Waid et al., 2016).

Another factor regarding the household dynamics has to do with the physical home. Despite popular CFS policy directives, placement breakdowns were not associated with the size of the home, nor whether the child in care had his or her own bedroom (Oosterman et al., 2007). Some critical researchers posit that the reason why some of the arbitrary rules of licensing in foster care (i.e., square footage of home, separate bedrooms for all children, size of bedroom windows) are put in place to prevent families of colour; in particular, Indigenous families, from becoming licensed foster parents (Hanna et al., 2017).

Unlike the physical characteristics of the foster home, the location (rural versus urban) can effect placement breakdowns. Foster homes in cities or towns tend to have fewer placement breakdowns than those who live in rural locations. It is important to note that there was no significant difference between living in a town or a city; however, the families who were in more isolated communities were at an increased risk of placement breakdowns. Researchers posit the reasoning behind the increased placement breakdowns for isolated homes has to do with a lack of access to resources and limited contact with social workers and other professionals that appears to be critical in maintaining foster care placements long-term (Aslamazova et al., 2019)

### ***Impacts of Foster Care Placement Breakdowns***

The current literature paints a clear picture regarding the negative impacts that children in care experience when their placement breaks down. Unrau (2007) and Connell and colleagues (2006) reported immediate and long-term effects related to changes in placement on children in care. As previously mentioned, these include trauma and attachment disorders that will only exacerbate the behavioural, psychological, and mental health challenges of children in care. The literature on foster care rarely seeks out the voices of the children in care. The studies that have interviewed previous children in care describe how one of the worst parts about being in care

was the placement breakdowns. One of the psychological harms the children who were interviewed spoke about was how they were not consulted or even told why they were moving (Unrau, 2007). Furthermore, these children in care did not focus on the actual physical move, but the psychological hurt from the repeated losses, including their foster parents and siblings, teachers, coaches, friends, and other important people in their lives (Unrau, 2007). Some children in care described feeling powerless and helpless during their upbringing, especially after several placement breakdowns. Further, many children stated that even if they had legitimate concerns about their current placement, they rarely advocated for themselves because no one was advocating on their behalf (Unrau, 2007). Even more troubling, placement stability is directly related to the child's previous placement breakdown history. If the child in care has had multiple placement breakdowns, he or she is likely to have problematic behaviours as a result of the repeated rejection (Aslamazova et al., 2019).

**Emotional and Financial Costs of Placement Breakdowns.** Although the numbers of placement breakdowns do vary across the research, the majority of children in care are likely to experience at least one breakdown. It is important to note that there is a significant cost that comes with placement breakdowns. First, there is the emotional cost of everyone involved in the breakdown, including the child, foster parents, natural parents and family, and caseworker (Hurlburt et al., 2010). In addition, there is evidence in the literature suggesting that biological parent involvement in the foster home increases placement stability. Unfortunately, this is often far from reality. Biological parents are often the last to know about a placement breakdown and often experience the grief and loss of the placement for the child. Furthermore, oftentimes the placement breakdown negatively impacts the occurrence of natural family visits (McWey et al., 2010).

Along with foster children and biological parents, foster parents and social workers are also susceptible to the grief and loss resulting in placement breakdowns. One study examining the experiences of foster parents found that the stress, mourning, and loss of losing a foster placement is one of the reasons why foster parents decided to quit their positions (Hurlburt et al., 2010). Along with foster parent burnout, one study found that child welfare professionals had higher levels of distress than the typical outpatient mental health client (McFadden et al., 2015). One major reason cited for this increased psychological distress is the lack of continuity and supports provided that can help children in care thrive. The repeated negative outcomes can affect self-confidence, professional involvement with clients, and result in compassion fatigue and burnout (Acker, 2010).

Most notable though, is the devastating consequences that a placement breakdown has on the child in care. Countless studies have documented these negative effects, which include external behavioural problems (Konijnen et al., 2019; Oosterman et al., 2007). A meta-analytic review of 42 studies found that placement breakdowns result in the loss of intimate bonds, social relationships, and familiar places (Konijnen et al., 2019). In addition, there are negative effects on the developmental outcomes including physical and brain development as well as the child's overall well-being and self-esteem (Konijnen et al., 2019). Other research, including longitudinal studies and meta-analyses, found that placement breakdowns are associated with poor educational outcomes, a lack of adequate health care, homelessness, unstable relationships in adulthood, and involvement in the criminal justice system (Connell et al., 2006; Dozier et al., 2002; Gilbertson & Barber, 2003; Tucker & MacKenzie, 2012).

Along with the emotional impact, there is a financial cost that comes with placement breakdowns. One conservative estimate from almost two decades ago suggested a single

placement breakdown cost the child welfare system approximately \$25,000 (Gilbertson & Barber, 2003). Other financial aspects include the high turnover of caseworkers due to the vicarious trauma they experience (Hurlburt et al., 2010; Waid et al., 2016). Similarly, is the financial cost and time it takes to recruit new foster families for the children who have experienced placement breakdowns (Waid et al., 2016). Therefore, preventing placement breakdowns is an important objective that child welfare systems must address. Training foster parents has been one common strategy; however, the success of the placement depends on the quality of training provided. Below is a review of the current foster parent training intervention options that are most often available.

Fortunately, the literature suggests that foster placement breakdowns can often be prevented. For example, Gilbertson and Barber (2003) describe how the majority of placement breakdowns can be reconciled with support, training, guidance, and pre-placement information. In fact, some jurisdictions have developed intervention and training programs for foster parents who are caring for children with behavioural concerns (Vanschoonlandt et al., 2012). The following section provides an in-depth literature review on all the training options for foster parents in the United States. One of these programs is currently used in Canada.

### **Current Foster Parent Training Interventions Options**

In the United States, federal policy requires foster parents to participate in a pre-service training program prior to becoming licensed care providers (Price et al., 2009). This policy is, however, vague, providing only general guidelines for this pre-service training. Consequently, pre-service training programs vary greatly across jurisdictions (Hebert & Kulkin, 2018). These variations include the content and the duration of the program, and whether any follow-up classes will be required (Price et al., 2009). Two commonly utilized pre-service training

programs were identified in the US - the Parent Resource for Information, Development and Education (PRIDE) program, and the Model Approach to Partnerships in Parenting Group Participation Selection (MAPP-GPS). Although American, PRIDE is offered as a pre-service training program in some Canadian provinces, including New Brunswick, Newfoundland & Labrador, Northwest Territories, Nova Scotia, Ontario, Saskatchewan, and Alberta (de Haan, 2019).

The PRIDE pre-training program was developed in the 1990s by the Child Welfare League of America as a way to implement a standardized recruitment, preparation, and selection of foster parents across the United States. Since then, more than 25 countries have adopted the model (Child Welfare League of America, 2020). The PRIDE model has five core competencies, including protecting and nurturing children, meeting children's needs and addressing their delays, supporting relationships with natural families, connecting children to safe families intended to last a lifetime, and working as a member of the professional team (Child Welfare League of America, 2020).

Along with the PRIDE training, the MAPP/GPS training is another often utilized pre-service training program for foster parents that was developed in the United States. The MAPP/GPS was developed by the Child Welfare Institute in Massachusetts in the 1980s in order to prepare future foster parents by providing them with relevant information (Delaney et al, 2012). The training program consists of 30 hours that take place over 10 sessions. Similar to the PRIDE training, MAPP/GPS provides a general overview of the child welfare system. In addition, it provides information on attachment theory, grief and loss, connection to the natural family, and understanding the impact of foster care (Children's Bureau, n.d.). Please see Appendix D for a full description of other foster parent training programs, including the Ohio

Child Welfare Training Program, Keeping Foster Parents and Kin Parents Trained and Supported, the Incredible Years Intervention, and Circles of Security Foster Parent Training.

In contrast to the United States, and most other areas in the world (de Haan, 2019), Canada does not have a federal policy requiring a pre-service training program. Because child protective services are mostly a provincial responsibility, each province has individual pre-service training policy expectations; with the majority requiring some type of training prior to the prospective foster parent obtaining a license (Government of Alberta, 2008); and as noted above some provinces have chosen to offer American-based models. However, Manitoba is an outlier and does not have a pre-service training program that is mandated or offered in any of the four authorities. Importantly, there is no evidence that a theoretically grounded or evaluated pre-service training program has ever been delivered in any CFS jurisdiction in Canada for its foster parents.

### ***Challenges of Foster Parent Training Programs***

Based on the available foster parent training programs, it is clear there are multiple challenges foster parents experience when having their training needs met. First, it is largely unknown if any model adequately teaches strategies to parent complex behaviour. The assumption that foster parents will retain and effectively use behaviour management strategies has rarely been tested (Price et al., 2009). Indeed, many identified gaps and recommendations for changes include the need to increase research on the effectiveness of pre-service training programs (Benesh & Cui, 2017; Cooley & Petren, 2011; Festinger & Baker, 2013; Jedwab et al., 2019; Puddy & Jackson, 2003; Solomon et al., 2017; Strickler et al., 2018; Van Santen, 2013)

Another critique of the pre-service training programs is that they focus too heavily on the screening process (i.e., participants determining whether they are truly interested in becoming

foster parents, and child welfare agencies assessing whether participants are capable of becoming foster parents). As a result, there is less focus on practical skill development (Delaney et al., 2012). When foster parents do not have the skills necessary to respond to the complex needs of the children they care for, an increase in placement breakdowns will occur (Benesh & Cui, 2016).

Another concern about the noted pre-service training programs is the lack of theoretical foundations used (Rork & McNeil, 2011). It is necessary for training programs to be guided by relevant theories in order to keep content evidence-based and consistent throughout various jurisdictions (Benesh & Cui, 2016). Instead, these pre-service training programs are driven by the values, beliefs, and experiences of the child welfare community. This approach should be a concern, because some studies have found when foster parents are exposed to values-based training there is an increased reporting of foster child behavioural problems (Benesh & Cui, 2016).

Last, there is significant concern around the overall lack of research and evaluations in the literature. As previously mentioned, very few evaluations have been completed in the literature on foster parent pre-service training programs (Benesh & Cui, 2016; Delaney et al., 2012; Price et al., 2009; Rork & McNeil, 2011). As a result, a gap in the literature continues to grow. In addition, the programs that have been evaluated have had several notable limitations. Some of the limitations include small sample sizes, no randomization, and no pre-test post-test (Benesh & Cui, 2016). Further, the programs that have been evaluated have had inconsistent findings (Benesh & Cui, 2016; Puddy & Jackson, 2003). It could be the case that foster parent training programs are particularly challenging to evaluate because of the significantly diverse population. The variance includes whether there are biological children, number of children and

their ages, histories of the foster children, the foster parents' histories, and the motivation for becoming foster parents (Rork & McNeil, 2011).

The last challenge has to do with a lack of culturally appropriate and responsive training in the above-mentioned training programs. This is perhaps the biggest challenge for provinces like Manitoba, because the majority of children in care are Indigenous, and the majority of foster parents are not. Indeed, Manitoba, and the rest of the country is missing an opportunity for children in care to be raised in culturally appropriate and safe homes. With a pre-service training program, foster parents could be exposed to the necessary information and understanding of the history and cultural practices of First Peoples.

### ***Recommendations for Foster Parent Training Programs***

Several recommendations have been put forth in the literature regarding foster parent pre-service training programs. To address one of the largest challenges in the training, the first recommendation is to create future training programs with a theoretical foundation (Benesh & Cui, 2016; Delaney et al., 2012; Price et al., 2009). In addition, program evaluations must be implemented on a more consistent basis, as well as longitudinal studies to explore long-term training effects (Price et al., 2009). Further, previous evaluations have focused on quantitative outcomes on multi-session training programs. Providing qualitative outcomes and evaluations of single-session programs are also needed to fill a significant gap (Benesh & Cui, 2016). Lastly, instead of evaluations relying solely on self-assessments, Rork and McNeil (2011) recommend obtaining reports from social workers, case managers, teachers, and other professionals involved to validate the self-assessment reports of the foster parents.

Next, the literature notes an important recommendation that has to do specifically with the facilitators. Benesh and Cui (2016) found that when the training facilitators did not relate to

the prospective foster parents in the audience, there was a less positive outcome. This is an important consideration, as most training facilitators are child welfare professionals (Delaney et al., 2012), who may have different values and beliefs than prospective foster parents. It is important to note that training was most successful when veteran or retired foster parents were leading the training. This provided an opportunity for mentorship and the sharing of experiences, practical examples, and lessons learned (Cooley & Petren, 2011).

Another thoughtful recommendation to address foster parent availability, is to provide some of the training session in an online platform. The majority of training programs use an in-person, multi-session platform that can be difficult for participants to attend (Benesh & Cui, 2016). Online training sessions can provide skill-building, while at the same time, reduce the stress and time it takes to schedule in-person training sessions (Delaney et al., 2012). Online training can be used to supplement or enhance the current training program in a standardized way. It also provides flexibility that is necessary for adult learners (Benesh & Cui, 2016). In addition, studies have shown that participants provided more positive feedback for online or hybrid learning options than for in-person only training (Delaney et al., 2012).

Lastly, an overall recommendation is to limit the inconsistency across jurisdictions for pre-service training. Indeed, open communication and collaboration is needed among all stakeholders in order to develop effective foster parent training programs (Benesh & Cui, 2016). When foster parents are effectively trained and have the opportunity to learn from quality training programs, children in care and their families will benefit (Benesh & Cui, 2016; Cooley & Petren, 2011; Solomon et al., 2017).

### ***Problematic Theoretical Applications of Current Foster Parent Training Programs***

During this review, it became clear that the literature heavily supports having a foster parent training or intervention that is grounded in theory (Benesh & Cui, 2017; Cooley & Petren, 2011; Dozier et al., 2002; Vanschoonlandt et al., 2012). Despite this significant support, upon investigation, it appears there are few foster parent trainings that have a theoretical foundation (Benesh & Cui, 2017; Dozier et al., 2002; Puddy & Jackson, 2003; Unrau, 2007). In fact, one paper systematically reviewed 22 different foster parent training programs and found that very few programs had any theoretical basis or empirical evidence (Benesh & Cui, 2017). As a result, many training programs have been found to either be ineffective or even problematic (Puddy & Jackson, 2003). Perhaps most alarming, the foster parent training programs that were grounded in theoretical foundations were hardly used or evaluated; however, those programs without any theoretical bases were the most popular (Hebert & Kulkin, 2018).

**Problematic Evidence for Popular Foster Parent Training Programs.** In a systematic review, Puddy and Jackson (2003) found that one of the most often used training programs, Model Approach to Partnerships in Parenting/Group Preparation and Selection (MAPP/GPS), is ineffective at best. This training has no empirical justification for its assumptions, components, or methods. Overall, the study found the MAPP/GPS training program does not adequately prepare foster parents for their upcoming challenges; thus, the training program might be problematic as it puts foster parents and foster children in a position of limited, ineffective support (Puddy & Jackson, 2003).

Next Vanschoonlandt and colleagues (2012) explored the effectiveness of another popular foster parent training program called Keeping Foster and Kin Parents Supported and Trained (KEEP). Upon review, they found that this training program was not very effective.

Despite its claims, the KEEP training did not show a decrease in the problematic behaviours for children in care. The study found that KEEP is ineffective because it does not have the cognitive-behavioural theoretical foundation that has shown to change problematic behaviour in children (Vanschoonlandt et al., 2012).

**Lack of Theoretical Basis in Foster Parent Training Programs.** Among the literature are some suggestions for future trainings to have certain theoretical foundations. Perhaps unsurprisingly, these recommendations include attachment theory (Tucker & MacKenzie, 2012); and developmental theory (Dozier et al., 2002). These recommendations appear to be sound; however, there are noted issues. First, there appears to be contrasting suggestions for theoretical foundations. Indeed, some studies suggested that attachment-based foster parent training programs are problematic because there is little empirical evidence shown. Instead, these programs provide psychoeducation, but do not equip foster parents with the necessary practical skills. Limiting a foster parent training program to attachment theory would not be considered a holistic strategy (Vanschoonlandt et al., 2012).

Second, there are very limited positive evaluations for foster parent training programs that are grounded in either of these theories (Benesh & Cui, 2017; Hebert & Kulkin, 2018). Along the same lines, some training programs have been adapted in order to fit foster parents' needs; thus, impacting the program's fidelity (Vanschoonlandt et al., 2012). Lastly, the program evaluations that have taken place have problematic limitations, including small sample sizes, sole utilization of self-report measures, and an overall lack of longitudinal studies (Benesh & Cui, 2017; Conn et al., 2018; Solomon et al., 2017).

**Promising Theoretical Foundations.** Although it is clear there are problematic foster parent training programs, there are some noted hopeful options. One paper examining the perspectives

of foster youth and their experiences of placement breakdowns suggests the standpoint theory be used in trainings (Unrau, 2007). Standpoint theory is a branch of feminism that explores different perspectives of the same event. For instance, putting more of an emphasis on the perspectives of the child in care, the foster parent(s), and the natural parent(s). In a training, this could significantly enhance a level of understanding that is too often overlooked in the larger system (Unrau, 2007).

Another study evaluated the Incredible Years program (IY); a foster parent training program grounded in social learning theory. Conn and colleagues (2018) found inconclusive findings due to a small sample size; however, the paper posits that child outcomes in foster care are best understood from a social learning theory perspective. In particular, one that considers the relationship between the caregiver and child in care as critical components. Furthermore, the paper argues that perhaps foster parent training programs have not been successful because they do not address all of the critical attributes that foster parents need in order to be successful. These attributes include having great emotional capacity, strong parenting skills within a stressful environment, and interpersonal skills to manage parenting challenges. Therefore, this paper found that foster parents will be more successful if the training is grounded in a social learning theory (Conn et al., 2018).

In addition, the Circles of Security Parent Training (COS-P) training is another promising training program with a strong theoretical foundation. The program is grounded in attachment theory, which is incredibly relevant to the complex challenges related to foster children. Although the inaugural study did not yield all positive results for foster parents, future studies can highlight the differences in attachment styles foster children may have, and the reasons for

those differences, including an increased number of placement breakdowns, maltreatment, and abuse (Krishnamoorthy et al., 2020).

**Lack of Culturally Appropriate Training and Support.** Although Manitoba's *Child and Family Services Act* specifically states that all four authorities must ensure resources and placements are culturally appropriate for children in care, the majority of foster parents in Manitoba are non-Indigenous, caring for Indigenous children (Auditor General Manitoba, 2019). Because Canadian provinces borrow training programs from the United States, the context of Canadian Indigenous people, intergenerational trauma, residential schooling, the 60's scoop, and other important historical events are not described or discussed in any training. Although the Métis Authority has made mention of a culturally appropriate training that will be developed for their foster parents, currently this is not available (Auditor General Manitoba, 2019). In a survey for Manitoba's foster parents, less than half agreed that training sessions put on by their agencies met their scheduling needs. Further, many foster parents provided comments suggesting training that they would like to see offered, including training to better meet the needs of their foster child's cultural needs (Auditor General of Manitoba, 2019).

### ***Recommendations and Implications for Future Research***

Most of the recommendations and implications for future research focused on maintaining placement stability within the foster care system. This included a recommendation for an increase in longitudinal studies to determine important predictors of placement stability. It appears that placement changes are often at risk around the six-month mark; therefore, efforts to increase stability during this time is critical in order to maximize placement stability (Connell et al., 2006). Another recommendation for placement stability is to increase kinship homes by providing additional support to biological family options. Along the same lines, taking time to

find homes that have the ability to care for siblings together has been shown to increase stability (Jedwab et al., 2019; Waid et al., 2016).

Other recommendations and implications for future research focused on foster parent interventions and trainings to help them cope with children's behavioural problems. For instance, there were significant recommendations to mandate training for foster parents (Conn et al., 2018; Hebert & Kulkin, 2018; Puddy & Jackson, 2003; Strickler et al., 2018). Pre-service training programs for foster parents are justified because it would likely equip caregivers with the skills necessary to maintain long term placements (Vanschoonlandt et al., 2012). However, as previously mentioned, there are notable gaps and problematic programs that are currently implemented.

Lastly, some implications for future research helped illuminate the current gaps in the literature. First, more research was recommended to explore children who have experienced multiple placement breakdowns, as these children are most likely to fall through the cracks of a system already in crisis (Aslamazova et al., 2019). Similarly, another area of future research could explore the experiences of youth who are not placed with a sibling and are not in kinship care. Findings suggest these children are most at risk of placement instability and likely require additional specialized supports and services (Waid et al., 2016). Perhaps an overlooked area that Aslamazova and colleagues (2019) recommend for future research is to focus on factors that increase the chances of foster care success. Indeed, the literature is filled with the potential risk factors associated with placement instability, but little is known about what makes foster placements successful.

## **Limitations of the Current Body of Literature**

When reviewing the literature on pre-training foster care programs, I noted four major limitations. First, the literature on foster parent training programs provides a limited scope of the in-depth experiences and thoughts of those who are directly involved. Indeed, there are very few qualitative studies that consider the perspectives of child welfare professionals, foster parents, and youth who grew up in care. Instead, most articles are quantitative in nature, relying on large databases managed by child protective service agencies. Noted issues with this strategy include incomplete or inconsistent reporting, which may confound the results. And a heavy reliance on numbers instead of hearing the voices of those who are impacted by child protective services.

Second, the data gathered about the foster child was done so by foster parents, which is highly subjective (Aslamazova et al., 2019). Information about the children's traumatic experiences were relayed directly from the foster parents. The experiences, observations, and reports from foster parents might vary and differ greatly from expert evaluations, including social workers, case managers, therapists, and other support staff (Aslamazova et al., 2019).

Third, there was virtually no mention of any training that specifically focused on enhancing foster parents' cultural competence. It has been well-documented that many racialized minorities are overrepresented in the child welfare system. This includes an overrepresented number of Black/African Americans, Latinos, and Indigenous children in the United States who are in foster care (Hanna et al., 2017). One qualitative study found that People of Colour feel the system is not culturally responsive, is laden with systemic racism, has a lack of bilingual workers, and does not address cultural or historical barriers (Hanna et al., 2017). Despite Manitoba's overrepresentation of racial minority children in care being much higher than the

United States, there is no cultural-based training for foster parents, which is a large gap in service.

Lastly, most of the literature is completed in the United States, Australia, and Europe, with few studies taking place here in Canada. This becomes problematic when Canadian provinces adopt programs and services that are developed in the United States. Managing the different contexts while attempting to maintain the fidelity of the program can be a challenge (Festinger & Baker, 2013). In addition, Manitoba has specific and unique challenges that will not be addressed in a generic program that was developed in a different country. These include the high number of Indigenous children in care, the four authorities that have varying expectations for their foster parents, and the incredibly high rate of children in care requires Manitoba to license more foster parents than most jurisdictions.

### **Concluding Thoughts about the Literature**

The current research on foster care placement breakdowns can help identify critical risks that may predict future instability. Many of the research articles pointed to the devastating psychological harms that children in care experience when they move to another foster home. In order to prevent future harm for children in care, it is critical to mandate standardized training and intervention programs for foster parents. This will not only help maintain the placement; it can also strengthen the relationship between the foster parent and child. Along with training, it is clear the research indicates that more support and services are needed to help support foster children with high needs. Lastly, from a strength-based perspective, it is necessary to further explore the factors that help contribute to the successes in foster care.

### **Chapter 3: Theoretical Framework and Research Design**

The goal of the research study was to explore the need for a pre-service training program among Manitoba's foster parents. This training program could potentially prevent placement breakdowns, promoting better outcomes for children in care.

#### **Guiding Theoretical Frameworks**

Two theoretical approaches guided the research: critical theory and standpoint theory.

##### ***Critical Theory***

The use of a critical theory approach in qualitative research allows for the questioning of long-standing, foundational assumptions of seemingly democratic and "free" societies, including Canada (Kincheloe & McLaren, 2011). Critical theory was developed in the Frankfurt School; some early theorists include Horkheimer, Marcuse, and Adorno (Lietz, 2009). It is informed by other post-discourse theories, including postmodernism, feminism, and poststructuralism. By shining light on the "winners" and "losers" of policy decisions and social arrangements, critical theorists work against the privileged who are motivated to maintain the status quo (Kincheloe & McLaren, 2011). In child welfare, those who are often "losers" of policy and social standing include racialized minority children, mothers, and families (especially First Peoples). As previously stated, in Manitoba, approximately 90% of children in care are Indigenous (Office of the Children's Advocate, 2016).

With an objective to disrupt the status quo, critical researchers study the many ways in which some identities hold privilege over others based on race, sexuality, gender, and socioeconomic class (Kincheloe & McLaren, 2011). In the case of child welfare, there are several groups of people who have less power. These include mothers, Indigenous children and

their families and other racialized minorities whose children are disproportionately taken into care (Blackstock, 2011; Hanna et al., 2017); foster parents who lack the necessary training, information, and resources to perform their jobs well (Cooley & Petren, 2011); and front-line workers who have little time to engage with families and are often powerless against their prescriptive roles, rigid and arbitrary rules, and policy directives (Lietz, 2009).

Those who subscribe to critical theory wish to promote autonomy for individuals and groups who are oppressed by exposing the forces that prevent such empowerment from taking place (Kincheloe & McLaren, 2011). As such, a goal of the study was to learn from the groups of people who have been systemically oppressed to better understand their experiences and the consequences of the dramatic power differences in the child welfare system. Perhaps exposing some of these power differences can help promote equity, which would include adequately training and preparing foster parents for their challenging careers. Providing the necessary foundational knowledge for our foster parents would be considered a productive aspect of power by a critical researcher, as it has an ability to empower, and engage marginalized populations (Kincheloe & McLaren, 2011).

Critical theorists are directly opposed to technical rationality. Rationalistic researchers tend to focus more on issues of procedure and choosing the “correct” method or technique. Consequently, the actual affect it may have on human beings is lost. Instead of focusing on answering the “how”, rationalistic researchers tend to ask, “why should” (Kincheloe & McLaren, 2011). Indeed, it could be argued that for too long the child welfare system in Manitoba has not asked *how* can we ensure our foster parents are adequately trained, or even *how* can we provide the best possible care for children, or *how* can we prevent placement breakdowns for the children in care?

Perhaps most in line with social work, critical theory advocates for social action known as “praxis.” Along the same lines as asking “how”, critical researchers not only consider the ways in which our social systems are set up to fail its oppressed and marginalized populations, they also work to act on this to create change (Lietz, 2009). Along with social action, critical theory also places a high value on the reflection process. This is also in line with what is referred to in social work as reflexivity. This ongoing process is meant to remind us, as researchers and social workers, that our experiences are unique and not everyone shares them. As such, we must continually question our interpretations of our own assumptions, beliefs, and actions (Lietz, 2009).

Along the same lines, when interpreting the collected data from the participants, it is important for the critical researcher to understand that there is only interpretation (Lietz, 2009). Indeed, regardless of how clear the facts appear to speak for themselves, critical researchers adopt the critical hermeneutic tradition. This refers to the notion that in qualitative research, there are no truths, and only interpretation. In my research, I sought to go beyond interpretation and towards a holistic understanding, as this is a fundamental element of human existence. In addition, a full understanding of others’ lived experiences is critical to promote knowledge production and take the necessary action (Kincheloe & McLaren, 2011; Lietz, 2009).

### ***Standpoint Theory***

Standpoint theory was developed by Sandra Harding and is deeply grounded in feminism (Rolin, 2009). Standpoint theory posits that those who hold less privilege have a better understanding of social reality. Harding (as cited in Rolin, 2009) argues that those who are underprivileged likely have an impartial and undistorted view of the world. This idea has also been coined as an epistemic advantage (Rolin, 2009). The use of standpoint theory to guide the

development of a pre-service training program for foster parents would be ideal. Doing so would prioritize the perspectives of the child in care, the foster parent(s), and the natural parent(s), which would increase the level of understanding for the training participants (Unrau, 2007). It is important to note that this has sometimes been confused with the notion of essentialism. For instance, assuming all foster parents or all front-line workers share the same perspectives. This of course, is not the case, and instead, the epistemic advantage implies that some particular social locations and standpoints allow for a better understanding of social reality (Rolin, 2009).

According to standpoint theory then, in order to gain a richer understanding of child welfare, a critical step would be to begin with participants who are unprivileged (Rolin, 2009). The unprivileged groups in child welfare include children in care and their families, front-line child welfare professionals, and foster parents. By focusing my research on these particular groups, this process will enable some hidden aspects of the social relationships and power dynamics that may not be articulated from privileged child welfare groups. For instance, children aging out of care who are interviewed are not likely to be concerned about political acumen, professional roles, lawsuits, or particular rules to be followed (Unrau, 2007). Indeed, in order to shine light on the systemic issues in child welfare, it is necessary to ascertain the standpoints of all who are affected by the top-down policy directives. Unfortunately, in previous research focusing on child welfare, it appears unprivileged groups are often left out (Unrau, 2007).

In fact, one study found that the majority of research studies completed in Europe, the United States, Canada, and Australia did not consider the standpoints of front-line child welfare professionals, foster parents, foster children, or their natural families. The few studies that did consider the standpoint of children and other unprivileged groups proved to be compelling. This

research included valuable insights and experiences related to placement breakdowns that could help inform policy (Unrau, 2007).

Instead of considering the standpoints of those who are most affected by child welfare policies, most research in child welfare relies on digitized case records (Unrau, 2007). This strategy is problematic because quantitative data without a voice behind the numbers does not articulate the lived experiences of those who are unprivileged in the child welfare system. In addition, it is often the case that there is no follow up behind the data, which can be inputted inconsistently and inaccurately (Unrau, 2007). As such, in order to provide a solid understanding that will inform policy, it is necessary for critical researchers to consider the standpoints of those relevant individuals and groups who might be unprivileged.

## **Methodology**

### ***My Role as Researcher***

As previously stated, when I discussed my social location, I am a foster parent of European ancestry who is currently raising Indigenous children. My experience as a foster parent provided benefits for my research study. This included the ability to relate and empathize with other foster parents and child welfare professionals. Perhaps it made difficult conversations slightly more comfortable for participants, knowing that the interviewer has a unique understanding of their life experience. At the same time, other participants may have found my role as a foster parent difficult to accept. For instance, former children in care may have had negative experiences with their former foster parents and it is possible they viewed me in a similar light. As such, I approached these potential situations with gentle understanding.

Further, it is because I am a foster parent that I am engaging in this research, it is the reason I am in graduate school. I recognize that the high degree of passion and drive I have for

improving the quality of training for foster parents in Manitoba, and I acknowledge that my beliefs may not be shared by all. In addition, this passion may create bias; thus, I practiced reflexivity to uncover any bias that may have been present during all stages of this study (Creswell & Creswell, 2018; Patton, 2012).

### ***Mainstream Qualitative Research Design***

I chose to adopt a generic or “mainstream” approach to qualitative research. The mainstream qualitative approach is research that is not guided by a particular or established theory, such as phenomenology, grounded theory, or ethnography for example. Such an approach is used primarily because of its flexibility and feasibility (Marshall & Rossman, 1989). The mainstream approach allows the researcher to design the research as it evolves, while utilizing various strategies to fit with the logic of the specific inquiry (Marshall & Rossman, 1989). Feasibility issues such as the constraints and limited financial resources also made the mainstream approach an attractive option. It has also been an approach used within the field of social work research (Tutty et al., 1996).

With regard to the research design, the aim of studies that adopt mainstream approaches is to explore how individuals interpret their experiences and the world around them (Kahlke, 2014). As such, the research design of these studies is constructed “from the ground up,” and is highly inductive with the use of open codes, categories, and themes being the most common uses of analysis. Further, the mainstream qualitative research design focuses on drawing on the experiences of the participants. In addition, these qualitative research designs encourage the triangulation of data, using multiple different sources in order to grasp the larger perspective (Kahlke, 2014).

The major critique of the mainstream or generic qualitative research design is that the lack of theory will impede a well thought through research method. However, despite this claim, the mainstream approach requires attentiveness to “methodological congruence” - the logical and obvious linkages between the research questions, methodological choices, and the research methods (Kahlke, 2014). There are several advantages to the mainstream approaches, which include having unlimited theoretical perspectives, having the questions drive the methodology instead of the other way around, and the ability to think in new ways (Kahlke, 2014).

### ***Data Collection Procedures***

**Participation Engagement and Recruitment.** A total of 13 individuals participated in the study. Of the 13 participants, six were foster parents. The participants were recruited from Child and Family Services Authorities, as well as specialized agencies including Knowles Centre. All participants were licensed foster parents in Manitoba for at least three years and have at least one child in care in their home. Next, I interviewed four child welfare professionals. I recruited the child welfare participants from the four Child and Family Services Authorities. All participants recruited had a minimum of three years’ direct front-line child welfare experience with both children in care and foster parents. Finally, three young adults (i.e., at least 18 years of age) who had been children in care were recruited from Child and Family Services Authorities and VOICES, which is an advocacy group for children in care. Participants in this group spent some of their childhood in care and were over the age of 18 at the time of the interview. A \$40 honorarium was given to participants who are foster parents and young adults who have aged out of care.

### ***Participant Demographics and Background***

**Foster Parents.** Of the six foster parents interviewed, almost all identified as female (n=5). The average length of their foster care experience was just over four years, and all had been fostering at least one child in care when I interviewed them. Each participant either had one (n=4) or two (n=2) foster children in their home at the time of the interview (i.e., none had more than three). Most of the foster parents were partnered (n=4) and living with their partners. All participants fostered children who were Indigenous. Three of the participants lived in rural settings, two lived in urban settings, and one in a more remote setting.

Most of the foster parents had birth children in addition to foster children (n=5). Some participants had adult age children who were no longer living in the home (n=2); and some had younger birth children who were still living in the home (n=3). Of the six participants, two had relevant education and training that would be helpful when it comes to caring for children in foster care (e.g., Health Care Aid Certificate, Family Social Science Degree). In addition, two participants had relevant foster care experience (e.g., Training Coordinator in a group home, birth child with same disability as foster child). Finally, two foster parent participants had no relevant training/education or experience that would be helpful as a foster parent. It is important to note that many of the foster parent were specialized caregivers. This includes fostering children with complex medical needs (n=2); fostering children who were under two years old with a goal for reunification (n=1); kinship foster parents (n=1); foster parents who care for children with complex needs (n=1); as well as foster parents who are dedicated to emergency placements (n=1).

Each foster parent was asked about their motivation to become a foster parent. Responses ranged from participants who knew a loved one who was a foster parent (n=2); others had

previous experience in child welfare (n=3); one participant indicated she could not have biological children; and perhaps most inspiring, three participants stated that either they or a loved one was in foster care as a child. All foster parents identified a shared goal of wanting to improve the lives of children in care.

**Child Welfare Professionals.** Most of the four child welfare professional participants interviewed were female (n=3). The average length of tenure was 14 years, with the range being 3.5 years to 26.5 years. Two participants covered rural areas and two participants covered urban centers. Three of the four participants specialize in permanency planning; meaning that their focus is working with children who are permanent wards. It is important to note that when asked about why they chose a career in child welfare, all four participants stated they were reluctant to join this work. Two participants described the opportunities in child welfare as the reason for staying. Most participants spent their entire social work career in child welfare (n=3).

**Previous Children in Foster Care.** All three of the previous children in care I interviewed are female. The number of years spent in care between the three participants ranged from two to 17 years. All participants live in Manitoba, in rural (n=1); urban (n=1); and suburban (n=1) locations. All three participants experienced living in a foster home placement throughout their experience in child welfare. In addition, some participants also experienced living in a group home setting (n=2); an emergency shelter placement (n=1); and independent living (n=1). Two participants lived in over 10 placements, and one lived in three different placements. It is important to note that none of the participants graduated high school on time; however, two of the participants went back to school as adults. One participant became pregnant before the age of 18. Two participants described using drugs and alcohol prior to the age of 18 to cope with their time as foster children.

### ***Data Collection Types and Recording Procedures***

**One-to-one semi-structured interviews.** The semi-structured interview is a useful option for this particular research for several reasons. First, it allows the interviewer to have a pre-determined list of questions to refer to. These questions are open-ended to ensure consistency across interviews but also allow for unanticipated responses (Grinnell et al., 2016). In addition to the open-ended questions, this research used a Likert-scale approach to determine how prepared the foster parent participant group felt when they first became foster parents. The question was phrased as such, *“on a scale of one to five, one being not at all prepared, three being somewhat prepared, and five being very prepared, how prepared did you feel when interacting with the child’s birth family?”* This gave the respondent an opportunity to state a concrete number, and then expand on their thoughts.

Next, although there is a list of questions, this semi-structured environment allows for the interviewer to ask follow-up questions that may come up. Therefore, this approach provides structure for the interviewer based on the set of basic questions, but also allows for freedom to explore for more details upon an interesting or novel response (Grinnell et al., 2016). In addition, it is important to note that prior to the questions being asked, in keeping with the trauma-informed approach, it is necessary to allow time for introductions of both the interviewer and interviewee (Roche, et al., 2020).

Another interesting dynamic that is created in the semi-structured interview is allowing the personal factor to emerge. Patton (2012) states that the personal factor emerges when it is clear the individual being interviewed genuinely and personally cares about the subject material. These participants are enthusiastic, committed, and determined to see change or to speak to their relevant experiences. Due to COVID-19 precautions, all semi-structured interviews took place

via telephone. Please see Appendix A, B, and C for interview questions for foster parents, child welfare professionals, and young adults who grew up in foster care.

### ***Data Analysis Procedures***

Mainstream or generic qualitative data analysis procedures was used in this study, including first and second level coding, constant comparison, and thematic analysis (Patton, 2012). The data analysis in this study included several steps. First, I organized and prepared the data for analysis. This included transcribing the interviews verbatim and typing up observational field notes. This allowed me to immerse myself further in the data. Then, I read over all the data. This important step provided a sense of the overall meaning of the data. For instance, it clarified what the overall impression of the foster parent training experiences in Manitoba. I then began the preliminary coding process, which involved compiling the data into similar categories (i.e., first-level coding). These categories were then compared and reorganized (second-level coding) (Creswell & Creswell, 2018). Next, I generated larger themes or categories (thematic analysis), which was the major findings of the research. These themes represented all perspectives of the participants, including previous children in care, foster parents, and child welfare professionals. I represented the themes with multiple direct participant quotes. These quotes provided a narrative representation directly from the participants.

### ***Strategies to Enhance Rigor***

Strategies to enhance rigor in a generic qualitative study include addressing personal biases, taking notes during the data analysis process, ensuring a detailed reporting of the research procedures, and ensuring the accurate interpretation of participants' experiences (Kennedy, 2016). During the data collection and analysis processes, I took notes during the interviews that

included questions to follow up on and possible emerging themes. To enhance these strategies, I communicated regularly with my advisor to discuss my coding and data analysis to ensure that I followed rigorous data analysis techniques.

### **Ethical and Cultural Considerations**

Before commencing the study, I obtained approval from the Fort Garry Research Ethics Board at the University of Manitoba (see Appendix E for Approval Certificate).

#### ***Address Power Relations***

There are multiple ethical considerations I reflected on during the research study. First and foremost, it was necessary to recognize and address power relations (Creswell & Creswell, 2018; Morris, 2006). As my self-reflection section indicates, I have privilege that some of the individuals participating in my study may not have. As the researcher in this study, I encouraged the participants to provide any questions or information that may be missing, as this process allowed for teaching-learning for everyone involved (Morris, 2006).

#### ***Informed Consent***

Informed consent is the process of ensuring that all potential participants will have a full understanding of what is going to take place in the research study, and what their role is (Grinnell et al., 2016). The consent form was written in clear, plain language and included the purpose of the study, as well as their individual rights as voluntary participants. Furthermore, informed consent reassured the potential participants that there is no deception taking place throughout the study (Creswell & Creswell, 2018).

### ***Opportunity to Debrief***

It is well known that there are oppressive practices and ongoing conflict taking place in the child welfare system. The individuals who participated in the study are those who are heavily involved in this system; therefore, may have emotional responses. A plan was in place for those who may need to debrief as a result of emotional responses and potential conflict. The debriefing plan for this research study included several resources and services that could provide the necessary and appropriate support.

For mental health support, participants were encouraged to access a crisis line operated by Klinik or access a peer support line at the Kinship and Foster Family Network of Manitoba. Next, for those participants who were feeling the need to advocate or obtain more information about the child welfare system in Manitoba, several organizations' contact information were provided. These include The Manitoba Advocate for Children and Youth and Fearless R2W. Last, participants who were previous children in care (or those who know previous children in care) and need access to resources, they were provided with the VOICES contact information.

### ***Responsibility to Diversity***

As previously mentioned, there is a significant overrepresentation of Indigenous children and youth in care. It would be irresponsible as a researcher to not ethically consider how to engage in participant diversity. This includes Black, Indigenous, and People of Colour (BIPOC), as well as a diversity in appearances, abilities, age, gender, histories, and ethnicity (Morris, 2006). Encouraging this diversity facilitated a rich diversity in perspectives. Because of the overrepresentation of Indigenous children in care (as noted earlier), I elected to have the majority of the previous children in care participants that identify as Indigenous.

### ***Confidentiality and Privacy***

The participants remained confidential throughout all stages of the research study (Creswell & Creswell, 2018). De-identifying numbers were given to each participant to organize the data, but to not expose individual participants. Furthermore, the study avoided collecting harmful information. For example, if a participant disclosed personal and intimate information during an interview, this was not included in the reported data.

## Chapter 4: Results

The information collected for the research focused on the training needs of foster parents to improve the stability of foster care placements. The findings of the study relate to several main areas: 1) previous training experience; 2) preparation to foster; 3) a lack of support for foster parents; 4) placement breakdowns; and 5) foster parent training recommendations. The study findings are presented below.

### Previous Training Experience

The three participant groups were asked several questions pertaining to previous foster parent training. Their responses highlight several problematic issues pertaining to foster parent training experience and opportunities. This theme is broken down into several sub-themes: 1) lack of pre-service training; 2) barriers and obstacles to training; and 3) training gaps. A fourth sub-theme related to positive training experiences was also identified.

#### *Lack of Pre-Service Training*

Foster parent participants were asked whether they received any pre-service training prior to becoming licensed and beginning their foster parent journeys. Of the six participants interviewed, none of the foster parents received any pre-service training. Foster Parent Participant #1 stated, *“They never offered me anything.”* Foster Parent Participant #2 noted that her previous work and life experience had provided her with some relevant training, which she considered an advantage, *“I was just lucky that I came in and I had already got a little bit of cultural training.”* Two foster parents did note they had attended an “orientation session”; however, no meaningful training was provided. Instead, the session focused solely on how to complete foster care system paperwork. When asked about pre-service training, Foster Parent

Participant #2 stated, *“All they did was come to my house and did a walk through to make sure we had running water and lights.”*

The child welfare professionals who participated in the interviews were also asked whether they provided a pre-service training program for foster parents. One participant stated they did not know, while three others said they provide an orientation session similar to an interview to assess the potential skills of the foster parent but involved no training. One participant acknowledged the limitations of their orientation sessions, stating, *“The content that an orientation provides isn’t holistic... and I’m not sure that they always remember what they heard in orientation.”* (Child Welfare Participant #3)

Another child welfare professional noted they do not offer many meaningful in-house training options; however, foster parents are required to have some training prior to becoming licensed, including CPR First Aid, Non-Violence Crisis Intervention, and Applied Suicide Intervention Skills Training. Additionally, Child Welfare Participant #4 said:

So often the training expectations comes after the placement. A lot of our homes are places of safety where it’s with a family member. So, there’s no training. The kids are placed there, and they may have some expectations in regard to licensing.

Not surprisingly, many of the foster care participants felt they were not prepared for their foster parent journeys to begin and sought out training opportunities themselves. Foster Parent Participant #4 stated, *“Well, it was never a requirement, but I did. I did go to a couple of courses after I was licensed. There’s a couple more around child welfare legislation and the rights of the foster parents.”* Similarly, Foster Parent Participant #3 noted, *“we of course did the orientation sessions before becoming foster parents. Those are the ones required by Winnipeg CFS as part of their process. And then after that, all the training we’ve taken has been voluntary.”*

Furthermore, all four of the child welfare professionals noted the need for new foster parents to become licensed, which leaves little time for training prior to receiving placements.

Child Welfare Professional #2 stated:

Many of our placements are urgent. They're emergency placements, or there's not a lot of prep work that we're able to put in because the placement is needed yesterday. So, you know, sometimes kids get put into homes where they kind of meet on paper all the requirements, but they aren't necessarily ready to meet the kids' needs, and the kids aren't necessarily ready to be with that family. So, it's kind of, you're expecting people to kind of just make it work and that's not always fair.

Along with the foster parent and child welfare participants, previous children in care participants were asked whether their foster parents ever discussed pre-service training. One participant described how she remains in contact with her previous foster parents and discussed how they received no training. The other two participants were not sure if any of their foster parents received pre-service training (again, likely because they would not have been privy to this kind of information while in care). However, previous Child in Care Participant #1 reflected:

I don't think so. Foster parent-wise, I don't think they had any training. But for group home staff, there were always new trainings going on, but a lot of the group home workers in shelters and stuff are like fresh out of their program and are just thrown into the mix of things.

It is important to note that when asked, all 13 participants indicated they would support the development of a mandatory, pre-service foster parent training program in the province.

### ***Lack of Training Opportunities***

When asked about their own training experiences, almost all of the foster parents (n=5) described how few training opportunities were provided to them during their entire tenure as foster parents.

Foster Parent Participant #1 stated:

They very seldom offer it to be honest. Out of all of the years that I have worked with foster parents, I think I can recall three or four times that a foster parent has had an opportunity to go to a training.

Other foster parents concurred, Foster Parent Participant #2 stating, *“I would just say that there isn’t any, or not that I have been made aware of.”* Another participant discussed her desire to attend ongoing training opportunities; however, her agency did not provide any information.

Participant #3 described, *“I would say that the lion’s breath of that has been going out and seeking training on my own.”*

In addition to foster parents, child welfare professional participants also noted a lack of options for training. For instance, one child welfare participant noted:

The training opportunities may not always be relevant to what is going on in the home at that moment. So, what might be available at that time might not be relevant, so they don’t send the parents to training. You know, we might have really good trainings that are offered once or twice a year, but if they don’t take it when they’re available, then there’s no other opportunity to take it again when they might need it.

Another participant reflected similarly, *“I’ve definitely had some newer foster parents that really, I felt were kind of ill-equipped to understand our kids with trauma. And with, you know, mental health and all the problems our kids come with.”* (Child Welfare Professional #3)

Lastly, previous children in care participants were asked what they would change to improve the child welfare system. All three participants noted that while in care, their foster

parents did not understand their needs, and believed their outcomes could have been improved if foster parents had better access to training. One participant stated:

More people need to be trained in how to harvest empathy because everybody has that ability, some more than others. And I think that needs to happen for people to be better trained. Is we all need to consider how we say things and then how we say things needs to be applied to our actions (Child in Care Participant #2).

### ***Barriers and Obstacles to Foster Parent Training***

When asked to identify barriers to foster parent training, all three participant groups identified multiple obstacles. Two major challenges being a lack of childcare or respite to attend trainings, and limited awareness of training opportunities.

**Lack of Child Care to Attend Training.** Along with a lack of ongoing training opportunities, all the foster parents described securing childcare as a significant obstacle to attending in-person training. Foster Parent Participant #4, who cares for infants stated, “*So, If I had a newborn, it's hard to get away for training.*” Another foster parent recognized the challenge of foster parents securing respite options to attend training, and suggested:

There needs to be some sort of childcare provided. And I know that there's all these sorts of liability issues and whatever, I don't care! Figure it out! Because that is one of the main issues that people have going to training, because they're trying to figure out some kind of respite situation because they make it so hard to leave anyone with your kids in the first place. (Foster Parent Participant #3)

**Limited Awareness of Training Opportunities.** Another barrier to accessing training is the limited awareness of existing training options. The foster parents and child welfare professional participants were asked if they were aware of any agency or organization in Manitoba that

provided foster parent information and training sessions. As example, only two foster parents, and one child welfare professional were aware of The Kinship & Foster Family Network of Manitoba (KFFNM), a program funded by the Province of Manitoba to assist foster parents with training, guidance, assistance, and advocacy to enhance their capacities, knowledge, and skills to provide quality care.

Child Welfare Professional #4 stated:

Yeah, well, I don't feel like the foster care workers know what's out there either because I was telling somebody recently about South Winnipeg because they were running a group coming up. So, I've always been on their mailing list and they did get some really good crowds. Recently, and they're running several, they're running like a parent team program right now to help you understand the teenage years, and I think a lot of people need that. The foster worker said, 'wow, OK, well that's good to know.' Like the foster workers don't even always know what training is going on, even the ones that are funded and free. So, there needs to be more awareness.

**Other Obstacles to Attend Training.** Lastly, there were several other challenges to access training that foster parents and child welfare professionals identified. These include the lack of flexibility in the training times (n=5); trainings not relevant to the participant (n=4); lack of mandatory training for foster parents (n=6); and inaccessibility for rural participants to access training (n=4). In addition to identifying several obstacles to training, the participants also noted significant training gaps.

### ***Training Gaps***

Several themes emerged when participants were asked about the gaps in foster parent training. These include a lack of 1) culturally-responsive training; 2) practical skills development training opportunities; and 3) policy and procedural training.

**Lack of Culturally-Responsive Training.** Indeed, the most often cited training gap had to do with culturally-responsive training. Despite Manitoba having an overrepresentation of Indigenous children in foster care, most of the foster parents (n=5) interviewed were not offered any training about fostering Indigenous children. The one foster parent who did receive some training stated, *“I did a little bit of what is the point of having Indigenous agencies and about the 60’s scoop and stuff at orientation. Other than that, no.”* (Foster Parent Participant #2). Other foster parents indicated they learned from previous foster experience about Indigenous ceremonies and other culturally relevant information. Foster Parent Participant #1 describes the devastating consequences of not adequately preparing foster parents to be culturally sensitive or safe:

The home that the child was placed in before me, they cut all of his hair off. And I was, very shocked and disheartened to find that out. So, I feel that there definitely needs to be some cultural training.

Another foster parent shares a similar experience:

Cultural things that I'm learning, like not cut their hair and keep the umbilical cord if it falls off because Indigenous [people] have a ceremony...I didn't find out any of this until it you know it's happening. So, I wish I would have known.

In addition, three out of four the child welfare professional participants recognized the lack of cultural awareness training as a notable gap in foster parent training. Child Welfare Professional Participant #2 stated, *“Is every child’s cultural needs being met? No way.”*

Furthermore, two of the participants who were previous children in care also identified a lack of cultural awareness as an issue in their foster homes. Previous Child in Care Participant #2 stated:

I had no cultural experiences that I'm aware of. I know the foster family that was most consistent, my foster mother, she was Black and Indigenous. She was coming from a good place and her intentions were good, but I don't know if she had the training necessary to deal with my case, or how I already was.

It is evident from these participant quotes that there are significant gaps exist in foster parent training opportunities on cultural safety and sensitivity, especially regarding Indigenous children in care.

**Lack of Practical Skills Development Training Opportunities.** Another notable gap identified in foster parent training experiences is the lack of training on practical foster parenting skills. Of the six foster parent participants interviewed, four identified a need for more in-depth solution- or strategy-oriented training opportunities. Foster Parent Participant #3 stated:

I think the biggest thing that is missing, is what do I actually do, day-to-day in my house as a caregiver? The nitty gritty... How do you respond... if they're older and they're sassing you? That really concrete piece. Hey, bedtime is not going well, what can I do to structure a better bedtime routine? Like that nitty gritty stuff that we as society likes to pretend, we just know what to do. Like that's what's missing most I think in foster parent training.

Similarly, Foster Parent Participant #1 stated the only practical application she received was on basic parenting "*There was one on positive parenting, 'don't hit your kids.'* So, that's kind of all

*that it was. I liked the term orientation instead of training because it was more information-based, and not skill development.*” Foster Parent Participant #3 movingly summed up the issue:

When you give kids to foster parents who don’t know what to do, this is exasperating all of the problems that they already came to you with. And then you send these kids back home with trauma who don’t know how to deal with their trauma. And that’s why we have such a horrible cycle of kids [coming into] care in Manitoba.

In addition, three of the four child welfare professionals identified the need for more practical training for foster parents. Two of the four participants suggested having a consultation format, where foster parents can attend a training and ask questions where they would receive practical answers from professionals and experts. Child Welfare Professional #1 stated, *“I think sometimes these trainings, they need to be more practical. Like, what do I do when... or who do I call?”*

Along with foster parents and child welfare professionals, previous children in care also noted a need for practical training. Previous Child in Care Participant #1 suggested:

Probably the biggest thing would be that every kid is different. So, training, going to a training will give you some skills but because every kid is different you don’t – not everything will apply to the same child. And I think, I’ve noticed more that a lot of teenagers, especially, are dealing with addictions or substance abuse, and that will play a factor into how they are, whatever their living arrangements are. And I think there needs to be more training... if you have a child in your care who is using substances, like what can you do to help them without pushing them further away?

**Lack of Policy and Procedural Training.** The last major training gap identified was the lack of policies and procedural training for foster parents. Many foster parents discussed the

challenges they faced when attempting to respond to the needs of children in care with little to no policy and procedural training. One Foster Parent Participant #1 stated:

There should be sit downs, even with a group, sit down with a social worker to go over procedures. Like, I know so many foster parents that don't know when you take your kid to the hospital, before they get discharged, that has to be approved by a social worker. And if foster parents don't know, then they aren't following the procedures. And you can't blame them because you never told them that was the procedure because there wasn't any training. Right?

Another foster parent described her feelings of insecurity because she was not trained on basic foster care procedures. Foster Parent Participant #3 stated, "*And then when we had been fostering for a little while, we realized that we didn't really know what we were doing. Or what rules we had to follow.*" The same foster parent also recognized the struggle of being a first-time parent, stating "*We don't have kids of our own, so I have skipped the baby stage and we went straight to parenting a 13-year-old and trying to navigate that. And different agencies do different things when it comes to kids.*"

Child welfare professionals also identified a need for a procedural training. Child Welfare Participant #3 stated, "[It should] *be focused on children in Manitoba, especially sort of orientation... specifically about... information about how our agencies, [and how it] fits into the larger welfare system.*" Furthermore, two other child welfare professionals discussed the need for foster parents to understand how to work "within the larger system."

Based on the findings of the interviews, it is clear there are multiple training gaps for foster parents in Manitoba. Despite the significant shortcomings of the training offered, foster

parents were asked if they could identify any training that has been impactful. Below are the responses provided.

### ***Positive Training Experiences***

When asked about positive training experiences, of the six foster parents interviewed, half identified positive training experiences, i.e., those that they perceived as effective. For example, three participants described training that provided an understanding of how CFS and other related systems work in Manitoba, along with the rules and regulations as the most impactful. Foster Parent Participant #3 reflects on a real-life parenting strategies training, and stated:

It was the most helpful in terms of, when a behaviour happens, how do I actually respond in a positive manner? Like, what are some phrases I actually can use? How do I actually try to figure out what is behind this behaviour so I can better meet their needs?

Indeed, only half of the participants received this type of training. Factors that would determine whether a foster parent completed a systems training include which agency the foster parent is associated with (some agencies provide in-house systems training, and others do not), and awareness of such training opportunity.

### ***Training Requested by Foster Parents***

It is important to note that some foster parents have requested different types of training; however, due to a lack of awareness or a lack of relevant training opportunities, these requests have been unmet. The requested trainings including practical training, policy and procedural training, and the real-life parenting strategies mentioned above.

In terms of child welfare professionals, Participant #4 stated, *“I think attending cultural training has been, and can be very sort of impactful for those families.”* Two other child welfare professional participants identified training on attachment theory as an effective training that they encourage foster parents to attend. Last, one previous child in care participant spoke about the benefit of having her previous foster parents culturally trained. Previous Child in Care Participant #2 reflected,

The [cultural] teachings... I honestly benefited from that kind of teaching and way of being. Versus what the CFS system was trying to impose, which was: don't tell them what's going on, and don't be honest to the kids about anything because they can't handle it.

It is important to note that although all three participant groups did recognize effective trainings, each group identified different subject material. Thus, suggesting the importance of having a variety of foster parent training opportunities.

### **Preparation to Foster**

Another major theme that arose from the interviews with the three participant groups was preparedness to foster. During the interviews, the foster parent participants were asked how prepared they felt in the beginning of their foster parenting career. According to all of them, they did not receive adequate training to prepare themselves to care for children with complex needs. Foster Parent Participant #4 reflected:

Normally I'd say around I would be prepared, but with the newborn suffering with addiction I was a little bit nervous because I've never had that before, so I was not prepared for that. I wasn't scared to do it, but I had never done it, so I didn't know what to expect. And I was not prepared to work with birth families at all. It was a

newborn baby, being apprehended without them having even getting to know the child. So, I was put in a very bad situation. Yeah, it wasn't made easy for me at all.

Child welfare professional participants were also asked if they thought foster parents were prepared to be successful caregivers. All four participants stated that foster parents are often not prepared to engage in fostering work. Child Welfare Professional Participant #2 emphatically stated:

No! Absolutely not. Many people come in with the idea that they want to give a loving and nurturing home to somebody. And maybe they've cared for their own children and had their own children grow up, and there are a lot who figure that it's a good way to be a stay-at-home parent.

When the foster care participants were asked what areas, they believed they were not prepared for, they noted several including: 1) engaging with the child's culture; 2) responding to the child's problematic behaviour; 3) adapting their parenting strategies; 4) advocating for the child in care; 5) interacting with the child's birth family; and 6) creating a support system for themselves. These sub-themes are discussed.

### ***Engaging with the Child's Culture***

When asked on a scale of one (not at all prepared) to five (very prepared) how prepared each foster parent participant was to engage with the child's culture, only one of the foster parent participants stated he felt "very prepared." However, he attributed this to his own upbringing in the Indigenous culture, not because of any training provided by CFS. Of the other five foster parent participants, two stated they were "somewhat prepared", and again they attributed this because their friends and family were knowledgeable and because of their own independent research on their foster child's cultural heritage.

Three participants stated they were “not prepared” to interact with their foster child’s culture. Foster Parent Participant #6 expressed her thoughts about cultural training, *“I feel like that is kind of the last thing I am worried about. To be honest, it kind of feels like the last thing the agency is worried about.”* Perhaps most troubling, after Foster Parent Participant #1 admitted not participating in cultural activities, she stated, *“my stepbrother kind of makes fun of [the culture], like when someone is upset, they will say, ‘the Native squad is on their way to come get you.’”*

Furthermore, the participants who were children in care were asked if their foster parents provided them with culturally diverse experiences. One participant stated that despite spending most of her childhood in care, she was never exposed to her Indigenous heritage or cultural practices. She reflected, *“I think, it was kind of talked about in some group homes or shelters, but nothing was ever done.”* Another said she thought the limited cultural exposure she received was largely generic and not encouraged. She stated:

I think that a lot of what agencies provide to foster families and most importantly to foster children, is lip service like we’ll do this one generic cultural event. And you can come if you want, and then we can say we did this and it’s just. I mean it’s not meeting any expectation.

The last participant remembered a very in-depth cultural experience while she spent time at a group home; however, limited cultural engagement in foster homes. She described her experiences:

[Name of Group Home] did for sure they had a cultural worker there. My parents, the ones who adopted me did, and we were connected through [Indigenous Organization], which helped families I guess who foster or adopt Indigenous children

reconnect with their culture. But for my other foster parents, or group homes, there wasn't a lot of it.

### ***Responding to Problematic Behaviour***

In terms of preparedness to foster, the foster parent participants were asked how prepared they were for responding to problematic behaviour in the beginning of their foster journeys. Of the six participants, most stated they were “very prepared” (n=4). Foster parents cited this confidence based on their previous education and experience working in relevant fields. Foster Parent Participant #2 stated, *“I definitely think there should be more than what there is because I haven't seen anything, and I mean, I am the unique scenario because I come into this with some training.”* The two foster parents who rated themselves as “not prepared” to respond to problematic behaviour did not have relevant experience that could help them adjust to their new roles. Foster Parent Participant #2 stated:

I feel like they don't prepare you for this like, literally my heart is breaking.

Combination of my heart is breaking, and I go through this broken heart at the same time, I am angry. And I had not expected that. Every time, my heart breaks hearing about their biological mom.

Both participants stated they feel more prepared now, and credited that to their experience, not any training. Foster Parent Participant #4 reflected, *“However, the most [effective preparation] would be the hands-on experiences with all the [children].”*

Child welfare professional participants were asked how well they believed foster parents can respond to problematic behaviours. Disturbingly, all participants stated that foster parents were ill-equipped to respond effectively. Child Welfare Participant #2 stated:

Loving somebody isn't enough. There's so much more than that, and you could give them everything. You know, what works for one child is not going to work for the next. That's where things break down, because people are just not able to know how to deal with some of the needs and behaviours.

In addition, Child Welfare Professional #1 stated:

Sometimes we have kids who can't always meet our expectations. I hate the word acting out, but if [the child's] behaviours have changed, looking at more *why* than treating the behaviour. This can be difficult for foster parents without that preventative knowledge or if preparation; in particular, for children who have complex needs.

When asked about the preparedness of foster parents, previous children in care stated their previous foster parents were not able to adequately respond to their behaviour. One participant reflected:

I was considered somebody who had behavioural issues. So, I was... institutionalized. The one thing that made me really angry was that people were deciding what was best for me without listening to me. I never wanted to take medication, but I was forced to be a legal drug addict and I was more angry about that... They need to try to find ways where people get a say with choices... with the pharmaceutical industry. So, if your kid doesn't want to be medicated, do not medicate them. If a kid is asking you, I don't want to be medicated, let's try something else. Listen to them and don't discard that. Because when you discard that, you're gonna deal with more crap (Previous Child in Care #2).

In addition, Previous Child in Care #1 described:

A lot of [my concern] had to do with safety. Because I had grown up for most of my younger childhood years in a middle class, like fairly protected family. I wasn't introduced to drugs I didn't really know what marijuana was until I was 13. So, I was fairly sheltered, and all of a sudden, I am in foster care and there's drugs, there's alcohol, there's fighting, there's all this stuff going on and I had no protection.

### *Adapting Parenting Strategies*

Similar to being able to respond to problematic behaviour, foster parent participants were also asked how prepared they felt as new foster parents when they had to adapt parenting strategies when their current strategies were not working. Importantly, most foster parents stated they were either “not prepared” or “somewhat prepared” (n=5). Foster Parent Participant #5 described the challenge, *“That's always a challenge... what your parents used, what you have used yourself and... you have to do things now in conjunction with social workers. Expectations are with schools, expectations with society... it's a lot more challenging.”*

Foster Parent Participant #3 reflected on her experience as a new foster parent:

I guess I felt somewhat prepared... It's that feeling that all of us get, when a kid gets dropped off at our house, and we kind of look around, and you're like, “you left a human with us, I don't know if you know us well enough for this.” Like, it just feels really sketchy.

Along the same lines as the previous questions, the two foster parents who stated they were comfortable adapting their parenting strategies were those who had previous experience. One participant credited her birth son who is diagnosed with autism, and the other credited her birth son who is diagnosed with down syndrome.

Foster Parent #2 stated:

Oh, very comfortable [responding to problematic behaviour]. And I still feel very comfortable with that... And that would be just my background with my son. And, these teens who can be troublesome, so I tell them, you have no idea what I have already parented.

Child welfare professional participants also noted the challenge of ensuring foster parents can adapt their parenting strategies. Child Welfare Professional Participant #2 stated:

Some foster parents who have been doing it for a long time aren't always in the know with the new strategies, and they kind of have that attitude that they know everything even though there's new information. So, some foster parents try to tell me that they don't need any more training.

### *Advocating for the Child in Care*

Next, the participants were asked about their ability to advocate for their foster children. This includes ensuring the child in care receives supports in school, is up to date with medical appointments, receives appropriate therapeutic care, and has access to engaging activities. Interestingly, almost all foster parent participants stated they were either "very prepared" (n=4); or "prepared". One foster parent said it was out of necessity, based on the unavailability of social workers and other supports, Foster Parent Participant #1 reflected, "*being an advocate and having to stand up and make sure my voice is heard in regard to him is definitely something that we're working on.*" Foster Parent Participant #6 articulated similarly:

I think there should be an advocacy course. For yourself as a parent as well as for the kids... regarding like what programs are out there for you or the parent and what programs are out there for the kids and how to navigate through the systems. When some social workers don't necessarily help you through that because unfortunately

there are a lot of social workers who are burnt out and just not on their 'A' game anymore.

Only one foster parent stated she was "not at all prepared" to advocate for her foster children because of her limited training, lack of previous experience, and lack of knowledge of the systems related to child welfare.

Along with foster parents, child welfare professional participants discussed the need for advocacy work. All four participants identified the challenges of the child welfare system, and the importance of foster parents to advocate for their foster children. However, they noted how difficult it was to do so. Child Welfare Professional Participant #4 suggested that it is far too much work to expect foster parents or child welfare professionals to be advocates; however, he described how some (American) jurisdictions are doing so.

In our department, we have 40 homes. And we're not on-call. I know in the United States, there is a model where every child in care has an advocate, where her job is to completely just challenge the system and support the child.

All of the previous children in care participants described experiencing little advocacy from their foster parents while in care. Previous Child in Care Participant #1 described how her greatest advocate was her therapist, and one staff member from a group home. She reflected, "*I think because of the connection that I made with a particular staff member, and then my therapist helped as well.*" Unfortunately, Participant #2 from the same group described how she was moved from home to home so often, that she did not feel she had anyone to advocate for her throughout much of her childhood. She described how she is able to cope with this:

I don't currently talk with any of my previous foster parents. I decided to close the chapters on those parts of my life experiences due to the fact that it's just like you

know people - everyone helps from the best of their ability from where they're at.

And then you just... it's OK to outgrow people you know.

### ***Interacting with the Child's Birth Family***

Next, the participant groups were asked how prepared they felt foster parents were to interact with the foster child's birth family. This question was the most unanimous in the participant's responses. First, all six of the foster parents stated they were "not at all" prepared to interact with the birth family. One participant described how she was required to go into the hospital birthing room and apprehend the newborn infant herself, despite several requests to have the social worker take that on. Not only was the foster parent not prepared for this experience, but it should never have been an expectation to begin with. Foster Parent Participant #4 stated, "I don't want that to happen again. I said the baby's worker should be here getting the baby and bring her down to me and I take her." The same participant described the event, including her terrible unease of removing the child:

I had to put the car seat up on the bed so I could take the baby and put her in. And then the worker and the nurse left the room to sign some more papers and I was in that room with the parents. I felt sick. It was terrible. I just wanted to crawl in a hole or leave. All I said was "Hi", and I told them my name. I said, "I'll be looking after your baby until you get her back". And that, "She's so beautiful; you're so lucky". You know what I mean? Because I'm taking their baby. Oh, it was terrible so anyway, those are good examples of what not to do? Yeah, my heart beating thinking putting myself back in that situation. It was so stressful.

On the other hand, one foster parent wanted to be more involved with the birth family but was unprepared to navigate working within the different silos. Foster Parent Participant #3 described her experience:

My husband and I push a lot to get to know bio families, but no one wants us to. And all it has ever done is amazing things. It's hard, and there's junky stuff, and I have to sometimes limit how much we talk about for a while, it's not perfect. But every one of our kids that have gone home, we've still seen them for about a year to help them transition. And that never ever happens because no one wants them to even know our name half the time. And so, it's just this broken thing where no one wants to talk to each other about anything, and we're all supposed to do our jobs all in our own little silos. But there's only one kid involved, or a sibling set, so really everyone needs to know the whole story all together for it to well. And so, that's another placement breakdown piece that I see.

Indeed, child welfare professional participants described the challenges when foster families are not prepared to engage with birth families. Child Welfare Professional Participant #4 stated, *"I see too, a lot of, sometimes when we have placements that may not always be open to birth family."* Further, Child Welfare Professional Participant #2 reflected:

I think there's just, a real difficulty with birth families and... like this fear, and probably from a lack of training, that there's a fear of birth families. Like who cares if they know who you live? So what? I can honestly say in all my years, I have never heard of a birth parent coming to a foster home.

It is clear based on these findings that foster parents need more training and preparation when it comes to interactions with birth families.

### *Creating a Support System*

The last question regarding foster parent preparedness had to do with creating a support system at the beginning of their fostering journeys. Half of the foster parent participants (n=3) indicated they were “not prepared” to create a support system for themselves and their families. The participants attributed this to their lack of awareness of any support specifically for foster parents. Foster Parent Participant #4 stated she was not at all prepared, *“because there is no network or lack of one, no awareness of other foster parents and no respite opportunities.”* The other three foster parent participants indicated that they felt “somewhat prepared” or “prepared” but simply because they already had a pre-existing support system. Foster Parent Participant #2 reflected, *“I already had a lot of friends who were doing foster care before me, so they have been an excellent resource and we check in with each other regularly.”*

When the child welfare professionals were asked whether they thought foster parents were prepared enough to respond to the needs of the children in their care, the responses were similar to the foster parents. All four participants stated they did not feel many foster parents had adequate supports in place. In fact, two child welfare participants suggested the need for a foster parent support network. Child Welfare Professional Participant #3 summed it up, *“They really had no idea what they were getting themselves into. And I don't feel like there's enough support for them... because the people that make the decisions have no idea what it takes every day to support these kids.”*

In addition, Child Welfare Professional #4 described the need for a support network:

I think if caregivers had maybe been maybe more education or training, but also like more of a support system, you know, from the agency and not that that's necessarily, you know which speaks to the larger system constraints... So, as a system I think we

are trying to do a better job of making family connections and having those relationships with like larger support networks.

Next, when asked whether they felt supported by their social worker, of the six foster parent participants, four noted they did not. Foster Parent Participant #5 indicated, *“I guess I was prepared somewhat, but when it's personalized, it's more challenging. When you're dealing with personalities, and you know that affects you directly.”* Another stated she did not feel prepared to work with other supports because she did not know how and had to navigate the system independently. Other supports include education professionals, medical professionals, mental health professionals, case managers, and any other support that might be attached to the child's life. The two participants who did feel comfortable navigating other supports were the same parents who had birth children with special needs.

Child welfare professional participants acknowledged the challenges foster parents have when connecting with child welfare supports. Three participants empathized with the constant changing of social workers, and the difficulty for both the child in care and foster parents to maintain a meaningful relationship with their worker. Child Welfare Professional Participant #3 stated:

And if they do have a lot of worker changes, they don't have that relationship with their worker either which makes it much more difficult. Sometimes their support person is someone who we don't even know, or at the school. But what we're seeing more and more is that kids are distancing themselves, and that's hard to mend back together.

Along with foster parents and child welfare professionals, previous children in care also discussed the need for more supports. In particular, a need for more supports that help youth aging out of care. Previous Child in Care #1 said:

Because there really isn't a lot of supports when you turn 18, and then even if you have an extension of care, [CFS] pulls back a whole lot and there's not a lot of resources as there was when before you were 18.

### **Lack of Support**

Although this research focused primarily on the training needs of foster parents, it is important to note that all foster parents discussed a lack of support from CFS. The lack of support theme is an important piece of the pre-service training development because it provides insight into the knowledge gaps that training can help fill. On the other hand, this information can also help determine where foster parents feel supported and informed. Thus, this information can help guide the pre-service training program to be the most effective for Manitoba's foster parents. It also suggests that pre-service training will not be sufficient alone, i.e., you can have a well-trained foster parent but if they do not feel well-supported by their agency, then it is likely that their fostering experience will be jeopardized (including the potential for a foster placement breakdown).

This theme was organized into four smaller sub-themes based on responses from all three participant groups. These include 1) unresponsive social workers; 2) lack of respite; 3) lack of information about the foster children; and 4) lack of funding available for fostering.

#### ***Unresponsive Social Worker***

Many participants identified having unresponsive social workers. First, all six foster parents described experiences where they attempted to get in contact with their social worker and were unsuccessful. One participant noted:

I haven't even had a visit in three months. I have not had somebody physically in my home or virtually to check on this child via a video call or anything like that. I firmly believe that this child would have been one of those that falls through the cracks.

(Foster Parent #1)

Other foster parents noted that it was common for e-mails and phone calls to remain unanswered. It is important to note that the foster parents did not blame the individual social workers themselves for the lack of response. Instead, many shared a critical perspective of the larger system itself, recognizing the need for holistic change. Foster Parent #1 stated, *"it's the whole system that is broken. The Winnipeg office for [agency name] is slammed all of the time. It's going to take them a while to get me a Winnipeg worker."*

Similarly, all three participants who were former children in care identified times when their social workers were unresponsive. Previous Child in Care #1 shares her story:

But even then, nothing was really done [after I was taken into foster care], like the protective services, and at this point I was living with like a boyfriend as a teenager who was an adult and nothing, nobody, bats an eye, nothing.

Previous Child in Care #3 remembers, *"Yeah, we struggle, like we weren't really having a lot of communication with the caseworker. Like, you send an e-mail, and it isn't really acknowledged."*

Similarly, the Previous Child in Care #2 stated:

I definitely feel like I would have done better with more contact, more communication with my worker, and even just, knowing what I was entitled to, what

I was responsible for, what they were responsible for, and the resources... everything that was required for me was put on me by myself. I had no other information like if there was somebody else, I should have been calling for help to find somewhere to live, or if there was somebody I should have been calling if I was in an emergency situation or I didn't know any of that... I couldn't even keep a cell phone, because to have a cell phone you need credit... It was definitely a struggle, but I don't feel like even the effort from the agency side to reach out and make sure I was fine was even adequate enough... Myself as an adult, I would never be okay with a teenage girl living with an adult man.

Lastly, all of the child welfare participants acknowledged they would like more time to build quality relationships to better respond to their foster parents. Child Welfare Participant #2 stated:

There's the lack of support I would say from workers and foster care workers, I think that's a huge piece, you hear that all the time. That they didn't feel supported or get what they needed. I think it's hard, and I think like, 'hey I better check in with that person I haven't heard from them for a while.' I think the squeaky wheel gets the oil and that's the reality. The kids that are the most needy, get seen the most.

Another participant also recognized the lack of responsiveness of child welfare professionals, albeit not from social works per se. According to them, it has more to do with CFS policy being far removed from day-to-day practice. They stated:

The policy writers have no idea, but that's like all of Child and Family Services... I realized very quickly that these are the people who are writing the policy for my

business, yet they have no freaking clue what I do. Or what challenges we deal with in a day. (Child Welfare Participant #4)

### ***Lack of Respite***

Four foster parents noted serious concerns about the lack of respite, primarily, a lack of respite providers and a lack of respite hours for foster parents. Foster parents of children with medical needs found this particularly difficult. Foster Parent Participant #6 stated:

There are not a lot of respite providers available for medical needs children. Often, more often than not, foster parents hire out of their friends' pool, at least from my experience. All of my respite is out of my friends' pool.

Another foster parent described the challenge of finding respite providers in a rural location:

But respite rurally, I already knew that was going to be a challenge from having my son because you often couldn't find respite for him. So, I knew that would be a struggle, and even now, when I knew the little guy was coming and I was asking around for respite and some were all for it, and I gave them the paperwork, probably three people. And one person gave it back to me. And I'm still waiting on the agency to sort that out. (Foster Parent Participant #2)

Foster Parent Participant #1 articulated the unique challenges of finding the *right* respite provider, "*I find it's really hard because you have to trust them to come into your home, but you don't want, I don't want a person where random people [are] roaming in my house.*"

Although the previous children in care participants did not note lack of respite as an issue (likely because they would not have recognized the need for respite as children), it was noted by the child welfare professional participants. One participant noted, "*Part of the problem is not*

*having reliable respite and giving the foster parents a break, which can help prevent breakdowns.” (Child Welfare Participant #3)*

Along with a lack of a respite pool, the second theme was the lack of respite hours provided to the foster parent. In fact, some foster parents received almost no respite relief hours. Foster Parent Participant #6 stated, *“I have been asking for respite since July when I’m supposed to have five support hours for my one kid. But I have only had one overnight a month, and I have received nothing since July.”* Another participant reflected on needing a break, *“Honestly, he requires so much one-on-one care, that I really wish I had some more respite hours.”* (Foster Parent Participant #1)

In addition to foster parents, child welfare professional participants also recognized a lack of respite hours as a challenge for foster parents. Child Welfare Professional Participant #4 reflected:

They changed a lot of the rules over the years, so foster parents used to get to use their respite dollars to spend on sending their kids to camp for an extra week. Which is perfect. My opinion, it gives kid a week away doing something fun gives the parents time alone.

Furthermore, another participant described systemic issues that lead to a lack of respite and other support. *“There are times where... whether it’s a worker is so busy that they can’t get in [the] special rate funding for respite and support, or they don’t have the time to put in the request.”* (Child Welfare Participant #1)

### ***Lack of Foster Child Information***

The third lack of support issue that most foster parents (n=4) noted was the limited amount of information provided about the foster child(ren) in their care. Foster parents reflected

on the negative consequences this can create for the child in care. Foster Parent Participant #4 noted:

Oh, he was in my care for less than a week before I got him into the dentist. And he had never seen a dentist before. For reference, we're going for dental surgery because his teeth are so rotten that they need to be pulled. I was the first person to bring up his teeth. The worker had zero idea about the condition of his teeth when he came into my care.

Foster Parent #2 noted similar concerns:

Yeah. Right, when he came into my care, I got a letter that said he had a hearing test and that he was using lotion for his rashes. I had no idea if he had a bedtime, I had no idea what he liked to eat. I had no idea about anything. I literally got a note, it was on a post-it. It was on a post-it, and it literally said, "hearing test 10am" and they had the time of the hearing test wrong. Thank goodness I called myself. Right? But how is that acceptable?

Foster Parent #4 also shared a story about taking a newborn infant into her home. She had no information about how this child was born drug dependent until after she had to take the baby into emergency care after the infant had several seizures. Foster Parent #3 noted there is a lack of a continuum of care:

I have watched a lot of kids get moved around... where the kids have no idea where they are. They have none of their belongings because they came to you with a garbage bag or a suitcase that had some clothes in it, and that's about it. And you have no idea what they like or what they don't like, you have no idea when they go to bed. You have no idea if they like to nap.

Along with foster parents, previous child in care participants also recognized the lack of information as an issue. One participant described the awful feeling of not having any information that directly affected her as a youth in care. Previous Child in Care #1 states:

You know when you're excluding somebody from something, kids feel like they're just being talked about behind their backs... People in the system lie or hide the truth because they assume [you're] not ready to handle this conversation. If we just figured out a way to make everybody on the same page, and not exclude the actual individuals that are directly affected... Because CFS is a big reason why I don't know what a healthy family looks like. What should happen is you all sit around together and try to talk through your problems? You don't hide things from people.

Lastly, one of the four child welfare professionals noted that the type of information that is gathered on children in care is limited and can be unhelpful to foster parents. According to Child Welfare Participant #1, workers are trained to focus on the deficits of the child in care because of funding, i.e., the more deficits a child has, the more funding is available. Consequently, the child's file is filled with only the limitations and struggles, which can be hard to share with potential foster parents. Child Welfare Participant #1 states:

And it's a hard position to be in because... that's what's written down. It doesn't talk about the gifts and the strengths, and the thing is that they have gifts. We know the drill and we know if we don't hammer on the most difficult pieces, we're not going to have the resources to meet their needs. I think that's such a backwards way to do things. [Foster parents] will lose funding if the child starts improving.

### ***Lack of Funding Available to Foster Parents***

The last theme regarding the lack of support identified by the participants pertained to funding. Most foster parents (n=4) described struggling with the amount of financial support they receive. In particular, foster parents who care for specialized children identified significant cuts:

They stopped specializing homes now. So, they won't put any sort of specialization to put your rates at a higher rate. So, I have two high needs medical kids. A lot of the times they'll ask, "why are you asking for support hours?" Why am I asking for support hours? Because I need help! You can't expect that everything is just going to be done and that I don't have a life outside of this. (Foster Parent Participant #6)

Other participants reflected on how they would benefit from financial support:

I feel like he could really thrive... I am just trying to get his rates adjusted and then hopefully I'll apply for more respite hours and that'll go up. But there are definitely days that I wish he got a little more support. (Foster Parent Participant #1)

Moreover, four of the six foster parents indicated they have been unsuccessful in their requests to be reimbursed for additional expenses for their foster child. All four noted that their requests are often ignored or denied. Foster Parent #6 noted, "*they continue to change the funding models. And then they tell parents, 'Oh, there's rate freezes.' Well, no there is not! You're straight up lying to somebody because you don't want to put it through.*"

The child welfare professionals also recognized the financial challenges that foster parents experience. Child Welfare Professional #3 states, "*You can't foster for money, it's not worth it. You can't foster because you think it's a good way to stay home with your own children and hope you can make enough money.*" Child Welfare Professional #2 also reflected:

On the other front, [foster parents] are also struggling and dealing with the agency, getting the support that they feel they need, or they can't get a call back or there's you know the money issues that always seem to come up. And we don't seem to have the answers.

In addition, Child Welfare Professional #1 recognized the difficult position foster parents can be in when the children in their care begin to improve, *“and if you've done a great job and they're more stable, well then, they're pulling back the money, but your overhead for your home, and your car, and everything you do to keep your program running hasn't changed.”* Lastly, one child welfare participant summed it up, *“[Foster parents] really have no idea what they were getting themselves into. And I don't feel like there's enough [financial] support for them.”* (Child Welfare Participant #4)

Although previous children in care did not discuss at length the issue of limited funding for foster parents (likely since they were not privy to this information while they were in care), two participants described how it is not enough to provide money to foster parents, that they require emotional and financial support to respond to the needs of children in care. One foster parent described:

I am not going to lie... these are the situations they put us in as medical foster parents, and then we don't get enough respite, we don't have enough support, and then we get burned out and we quit. And then you're out more foster parents... They really lose sight of what we do. And how hard we actually work, and unfortunately there is a really large stigma around foster parents, I can't even tell you how many people honestly believe that I do this for the money (Foster Parent Participant #2).

Another foster parent described her reality:

It's not just about getting paid... when you call CFS and ask for supports, it is not good. There's basically a war between Children's Disability Services and CFS, and it is not good. The stories I could tell you would blow your mind. The two systems fight for who is going to foot the bill for these services (Foster Parent Participant #1).

In sum, all three participant groups: foster parents, child welfare professionals, and previous children in care, clearly indicated multiple problematic themes regarding a lack of support for foster parents.

### **Placement Breakdowns**

The third major theme that arose from the data was the experience of placement breakdowns for children in care. Several sub-themes emerged, which include 1) placement breakdown experiences; 2) preventing placement breakdowns; 3) placements after a breakdown; and 4) consequences of a placement breakdown.

#### ***Placement Breakdown Experiences***

All three groups of participants were asked to describe their experiences with placement breakdowns. First, five (of the six) foster parents experienced at least one placement breakdown. The reasons for the placement breakdowns varied. Some had to do with adolescents running away from the foster home together, one foster parent described frustration with ongoing thefts by the foster child and asked for the child to be removed, one foster parent discussed an allegation incident because of a child with a blood disorder which caused significant bruising. Other reasons for placement breakdowns included a lack of respite and support, a lack of information provided to the foster parent, and negative experiences with the social workers. The strategies to prevent placement breakdowns, including an increase in training, will be discussed in the next section.

Foster Parent Participant #2 describes:

The girls were placed with us in an emergency placement. She was 17 years old; she went from being an emergency to a placement. She hadn't even been with us for three or four weeks, and her sister had ran away from her placement. The sisters had been chatting, and the 17-year-old wanted her sister to come live here. So, once we took the sister, she had high needs and had an eating disorder. She did really good here in a short time, she actually was supposed to be admitted to an eating disorder clinic but decided because she was doing so good here that she would stay. The two girls had a lot of doctor appointments, and boyfriends would show up, and this created issues as well as the mom constantly trying to get in touch and getting them to run to her and empty promises. In the end, the older one had tried to run away half a dozen times at this point. It took a lot... My thoughts are that these girls should not have been placed together because they are toxic. If you place them with each other, they want to run to mom. I think these two are just going to keep running. They actually locked their bedroom door and went through the bedroom window and they stole our bikes and biked halfway to Brandon, ditched the bikes and then were given a ride by the police. They picked the girls up and they took them to the mom even though there is a non-contact order, how is that even possible? How is that even possible that they were returned to their mom? It just blows my mind. We decided this was something we couldn't continue with and said we couldn't take them back. To us, it was a large theft. Insurance to cover that theft, these bikes, my husband's bike was worth over \$2,000 and because we have no receipts, we weren't compensated.

Along with foster parents, the child welfare professional participants described similar situations. All four participants in the group experienced many placement breakdowns. Child Welfare Professional Participant #1 describes her current reality:

Yes. I have had quite a few placement breakdowns on my caseload. I think I see it more and more when our kids reach the teenage stage and there's lots of life changes... their lives are changing and they're questioning more about why they're in care, why they live with who they live with, where their bio family is, and what that looks like. And it starts to strain relationships a lot. And it kind of goes back to our foster parents not always being proactively ready to deal with these situations. So, yeah, I've had quite a few. Unfortunately, it turns into, not a regular thing, but it's, you start to see the signs very early, and you try to put interventions into play to help save relationships and help save placements, but it's not always successful.

Child Welfare Professional Participant #4 adds:

Sometimes you can see the writing on the wall and know that this this you know, especially when we get files from family service, right? Sometimes you just know, this is not going to last. It gives me a bit of time to try and come up with something new. Yeah, but other times you know things do breakdown really fast. There's you know some kind of violence, or big incident, or the parents just finally reach their breaking point with that kid.

In addition to the foster parent and child welfare professionals, the previous children in care also discussed their experiences with placement breakdowns. Previous Child in Care Participant #3 described her painful experience:

A couple of times I wasn't [notified] about the move, and it was just a sudden thing. And a couple of places I would purposely make it so I would leave. But the one foster home that I was in the for the longest, I was about 14, I had conflict with the other foster child there. And it is pretty set, that if there's threats of violence or fighting, that usually the perpetrator would be removed from the home; however, all of a sudden, I was told that they were moving me. And I was confused, and I was like, I am not supposed to be moved. And I was told by my foster parent's family member that she was taking me to Mayfair Shelter. So, then I had to call my social worker at the time and say, like what is going on because you can't just move me.

Unfortunately, this participant was not alone. Previous Child in Care #2 described her difficult experience with placement breakdowns:

I lived in a little over 10 different places, like between families. I don't know... I was all over the place most of my life, so I never had just one family; it wasn't like consistent in terms of like longevity... I always got moved around because I had issues belonging... I have blocked out memories or stuff I don't even - I'm not aware of.

Last, Previous Child in Care #1 described how her last placement breakdown resulted from her becoming pregnant. She stated, *I was in foster care from fifteen, and then I became pregnant at 17 so, I feel like I counted that as my like exit to foster care.*

Based on the responses from each participant groups, it is clear placement breakdowns have a negative effect on foster parents, child welfare professionals, and primarily, previous children in care. Thus, to promote better outcomes for children in care, it is important to consider ways placement breakdowns can be prevented.

### *Preventing Placement Breakdowns*

Upon reflection, all foster parent participants indicated that the placement breakdowns could have been prevented. The suggestions to prevent placement breakdowns included more preparation and training (n=6); an increase in respite and support services (n=5); more documentation and communication (n=4); more information provided to both the birth and foster families (n=4); and an ability for birth and foster families to engage with each other (n=2). Foster Parent Participant #3 also suggested increasing foster parent expectations:

Another obstacle is it needs to be required training. The obstacle is that some people are lazy and don't want to go to training and that needs to stop. There needs to be mandatory training for foster parents.

Next, when child welfare professionals were asked their opinions on why placement breakdowns are so prevalent in Manitoba, similar responses were identified. This included a lack of overall support to foster parents (n=4); foster parents' lack of training, knowledge, and awareness of trauma, attachment, and other important pieces of foster care (n=4); lack of communication between those involved in the children's life (n=3); a lack of cultural awareness (n=3); and inconsistent expectations across authorities and agencies (n=2). One foster parent discusses her thoughts:

Because people who just jump in and not really know what they're doing, and CFS says yes to them because they're safe and they want to help. But their well intentions just get them into the deep end, and they drowned. So, like the lack of support, that's definitely a big one... The second one is a bit more complicated, where it is that like kids are leaving suddenly or run away. And oftentimes kids leave because social workers have said or done something that the foster parents didn't know was going to

happen, or birth parents were involved, and foster parents didn't know. So, that speaks to me so much, because there's such a difference in how communication works between different workers, or an agency is different. And there's just this unwillingness to work together as a team for the kids. And so, like social workers hide things from foster parents, and they hide things from bio parents, and all these people think they're doing what's best and they're all really nice, but it causes a lot of distrust and negative experiences on everyone's part (Foster Parent Participant #3).

Although all participants agreed that some placement breakdowns are not preventable, child welfare professionals had ideas on how to prevent some of them. This included more support to foster parents (n=4); less rushed placements, and ensuring the child and parent are a good match (n=3); more education and awareness for foster parents, especially regarding the birth family (n=2); and limit child welfare worker turnover (n=1).

Furthermore, child Welfare professional participant #1 described the importance of meeting children in care where they are at:

Sometimes we have kids who can't always meet our expectations. So, how do we mold to what their needs are rather than our own? Which can be difficult in homes that bring kids in and that's not their normal. So, that turns into a bit of an issue.

Along the same lines, Child Welfare Professional Participant #2 discussed the need for more collaboration between child welfare and foster parents to prevent placement breakdowns:

I think what we see is a lot of people say, you know, let's put the kids in therapy. But that doesn't always fix everything. Sure, it's a great tool, but if it's not being incorporated into everyday life, you can't expect for a kid to speak to somebody for

an hour and then come back and change and things are going to be fine. I think incorporating foster parents more into that piece and having them more involved as much as we can, is a really big thing that is sometimes missed.

Last, the previous children in care participants also suggested ways to prevent placement breakdowns. One participant described the importance of making a connection with the child.

Previous Child in Care Participant #1 described:

At [the youth treatment centre], when I connected with the staff, I struggled a lot with depression and anxiety. So, if I was getting really escalated or really upset, she would say, "let's go for a drive," and we could literally just go to the grocery store or the gas station, but she would just sit there and ask me if I wanted to talk and have her just listen, or do you want to just sit here in silence. And I think that was what made me feel safe and okay.

Another participant described how important it is to be honest with children in care as a key way to prevent or reduce problematic behaviours for some children in care, and potentially preventing placement breakdowns. Previous Child in Care #2 stated:

You know, I probably would have attacked people physically. But I was not violent, like the way people were treating me. It was that they made me feel like I wasn't good enough, worthy enough, intelligent enough for CFS to keep me in the know enough. To be worthy of being told the truth or be honest with you so that only drove the anger issues and everything else can took more for me to act up more.

As previously discussed, one of the primary reasons for placement breakdowns is problematic behaviour. Unfortunately, as problematic behaviour increases, the child in care is more likely to experience increased placement breakdowns. It is important to explore the

different placement options for children in care after they experience multiple placement breakdowns. Indeed, if children in care must experience a placement move, it is imperative that the child is made aware of the move beforehand. Previous Child in Care Participant #2 describes:

So, it's like, we can't tell you what's going on because you're not qualified to have the validation or respect to know what's actually going on with you and who cares about how old you are? You're not allowed to know about what's going on with you... And because if you're a child or teenager, aspects of [those experiences] shape how you feel about yourself... You know, it's made me more angry.

### ***Placements After a Breakdown***

Participants were asked about post-placement breakdown concerns, including where foster children were placed after placement breakdown. Of the five foster parent participants who experienced placement breakdowns, three were unaware of their foster children's next placements. Two foster parents had some information about next placements, which included a group home, and the Children's Hospital:

I have had kids be taken and have had to go live in the hospital because there's nowhere else for them to go. Because often [the youth treatment centres are] full, and at capacity, and there aren't many group homes or foster homes that on the fly can take a medical needs child.

The child welfare professionals recognized the challenge of placing a child in a foster home when there have been multiple placement breakdowns. Child Welfare Professional #2 described further:

Some [children in care after a placement breakdown] have gone to shelters where they've been in turmoil for months and months and it's even harder to get them back.

Some do go to group homes, and I think most at a certain age begin to look for another foster home. I mean, I think I always want to look for foster homes before any type of group care. But you know, number of breakdowns certainly start to put you in another category, and you do start to look if you've burned out you know, three or four or five foster homes you do start to look at resources who are not going to be another loss.

Indeed, removing a child in care from a foster placement and placing him or her in a shelter can be problematic. Child Welfare Professional #4 reflected on this challenge:

Well, it's pretty unlikely that they get a foster bed with, especially like in the short-term situation, so it goes off the rails. Today I have to find a place for them to live. We're looking at a shelter. I hate that they think that in a way is a placement, it's not, it works for some very street involved kids. But a lot of these kids are not street involved. These are not kids who had ever probably even had to take a bus anywhere, they've been carried everywhere in their life, yeah. They didn't even know what the North End looked like. But when you call the placement desk and we've got a place a child immediately, they say, 'okay they can go to the three-day emergency shelter,' which again is a lot of really street involved kids. It's only overnight [and] you have to leave during the day. You're not allowed to stay there. And after carrying whatever you have with you and find a place to be during the day, I don't know if it's different now with covid, but that was the way it was the last time I had to use it. Or they tell me, 'I have to send the kids to Ndinawe.' Every time I have to fight about that, because I will not send my suburban kids that have never seen anything like that in those placements, they will be eaten alive. They will be pulled into things that

they've never seen. And these kids are so vulnerable and desperate to make new connections. But they will get pulled into a gang or pulled into drugs or prostitution, or something. And then we've got 100 more new problems to be dealing with.

### ***Consequences of Placement Breakdowns***

Participants noted a number of consequences of foster placement breakdowns, such as the limited placement options for children; in particular, older adolescents who are more often placed in emergency shelters or group care. Other consequences noted include the lack of consistency for children who experience multiple placement breakdowns, and the difficult situations child welfare professionals face when attempting to find appropriate placements.

It is important to understand where children in care go after a placement breakdown takes place. Oftentimes children who experience a placement breakdown can be placed in group homes or emergency shelters. Furthermore, because there are few available homes, foster parents are often mismatched with children who are not a good fit for their home, or they are heavily encouraged to take on more children than they feel they can manage. One foster parent reflected on this:

They try to overcrowd our homes because we are in such demand. The home that I was just working in has two kids, and two medical kids, pre-pandemic. During the pandemic they gave her another one because there was nowhere else for this child to go. They are suggesting I put this kid in my dining room. Because she needs medical care, and they don't have another medical home. Put doors on your dining room they tell me.

Next, child welfare professionals discussed grim outcomes when asked where foster children tend to go after multiple placement breakdowns. All the participants noted an increase

in foster children running away, living in group care, shelters, or “falling through the cracks,” when it comes to physical and mental health care, school, and other activities. Child Welfare Professional Participant #4 described the reality of many children in care:

You know, unfortunately for some of those kids [living in group homes after multiple placement breakdowns] is what they learn, and that’s the most stability they have. But for some kids that’s a huge life change, and having the rotating staff and rotating caregivers, that’s a hard thing. And we see kids more often than not get involved in street life, or you know, the criminal justice system, doing more AWOLs, and so I kind of feel more often than not in progresses.

The same participant provides insight into the difficult position child welfare professionals are in when it comes to finding a new placement after a breakdown:

Often kids end up in emergency placements if a placement breaks down. And it’s the first thing available that you can get that you place the [child] in. A lot of pressure to get kids out of shelters, I don’t blame them, but it also doesn’t give you the preparation to find the best fit type of placement for them.

Child Welfare Professional #3 describes a similar situation:

I think the hope is that if a child is in a placement that breaks down here very quickly, we would be able to pivot and find other family members who would be willing and able to take in the child... depending how that goes with their timeline, sometimes the child may have to go to shelter or like an emergency placement for a few days or week or whatever, until those formal arrangements can be made. Yeah, I mean for some of our teenagers, it could sort of be a runaway AWOL type stuff.

Along with foster parents and child welfare professionals, the participants who were previously in care described “slipping through the cracks” after a placement breakdown. Previous Child in Care #1 described the challenges she has faced because she did not have a consistent adult to teach her life skills:

Because [I moved to different group homes], I was never truly given the resources of how to live on my own. So, when I moved out, I was freshly 18 and had a child under one and was like, “*now what?*” So, now I am placed in Manitoba Housing in a not great area. And CFS will pay your bills for a little while, but you have to go to school, you have to get a job, you have to jump through all of these hoops in hopes that you’ll get an extension. And so, I turned 21 in September, and because of COVID, finding childcare was really difficult. So, because I had no childcare, I couldn’t go find a job. And then because I was in foster care, I was never really given the opportunity to get a job sooner. So, I don’t have a lot of job experience. And the building that I live in itself is really unsafe. So, now I am trying to figure out how I can make my financial situation okay enough to get out of the area that I’m in, but still be close to childcare and a job. And how do I maintain a level of safety for myself, and how do I get more resources as an adult?

### **Training Recommendations**

The final set of questions the three participants groups were asked about were related to training recommendations. All participants were asked to provide their thoughts on how to improve current foster parent training. The findings indicate multiple themes among the training recommendations. These include 1) a pre-service training program; 2) communication and

documentation; 3) a more comprehensive orientation; 4) systems training; 5) child-focused training; and 6) other recommendations.

### ***Pre-Service Training Program***

First, each participant was asked whether they supported a pre-service training program prior to applicants becoming licensed foster parents. All 13 participants noted heavy support for pre-service training. Child Welfare Professional #2 reflected on the importance of foster parents being well trained, *“I just think that people are ill equipped when they say they are going to take in kids and aren’t adequately supported and that’s what leads to placement breakdowns for the most part.”*

In addition, Foster Parent #1 discussed why she supports a pre-service training program:

Oh, for sure, yes, I support [a pre-service training program]. I definitely think there should be more [training] than what there is because I haven’t seen anything. And I am the unique scenario because I come into this with some training. But not everyone has that, so I am thinking that a lot of parents out there are not trained for this.

Furthermore, a former youth in care reflected on the need for a pre-service training program. Previous Child in Care Participant #2 stated, *“100% yes, I support it. To me, everywhere I lived, they did what they could, but do I think there was enough? No. I do think people need to be trained more... but the system is broken.”*

Indeed, all three participant groups recognized the need for a pre-service training program. Along with the pre-service training program, the participants had several other training recommendations that foster parents would benefit from.

### ***Communication and Documentation***

One of the most often cited recommendation the participants discussed was to have a training to improve communication (foster parents = 5; child welfare professionals = 3; previous child in care = 1). This includes a training that will enhance communication between foster parents and social workers, birth families, support workers, and other external agencies (i.e., medical staff, school staff). Foster Parent Participant #1 went further, describing her ideal in terms of documentation training. She stated:

There should also be training about documentation. Like I don't know what most foster parents do, but I have like every day, a brief summary, sometimes a more brief summary depending on the type of day. But whatever type of day we had it is written down. I know what we've done. I keep my calendars. I know what doctors I've seen I know who I've spoken to, I know who has reimbursed me, I know every little detail is written down. And, because of that, I could send a note if he ever got moved from my placement to another placement.

Foster Parent Participant #6 described the training that is often missing but resonated with him was on communication. He stated:

The training that resonated the most was probably the one with observation in case reporting like, so we were able to look at what [examples] of what others were doing and put it into words and into context. And then understanding what the social worker needs. Just help them communicate. You know what their role is kind of thing.

In addition, Child Welfare Professional #4 described the value of training foster parents on finding their own training and resources:

So, it's like a communication breakdown problem. Somebody who's going to put up a resource page and say hey, you know so a foster parent could just go onto this site and say, hey you know I'm dealing with this behaviour or this age group or whatever it is and kind of be able to get a search engine that. And, well these are the places you can go, and this is what's available.

### ***Comprehensive Orientation***

Another recommendation from the participants was to make foster parent orientation consistent across all agencies and authorities. Indeed, throughout this research, it is clear foster parents in Manitoba receive vastly different orientation experiences. None of the orientations were described as adequate by the foster parent participants. Some suggestions for an improved orientation include providing more information on the experiences, realities, and expectations of foster parents. This will allow prospective foster parents to make informed decisions before committing to their fostering journeys. This strategy will not only adequately prepare prospective foster parents, but it will also prevent placement breakdowns when new foster parents realize they are not able to continue.

Foster Parent Participant #3 stated:

I would really like the idea of doing an orientation before people commit to being foster parents. So, instead of having each agency do their own, I would create a better one so that you immediately get involved in the community of all of foster care, and you get a wider breadth of orientation than just one particular agency. And I would have that promoted across the board, because even to become a foster parent, it was very confusing, as to like, what agency do I even go talk to and why do I choose a

certain agency? And so, to just have a one-track funnel in, the whole process is the first important piece.

Along with more realistic information about being a foster parent, other participants suggested the orientation should have a detailed list of available trainings that will enhance their skills. This can include Non-Violent Crisis Intervention, CPR and First Aid, Attachment and Trauma, guest speaker events that are relevant to foster care, and others. Another participant recommended that the orientation should have a future training sign-up sheet, so that foster parents can be contacted when those trainings are available. Foster Parent Participant #6 pointed out that there are a lot of relevant training sessions foster parents can take, there is just no awareness of what is offered or available.

One last recommendation having to do with orientation had to do with setting new or prospective foster parents up with veteran foster parents who can act as a mentor. Participants suggested this would set up a support network and provide the needed access to information that new foster parents often do not receive. Along the same lines, Foster Parent Participant #3 suggested creating a secured smart phone app or private social media page that could identify foster parent play groups and gatherings. She stated that being a foster parent can be lonely and feel isolating; thus, making meaningful connections with other foster parents could be beneficial. The foster parent group could share advice, experiences, training events, respite providers, and support one another through difficult times.

### ***Improved Systems Training***

The third recommendation the participants suggested regarding improved training included an enhanced and consistent systems training program that would occur throughout the entire foster parent journey (i.e., not just pre-training), This training would be required for all

foster parents. It would include the parenting and communication expectations for both the foster parents, and what they can expect from the child welfare professionals they will work with. The proposed systems training would also help new and prospective foster parents learn to navigate the systems relevant to foster care, including the child welfare system, the education system, the justice system, and the Manitoba Advocate for Children and Youth. Foster Parent Participant #3 recommended:

And then I would do system training. System training about, who do you call when things happen. Your social worker? Okay, your social worker is not meeting your needs. Who do you call? Well, you actually have permission to talk to your social worker's supervisor, and their job is to support the social worker – you're not going to get them in trouble, like, call them and talk to them and ask for help. Well, who do I call if I am personally having issues?

Child Welfare Professional #4 agrees that systems training would be a priority. He states, "*We would want to be focused on children in Manitoba. Our orientation would be specifically about the system in Manitoba and providing a little bit of information about how our agencies sort of fits into the larger welfare system.*"

### ***Child-Focused Training***

The last important recommendation the participants suggested to improve training was to provide training that focused on the children in care. The suggestions from all three participant groups include training on attachment and trauma (foster parents = 4; child welfare professionals = 3; previous children in care = 2); and how to improve outcomes for children (foster parents = 4; child welfare professionals = 2). Other participants recommended training on strategies when parenting children with common diagnoses in the child welfare system. These include fetal

alcohol spectrum disorder, autism spectrum disorder, attention deficit hyperactivity disorder, and other cognitive delays. How does this relate to pre-training? Would this be the core content in pre-training?

Child Welfare Professional #4 suggested, *“It could be theory and some basic childcare things. It could be topics related to engagement or some of the you know more special needs that the children in care might have. Kids with ADHD or ASD.”*

Other suggestions included making broad training for everyone (i.e., cultural training, attachment, creating and maintaining positive relationships with birth families). These training sessions would be relevant for all foster parents. One suggestion a foster parent suggested was to provide focused training sessions that would assist foster parents with specific and relevant situations in their home. For instance, different age and stages of foster children (infant, toddler, youth and adolescent, teenage years, and youth who are aging out of care). Other specific trainings could include children with medical conditions, substance use and addictions, internet safety, and the reunification process. Foster Parent Participant #3 elaborated:

It would be ideal to learn about what you actually do with kids when things don't go well. And have them do it based on what age groups they're working towards. So, if they're doing two and under kids, or they're doing school age kids or adolescents, I would have those all be separate groups of parenting training because then they have examples and wording and things to do with that age group and those specific needs that they're having. And do the like, “when your kids are screaming at you, what do you do?” You know, let's practice together, let's learn about what happens in our bodies when we get stressed out. Let's learn about running hot or running blue, let's think about sensory issues.

Participants also recommended that the child-focused training provide the theory behind the strategies, and then provide opportunities to develop the practical skill behind the theory. Foster Parent #5 suggested, “*so, you give people situations that they can report back on. You know that they've done it, it's not theoretical. Make it practical.*” During the interviews, most foster parents (n=4); and child welfare professionals (n=3) recognized the importance of providing more role plays in the training to enhance the practical application of parenting strategies. Foster Parent Participant #5 elaborated:

I think what people come away with – if they are shy – is much greater if they engage in role plays and even discussing videos too. Like all that kind of stuff that allows people to express themselves, it makes a bigger impact than just sitting and listening.

### ***Other Training Recommendations***

Participants were asked who should facilitate foster parent training sessions. All foster parents (n=6) recommended veteran foster parents, child welfare professionals, and experts on foster care, including researchers in the field. Most of the foster parents (n=5) thought that a combination of foster parents and child welfare professionals would be the best option:

I would definitely have one social worker, and one supervisor, and then some experienced foster parents. If you could have two really experienced foster parents that have done this for years, and a social worker and a supervisor. They could sit down and run a training group about what are the important things to write down, what are the things you should write down if your placement is broken down and your child is moving.

Along with foster parents, child welfare professionals suggested foster parents as facilitators (n=3); and other professionals in child development (n=2). One participant suggested managing it all in-house within the agency. Two previous children in care and one child welfare professional also suggested having children who have aged out of care come to talk about their experiences during a training. Child Welfare Participant #2 stated:

I think they try to do some of those, of caregivers coming to talk about their experiences, I mean, I think it would also be really helpful to talk to kids who have aged out about you know, how did you feel and what would have worked better, and how could have this been a better experience. I don't think you have to be a kid in care to be a good worker, I don't think you have to be in care to be a good foster parent, but I think, I would be delusional if I didn't think somebody else's experience was worthy and knowing I didn't experience that.

The last important facilitation recommendation included the need for the trainers to be skilled in facilitation along with their relevant experience. Foster Parent Participant #5 stated,

*“Experienced social workers or group home workers, or foster parents. Facilitators should be people who have had some teaching abilities you know they need a combination of both.”*

In addition, Child Welfare Professional Participant #1 described her thoughts:

I think if they did have a mix, whether you have child welfare workers or different professionals from different sectors or programs or what not, if we have foster parents who are specialized in certain areas, they might be good to have that peer relationship with and to have that discussion, and more peer to peer and more relate to each other kind of situation. You know, more often than not I think a lot of foster parents have negative experiences with social workers. Right? And sometimes they

don't feel heard, and they don't feel their needs are being met. And so, to have an opportunity to have someone outside of their work is sometimes a good thing. And I think having a variety is helpful. People learn differently.

Participants were asked what type of training platform would be ideal for them; whether they would prefer online (i.e.: Zoom), in-person, or a hybrid of both. Most foster parent participants stated they would prefer in-person training (n=4). The two other participants stated they would prefer online or hybrid for childcare purposes. Perhaps this is because individuals living in rural locations are required to access training more often online than those living in urban locations. Three foster parents suggested the training needed to include group interactions, and preferred to do this in person; however, they would also do a hybrid option. It is interesting to note, that both the participants who opted for online training were from rural locations.

In addition, child welfare professionals also agreed with the foster parents when brainstorming facilitators and format of the pre-service training. Indeed, it appears having a collaboration between experienced foster parents, child welfare professionals, and other experts is the preferred facilitator strategy. The ideal training format recommendations included a hybrid of online and in-person training to allow for flexibility (n=4); as well as to have consultation and collaborative conversations with other foster parents as a way to create a support network (n=3).

It is important to note that although many of the recommendations between the foster parents and the child welfare professionals are similar, there are some differences as well. For instance, child welfare professionals did not identify the need to discuss information between the birth families and foster families in their pre-training recommendations. Although most cited by foster parents, they did not note the need for more applied or practical skills training, i.e., how to manage the foster child's day to day behaviour. Finally, despite all the child welfare

professionals recognizing that foster parents can often become burned out, have limited support, have incredibly difficult and sometimes impossible circumstances to work through, all while trying to navigate in an inconsistent and convoluted child welfare system, they did not identify self-care or any preventative practices for foster parents in the pre-service training that would help limit foster parent turnover.

In addition, previous children in care were asked to provide their own training recommendations. Previous Child in Care Participant #1 poignantly reflected:

I think there should be more training. Or like, workshops about different – because every kid is different and being in foster care is not easy whether you're in a foster home, a group home or a shelter. So, I think there needs to be more workshops on how to handle different situations, different cases, and levels of where they child's needs lie.

Another participant added:

And I think there needs to be more training on if this is, or more like, resources, if you have a child in your care who is using substances, like what can you do to help them without pushing them further away? (Previous Child in Care Participant #2).

Last, Previous Child in Care Participant #3 thought about what she would have wanted her foster parents to learn in training. She first made a powerful statement, "*There's some things you can't teach.*" Then followed it up with:

Just like for them to learn how to just listen. Foster parents should just listen about how you feel or stuff and should not invalidate kids and how they feel about themselves or the world. You know, just people just need to be able to talk about all this stuff.

## **Conclusion**

The information collected for this research focused on the training needs of foster parents to improve the stability of foster care placements. Six foster parents were interviewed for the study. In addition, to ascertain a holistic understanding of child welfare in Manitoba, child welfare professionals (n=4); and previous children in care (n=3); were also interviewed. The findings of the study highlight several main areas discussed in all the interviews with the three different participant groups. Based on these results from the 13 participants, many themes and sub-themes emerged. These include 1) training experience; 2) preparation to foster; 3) lack of support; 4) placement breakdowns; and 5) training recommendations.

First, each of the 13 participants in the study were asked about foster parent training experiences. The participants identified several concerns, including a lack of a foster parent pre-service training program. Beyond this, the participants discussed an overall lack of training opportunities, including ongoing training sessions throughout their foster parent tenure. The participants recognized several training gaps; in particular, providing a consistent culturally-responsive training that would be available to all foster parents. Although limited, some foster parents identified positive training experiences, including one participant independently finding a training on practical parenting skills.

Perhaps the result of limited available training, another major theme this research found was that many foster parents were not prepared to meet the needs of the children they care for. This included engaging with the child's culture, responding appropriately to problematic behaviour, adapting parenting strategies, advocating for the child, interacting with the child's birth family, and creating a support system. Two noteworthy findings included most foster

parents feel prepared and were eager to advocate for the children they care for, and all participants were very unprepared to engage and interact with birth families.

Next, participants described an overall lack of support that foster parents experience. This major theme was broken down into several sub-themes, including having an unresponsive social worker, a lack of meaningful relationships with support workers, lack of respite, lack of foster child information, and a lack of funding available for foster parents. It is important to note that the lack of foster parent support was not only described among the foster parent participants, but the child welfare professionals and previous children in care participants also recognized this as a concern.

With a lack of support and ill-prepared foster parents, it is perhaps not surprising that another major theme identified was placement breakdowns. Indeed, participants described several experiences that were broken down into sub-themes, including placement breakdown experiences, how to prevent placement breakdowns, where children go after they experience placement breakdowns, and consequences of a placement breakdown.

Last, participants were also asked to provide any pre-service training recommendations, which is the last major theme. The sub-themes included communication and documentation, a more comprehensive orientation, improved systems training, and more opportunity for child-focused training. Based on this research, it is clear there are notable opportunities for improvement in Manitoba's foster parent training programs. The discussion chapter of this paper connects these findings with current research on foster parent experiences.

The study adds to the literature showing that the child welfare system needs to improve their policies and strategies when it comes to preparing and supporting foster parents. Furthermore, if child welfare professionals are fully supported, they can in turn better respond to

the needs of foster parents. If foster parents were better supported and equipped, they could then respond appropriately and effectively to the children in care they help raise. As a result, the children in Manitoba's child welfare system would experience fewer placement breakdowns, stronger attachment, and better overall outcomes.

## **Chapter 5: Discussion**

The purpose of the thesis research is to determine if a foster parent pre-service training program would be supported among the three participant groups: foster parents, child welfare professionals, and previous children in care. Another important goal was to explore the overall training needs and gaps for Manitoba's foster parents to help inform the development of a more fulsome foster parent training program. The discussion chapter will summarize the major findings, implications, limitations, and recommendations.

### **Key Findings**

There were several key findings discussed in the results chapter. These include 1) training experiences; 2) preparation to foster; 3) lack of support; 4) placement breakdowns; and 5) training recommendations.

### ***Training Experiences***

An important finding in the research was that none of the foster parent participants engaged in any sort of pre-service training program prior to becoming licensed. This confirms my own search of pre-existing training programs in Manitoba where I found none to exist. It is no surprise then, that all three participants groups identified ways in which foster parents were not prepared for their critical roles. Noted areas of unpreparedness include foster parents' ability to engage with the child's culture, responding to problematic behaviour, adapting parenting strategies, creating a support system, and engaging with the child's birth family. There were several identified barriers that contributed to foster parents feeling unprepared. This includes a lack of a pre-service training program, limited ongoing training opportunities, a lack of childcare to attend training, and limited awareness of training opportunities.

First, child welfare professional participants also described concerns about training. Perhaps most alarming, most child welfare professionals were not even aware of what training foster parents have or have not engaged in. Furthermore, some participants were unaware of the training opportunities their own agencies provided, or whether they offered any at all. As a result of the lack of training and awareness, previous child in care participants reflected on their foster parents' inability to effectively respond to their needs. This group described painful experiences, including placement breakdowns, that might have been avoided if foster parents had access to the appropriate training.

It is important to point out that the foster parents are not untrained by choice. Indeed, all foster parents described wanting to engage in more training. These requests included culturally responsive training, policy and procedural training, and real-life parenting strategies that are child focused. It is interesting to note that there were a variety of training requests, which indicates foster parents in Manitoba may not be receiving consistent or relevant training. Upon a thorough review, the Auditor General of Manitoba (2019) recommended similar trainings, including respecting, and promoting the child's culture, and training on the day-to-day care of the children. Further, this report finds there is inadequate funding available for training foster parents. It recommends that both the federal and provincial government provide more funding to adequately train foster parents (Auditor General of Manitoba, 2019).

### ***Foster Parent Barriers and Obstacles to Access Training***

Participants identified multiple barriers and obstacles to foster parents accessing training. One significant barrier foster parents face when attempting to access training is the actual timing of the training. Child welfare professional participants acknowledged that there are few training opportunities specifically tailored with foster parents in mind. As a result, foster parents are often

invited to attend trainings that are not specifically designed for them (i.e., in-house training for CFS social workers). If foster parents want to attend, they must attend the training during the work week, generally Monday to Friday 8:30am to 4:30pm. This is in line with research, indicating a lack of training sessions that are developed and rigorously evaluated with foster parents specifically in mind (Festinger & Baker, 2013; Rork, 2010). Therefore, not only is the training not specifically geared or designed for their own needs, but the timing of these programs also occur when foster parents are caring for their own foster children (i.e., before school starts and after school ends). This reality forces foster parents to use their precious (and rare) respite time to attend training, and they also must find respite available for before and after school, which is another barrier. Along the same lines, recent research found that there has been an increase in foster parent expectations. This includes the completion of more paperwork, responding to the needs of children with increased complex needs, and doing so with less support (i.e.: respite). Despite this, the foster parent training has failed to respond to these increased demands (Canadian Association of Social Workers, 2018).

Next, because there is no pre-service training for Manitoba's foster parents, the only opportunity for training begins *after* they have children in their home. As such, a major obstacle to overcome is securing childcare to attend training. Although foster parents do receive respite funds, it is often limited to under 10 hours per month. Foster parent participants described having to choose between using respite hours on the much-needed rest they require or attending a training that would enhance their parenting skills. In addition, foster parents described finding and maintaining reliable respite providers as another significant barrier to attend training. This barrier is increasingly more challenging for rural foster parents because of the limited respite

pool. This finding is consistent with the relevant literature describing a lack of respite for foster parents (Canadian Association of Social Workers, 2018).

Rural foster parents not only have a difficult time finding respite, but they also must travel to attend training sessions. Indeed, child welfare professionals and foster parent participants described how most training opportunities are in Winnipeg, with a few options in Brandon, Manitoba; but almost no opportunities rurally. Along with the additional cost of traveling, if the training takes place over two or more days, another barrier foster parents face is the cost of lodging during the training, as well as the additional time away from home which would require a significant amount of respite.

The last significant barrier foster parents must address when attempting to access training, is the limited awareness of training opportunities. First, when asked, most child welfare professionals were unsure of a) what training foster parents had attended to become foster parents and b) what upcoming training opportunities there are for foster parents to attend. In fact, the majority of both child welfare professional and foster parent participants were not aware of The Kinship and Foster Family Network of Manitoba (KFFNM), a government funded agency that provides training and other resources to foster parents in the province.

As a result of the limited training awareness, some foster parents attempted to find training on their own. Unfortunately, most foster parents who were able to find training options discovered they were not relevant for their particular situation. For example, one foster parent participant described how the only training she could find was on fetal alcohol spectrum disorder, autism spectrum disorder, or raising teenagers and she only raised infants.

Some child welfare participants identified this unwillingness to attend training as a barrier. For instance, if there was a pre-service training program, foster parents would not be able

to pick and choose which trainings to attend. Child welfare participants argue that despite a training not being relevant to a foster parent at present time, it may be helpful in the future. The lack of access and awareness of training opportunities in this research is in line with other local research findings. In fact, another study in Manitoba found that there were both significant gaps, and a lack of access to trainings available to foster parents (Auditor General of Manitoba, 2019).

### *Addressing the Barriers and Obstacles to Training*

Although some of these barriers are difficult to overcome, others can be addressed. First, providing a training resource webpage for all foster parents in Manitoba would be ideal. Participants described coordinating a webpage for *all* foster parents to look up and see if there are relevant trainings they could attend. Some agency staff have dedicated foster parent workers; however, this is not a reality for all agencies, and it is not consistent for each foster parent. To keep foster parent training opportunities equitable, CFS can provide every licensed foster parent in Manitoba access to a coordinated webpage for every licensed foster parent in Manitoba. Although this may help increase awareness, there are still rural and Northern communities that do not have access to stable internet.

A critical detail foster parent participants identified was for their child welfare professionals to be more aware of trainings, and to pass the information on to them. Again, having an enhanced coordinated effort to training may create more opportunities to foster parents. Both foster parent and child welfare professional participants suggested online or hybrid training options because it would allow much needed flexibility for the foster parents, but not all foster parents (including Northern and rural communities). This is consistent with current literature, which found online foster parent training to be more frequently attended (Delaney et al., 2012). Last, previous children in care suggested that a relevant training would be for all

foster parents to listen to the perspectives of youth who have aged out of care. Of course, not all youth experiences would be the same; however, hearing from youth who have lived in care would provide relevant perspectives.

### ***Training Needs***

It is important to note that participants in each group identified different support and training needs that foster parents require. For instance, some participants thought there should only be mandatory training, some discussed a need for more testing, or a credit-based training system. Furthermore, some participants felt that all of Manitoba's foster parent training needed a complete overhaul and reset, while others discussed some current worthwhile trainings. Despite the varied opinions on the details of training options, all 13 participants strongly support the development of a pre-service training program in Manitoba.

The lack of a mandated pre-service training for foster parent does appear to contradict the current literature, which reveals that many provinces (DeHaan, 2013; Government of Alberta, 2008; Government of British Columbia, 2020; Government of Ontario, 2018; Saskatchewan Foster Families Association, 2012) and American states mandate pre-service training for all foster parent applicants (Benesh & Cui, 2017; Child Welfare League of America, 2020; Christenson & das McMurtry, 2007; Delaney et al., 2012; Festinger & Baker, 2013; Keep Supporting Foster & Kinship Families, n.d.; Ohio Child Welfare Training Program, 2007).

In fact, many developed countries require mandatory training for all foster parents prior to becoming licensed (Aslamazova et al., 2019; Connell et al., 2006; Lotty et al., 2020), with many requiring applicants to complete a minimum of 30 to 40 hours of training relevant to raising children in care (Delaney et al., 2012; Hebert & Kulkin, 2017; Solomon et al., 2017; Strickler et al., 2018; Uretsky & Hoffman, 2017; Vanderfaeillie et al., 2018). Moreover, given

that Manitoba has one of the highest rates of children in care in the world (with almost all children in care being Indigenous), one would expect that having well-trained foster parents would be essential.

**Gaps.** In addition to the lack of pre-service training programs, this research also discussed significant gaps in training opportunities which is consistent among the foster parent literature (Gilbertson et al., 2003; Lotty et al., 2020). One of the most common requests from participants in this research was for more practical training. Perhaps this is because foster parents are unable to respond to various problematic behaviours that their foster children are engaging in. Combined with the lack of supports previously mentioned, foster parents are likely to feel overwhelmed and may quit their positions prematurely. This is in line with current literature, indicating that foster parents who feel unsupported and stressed are far more likely to quit foster care (Hurlburt et al., 2010).

A second noted gap has to do with foster parents' access to culturally-responsive training. In fact, of the six foster parent participants, only one foster parent described having any cultural training. Further, the participant described the training as a general overview in her one-day orientation that touched on the 60's Scoop. She did not receive any information or access to Elders or Knowledge Keepers, who could keep her informed about ceremonies, appropriate cultural practices, and connecting foster children to their culture in an authentic way.

One foster parent suggested having someone to learn from would have been ideal, especially when she was a new, inexperienced foster parent. She described learning about Indigenous cultural practices after decisions had already been made. For instance, this foster parent was not informed about important cultural practices around cutting hair, or when a newborn loses the umbilical cord. She stated being distraught when she felt like she made

culturally inappropriate choices based on her lack of training and awareness of the Indigenous culture. To avoid these situations, most foster parents described reaching out to other foster parents who were raising Indigenous children, in order to ascertain culturally appropriate information.

Along with foster parents, child welfare professionals also discussed the lack of culturally appropriate training for foster parents. Several participants acknowledged the problematic reality that most Indigenous children in care are not getting their cultural needs met. Some child welfare participants described the reactive nature of child welfare systems as being a primary reason for not making cultural training a priority. According to some child welfare participants, most of their time is dedicated to “putting out fires,” or managing larger crises. This includes managing emergency situations such as missing children, intervening when there is a significant risk of a placement breakdown, and finding emergency placements when a placement breakdown does take place. As a result, according to many of the child welfare participants, managing crises overshadows the ability to consider strategies that would promote positive outcomes for children in care.

The previous children in care who were interviewed described their exposure to their culture while growing up. The responses were in line with both the foster parents and child welfare professionals. Most children in care described a lack of opportunities to engage with their culture during their time in foster care. One participant described how she understands now that most of her foster parents likely had good intentions; however, none of them were prepared to respond to her cultural needs. Another participant identified a staff member in a group home as the only person who considered engaging and learning about Indigenous culture as a priority. Last, one participant described having a Black and Indigenous foster mother who was able to

respond more appropriately to her cultural needs. Indeed, a lack of well-trained, culturally responsive foster homes has been documented in Manitoba (Auditor General of Manitoba, 2019); and all of Canada (Canadian Association of Social Workers, 2018).

In addition, this research found that many participants described a disconnect between child welfare policies and the realities of every day foster care. For instance, *The Child and Family Services Act* specifically speaks to children in care being entitled to services which respect their cultural and linguistic heritage in their Declaration of Principles (*Child and Family Services Act*, 1985). However, according to all three participant groups, this is clearly not the case when it comes to training future foster parents.

### ***Unprepared Foster Parents***

This research revealed that Manitoba's foster parents do not feel adequately prepared or supported to begin their foster parent journeys. This is unsurprising given the lack of training the participants received. Specifically, all foster parents felt unprepared to interact with the child's birth family, and most foster parents felt unprepared to engage with the child's culture. Other areas of foster parents felt unprepared was the lack of information provided about the child and being uninformed about the larger system. This includes their social worker role, where to acquire respite services, and crisis management.

Overall, many foster parents in previous research describe a lack of preparation from child welfare services (Gilbertson et al., 2003; Jedwab et al., 2019; Konijn et al., 2019). Furthermore, foster parent literature explored the specific areas foster parents felt the least prepared. The findings from the thesis matched the current literature in terms of specific areas where foster parents were not prepared. This includes not having adequate information on the child in care (Aslamazova et al., 2019; Oosterman et al., 2007); a lack of funding to respond to

the child in care (Aslamazova et al., 2019; Jedwab et al., 2019); and a lack of respite (Gilbertson & Barber, 2003).

### *Unsupported Foster Parents*

The study found that foster parents are not only unprepared, but unsupported in their new positions. Specifically, foster care participants noted they experienced unresponsive social workers, a lack of respite (as noted earlier), and an overall lack of funding to help raise children in care. Perhaps most significant, this research found the child welfare professional participant group acknowledging the lack of support foster parents sometimes receive from social workers. Participants identified several factors that contribute to the lack of support, including a large turnover rate, burnout, and high caseloads.

Social workers who acknowledge the limited support foster parents receive is in line with current research. This includes placing children in homes that are not well matched based on needs of the child and skills of the foster parents, a lack of support when navigating agency red tape, and limited funding for respite and other supports (Canadian Association of Social Workers, 2018; McFadden et al., 2015). Furthermore, foster parent expectations have continued to increase, including the need to respond appropriately to medical needs and cultural needs, and care for children with mental health and behaviour concerns as well as maintaining relationships with birth families. Despite this, along with increased rigorous and intrusive assessment processes (including the home study), the funding and support foster parents receive has either stayed the same or declined (Canadian Association of Social Workers, 2018).

Furthermore, other research found that overall, most foster parents do not feel supported in the difficult work they do when responding to the complex needs of the children they help raise. First, foster parents from several studies have stated a significant reason for placement

breakdowns and quitting their positions prematurely is an overall lack of support Bronselaer et al., 2011; (Cooley & Petren, 2011; van Santen, 2015). More specifically, foster parents spoke about a lack of support in terms of training, and having unanswered requests to attend relevant training sessions (Cooley & Petren, 2011). Other studies found a lack of support for foster parents included limited contact with their social workers (Bronselaer et al., 2011); feelings of isolation (Conn et al., 2018); inability to navigate the complex systems involved in child welfare (Conn et al. 2018; Cooley & Petren); and a lack of time and care when placing a child in their home (van Santen, 2015). Indeed, all three participant groups including foster parents, child welfare professional participants, and previous children in care identified a need for more support.

### ***Experiences of Placement Breakdowns***

Another key finding was the high number of foster parents, child welfare professionals, and previous children in care who experienced placement breakdowns. This is not surprising given the lack of training and support experienced by the foster parent participants. All foster parents experienced placement breakdowns. Of these, many of these could have been prevented according to the participants had they been provided more support and being better equipped to respond to the child's complex needs. Indeed, the current literature indicates placement breakdowns are far more likely to take place when foster parents are not prepared (Collins et al., 2007; Konijn et al., 2019; Oosterman et al., 2007); and the most consistent way to prepare foster parents is through a training program (Aslamazova et al., 2019; Gilbertson et al, 2003; Lotty et al., 2020). In addition, it is important to note that a lack of support is another major reason why foster parents stated they experienced placement breakdowns (Connell et al., 2006; Gilbertson & Barber, 2003; Jedwab et al., 2019).

A unique element of this research was interviewing previous children in care and understanding their experiences of placement breakdowns. More specifically, two participants described their frustration with the system, and how child welfare professionals, foster parents, and everyone else involved in the child welfare system did not consider their feelings or opinions. This is directly in line with standpoint theory, which posits that those who are most affected by systems, such as child welfare, are not considered when said policies are being developed (Unrau, 2007). Indeed, if individuals who were directly involved in the child welfare system were able to have their voices heard through written policy, there would be noted improvements for both foster parents and children in care. One of the most often cited requests in this research was for more training opportunities for foster parents.

Further, because of the lack of support, preparation, and training that foster parents experience, the children who are in foster care often suffer the consequences. The three participants who were former youth in care described negative experiences while in foster care. In fact, two of the participants attributed their time in foster care as the primary reason for not graduating high school on time. One participant stated she became pregnant at a very young age because of the lack of care and supervision she experienced while in care. Perhaps the multiple placement breakdowns, and previous experiences of maltreatment/neglect, the participants may have had a difficult time forming healthy attachments to their ever-changing foster parents. It is important to note that these negative experiences may have been prevented if Manitoba's foster parents were well trained and prepared for the challenging roles.

The lack of permanency and consistency in foster children's lives has been linked to future challenges, including homelessness (Holmes, 2015); involvement in the criminal justice system, either as an offender or victim (Manitoba Centre for Health Policy, 2020); disordered

attachment and poor educational outcomes (Brownell et al., 2015); and premature death (Manitoba Advocate for Children & Youth, 2019).

### ***Training Recommendations***

This research identified several key areas where foster parent training is lacking. All three participant groups made training recommendations, including more training in areas such as communication and documentation, a more comprehensive orientation, a systems training, and child-focused training. Foster parents themselves also recommended a mandatory pre-service training program to become licensed, and mandatory ongoing training. This is consistent with other research, indicating that foster parents in North America have consistently requested more training (Benesh et al., 2017; Festinger et al., 2015; Lotty et al., 2020).

Other training recommendations the foster parent and child welfare professional participants provided were in line with other research. This includes having a theoretical focus, including attachment and developmental theories (Benesh & Cui, 2016; Delaney et al., 2012; Price et al., 2009); providing an online/in-person hybrid training option, especially for those who require more flexibility in their schedules or do not have child care (Delaney et al., 2012); ensuring the training facilitators are relatable, including foster parents and social workers (Benesh & Cui, 2016; Cooley & Petren, 2011; Delaney et al., 2012); and ensuring all foster parents are consistently trained, regardless of which agency or organization they are affiliated with (Benesh & Cui, 2016; Cooley & Petnre, 2011; Solomon et al., 2017).

### ***Preparing and Supporting Foster Parents for Better Outcomes of Children in Care***

The participants in this research described multiple instances where foster parents were not adequately trained or supported. This is supported by recent and local research (Auditor

General of Manitoba, 2019; Brownell et al., 2015). Despite this, research has found there are multiple benefits for children in care when their foster parents are prepared and supported. One benefit of being more prepared, trained, and having open communication with the birth parents is that children in care experience fewer placement breakdowns (Konihn et al., 2019; Lotty et al., 2020; Oosterman et al., 2007). Research indicates that when a child in care remains in a stable placement, there are better outcomes in later life, including stronger attachment, and positive education and mental health outcomes (Konijin et al., 2019; McWey et al., 2010; Office of the Children's Advocate in Manitoba, 2015; Oosterman et al., 2007; Tucker & MacKenzie, 2012). In addition, when foster parents feel supported and prepared, they are better able to respond to their children, even when there are mental health concerns, and cognitive challenges that may lead to behavioural issues (Canadian Association of Social Workers, 2018).

Children in care experience more positive outcomes, including a healthy attachment and normal development, when they can maintain consistent contact with birth family, and when they are placed with safe and stable foster families (Festinger & Baker, 2013; Solomon et al., 2018; Waid et al., 2016). Unfortunately, the previous children in care participants in this study described instances where they were removed from homes on a regular basis, and in some cases, they were not told why they were moving. Some participants also stated they had little contact with their birth families. Previous research found that children in care described not being told why or when they were being moved were some of the most traumatic experiences they had while in care (Unrau, 2007).

The participants in this study described experiences of children in care having multiple placement breakdowns. Research has shown when children in care experience regular moves, they are more likely to experience disrupted development and disordered attachment

(Aslamazova et al., 2019; Cox et al., 2011). The abnormal development can lead to an increase in problematic behaviour (Konijin et al., 2019; Oosterman et al., 2007; Waid et al., 2016). Foster parents have identified problematic behaviour as one of the primary reasons why placements breakdown (Connell et al., 2006). Thus, this behaviour puts children in care at a higher risk to experience more placement breakdowns, creating a vicious cycle of problematic behaviour and subsequent placement breakdowns.

All the participant groups in this study, including previous children in care, foster parents, and child welfare professionals all described the devastating consequences of experiencing a placement breakdown. Previous research indicates similar findings, that foster children, birth parents, foster parents, and social workers are all negatively impacted by a child's placement breakdown (Hurlburt, 2010). In fact, child welfare professionals and foster parents identified placement breakdowns as not only a failure they took personally, but also as a reason to quit their positions prematurely (Connell et al., 2006; Hurlburt, 2010).

Furthermore, participants in this study were asked to describe common placements after a breakdown took place. Child welfare professionals, foster parents, and previous children in care all discussed a higher likelihood of being placed in a shelter or a group home type setting. Others identified the higher risk of older children running away from their new placements, and the reality of some children falling through the cracks of the system, especially when they experience multiple placement breakdowns. All three participant groups discussed a lack of reasonable placement options due to the limited number of licensed foster homes in Manitoba.

In order to avoid the vicious cycle of placement breakdowns and problematic behaviour which can lead to negative outcomes for children in care, foster parents need to be better equipped to manage all aspects of raising children in care. Furthermore, children in care, birth

parents, foster parents, and social workers can be significantly impacted when a placement breakdown occurs. A pre-service training program an excellent strategy to ensure foster parents are prepared and supported for their new positions.

### ***Benefits of a Pre-Service Training in Manitoba***

All 13 of the participants in this study supported the development of a pre-service training program for several reasons. Participants discussed the practical need for access to information that would enhance their skills needed to respond to the children they raise, many with cognitive differences. The training would help cover often untouched subjects, including documentation, interactions with birth families, cultural teachings, systems training, as well as a comprehensive agency orientation. This training would also help manage foster parents' expectations. For instance, some participants in all three participant groups identified foster parents meaning well, but not being fully equipped to manage the child's behaviour. Others stated that foster parents may have a "good heart"; however, they are shocked and unprepared to respond effectively to the child in care.

In addition, participants recognized the benefits of having regular gatherings with other foster parents. This would help to fill a much-needed gap in terms of support. Not only would the foster parents be learning together, but they could become mentors/mentees, and have a new support group. Along the same lines, the participants suggested senior staff members of child welfare agencies and experienced foster parents would be ideal choices for the training facilitators. This is another built-in support, where new foster parents can reach out for information and clarification. Foster parents who feel prepared and supported in their roles are not only less likely to experience placement breakdowns, but they stay in their positions longer (Aslamazova et al., 2019). Indeed, research has found that foster parents cited feeling

unsupported as one of the major reasons for quitting their positions prematurely (Cooley & Petren, 2011; van Saneten, 2013; Vanschoonlandt et al., 2012).

Another benefit to the training, is the *pre-service* nature of the training program. As such, when the training is taking place, the trainees would not yet be foster parents. Therefore, if individuals felt that they could not meet the expectations of a foster parent, they can quit before a child ever entered their home, which would prevent a placement breakdown from ever taking place. Some child welfare professional participants stated that they have placed children in homes that they knew were not a good fit, but made the decisions based on a lack of options. If these foster parents were never licensed, they would not be an option in the first place.

Investing in quality foster parents who are trained and supported would stabilize foster care placements. If placements were more stable, and foster parents were better equipped to respond to the complex needs of children in care, including maintaining contact with birth families, more children in care may be reunified. Further, when foster parents are more prepared and trained, the stable placements will lead to better outcomes for the children they help to raise. In addition, foster parents who experience more stable placements are more likely to maintain their positions as foster parents for a longer period. So, although a pre-service training program would require provincial investment, it would pay off in significant ways. This includes first and foremost better outcomes for children in care, potential for children in care to be reunified with their birth families, and foster parents who are more prepared, trained, and stable, which will create a longer tenure in their foster parent journeys.

### ***Implications for Foster Care Policy in Manitoba***

The implications of this research include the need for strategies and policies that will increase the training and support for foster parents, the consultation of former youth in care for

more effective policies regarding child welfare, and future research implications. First, many of the participants in the study discussed recommendations for better foster parent support, including having foster parent mentors, support groups, and the utilization of online platforms to promote awareness of foster parent training and other support opportunities. Indeed, the study found all foster parents were interested in a support network to talk about concerns, ask questions, and learn from those who would understand their unique circumstances.

Next, it also showed a need for consultations to take place with youth and former youth who grew up in foster care. There are several benefits from shining light on the experiences of youth in care. First, these consultations could help inform future policies in the child welfare system. In addition, youth in care who describe foster care through their own experiences and perspectives can help to develop effective parenting strategies going forward. In fact, some of the foster parent participants in this research recommended that former youth in care share their experiences during training sessions to help give insight to foster parents.

### ***Implications for Research***

The last important implication is the need for future research to explore the training and support needs of Manitoba's foster parents. The proposed future research would include exploring foster parent knowledge gaps. For instance, the foster parents in this research requested a variety of types of training they would feel are most needed. Some foster parents stated they would like to see training that would enhance their practical skills, others wanted more systems training, and some suggested training on report writing. This finding suggests the knowledge gaps are inconsistent across Manitoba's foster parents, and that a basic, pre-service training program would be an ideal strategy to consistently equip all foster parents.

One consistent recommendation made by study participants was a need for more culturally responsive training. Future research by Indigenous Knowledge Keepers could help provide a holistic understanding of the First Nations cultures, including strategies for foster parents to become more engaged in their foster child's cultural activities and events. Providing cultural training to foster parents is directly in line with what the former youth in care participants suggest, and what current literature recommends (Doresey et al., 2008; Hanna et al., 2017; McWey et al., 2010; Truth and Reconciliation Commission of Canada, 2015).

### ***Limitations***

First, the main limitation of this research is the sample size, with only 13 participants in total. A small sample size may not provide a holistic picture of the training experiences for Manitoba's foster parents. Put another way, sample saturation may not have been achieved (Creswell & Creswell, 2018).

In addition to the small sample, another limitation is the lack of diversity in the participants. For instance, most the participants in the study were female, with only two male participants in total: one in the Child Welfare Professional group and one in the Foster Parent group. Furthermore, the only Indigenous participants were from the Previous Children in Care participant group. This is a limitation because it might not reflect the representation of the community (Creswell & Creswell, 2018).

Next, as already acknowledged in the Role of the Researcher section, interpreting qualitative, open-ended data is subjective. It is critical that the researcher be aware of their own biases that may impact on the reliability of the interpretations of the findings. Although it is not possible to remove one's biases completely, it is important for the researcher to be aware of these potential biases. To be reflective my own biases (especially as a foster parent, myself), I engaged

in regular consultation with my advisor who provided guidance and helped me to maintain reflexivity (Grinnell et al., 2016; Moore, 2006).

Next, providing a diverse set of participants allowed for a holistic understanding of the experiences and effects of foster parent training in Manitoba; however, the quality, articulation, and perspective varied from individual to individual (Creswell & Creswell, 2018). In addition, most of the participants were female, with only two out of 13 participants being male. This is likely due to females traditionally engaging in both the caregiver role and social worker role. Last, due to the COVID-19 restrictions, the interviews with participants did not take place in a natural setting with the researcher present and instead was conducted via telephone. Although this was unavoidable, it limited the ability for the researcher to note observations in the participants' natural setting and write field notes (Grinnell et al., 2016).

## **Conclusion**

The study has helped demonstrate the limited support, preparation, and training that Manitoba's foster parents have while attempting to respond to children with some of the highest needs in the province. It is clear from this research that many foster parents and child welfare professionals mean well and want the best for the children in care they are connected to. However, despite the well-meaning, participants from the previous children in care participant group recounted several poor outcomes based on their experiences in foster care. Finally, all 13 participants recognized the need, and supported the implementation of a pre-service training program for Manitoba's foster parents.

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## **Appendix A. Questions for Semi-Structured Interviews for Foster Parents**

### **Participant Background:**

1. How long have you been a foster parent?
2. What agency do you foster for?
  - a. Have you fostered children in any other agency?
3. How many (foster) children do you currently have in your home?
  - a. How many (foster) children in total?
4. Do you have a partner or someone else who lives with you who also helps foster the children in your care?
5. Before becoming a foster parent, did you have any other experience working with children with complex needs?
  - a. How many years of experience, prior to becoming a foster parent?
6. What made you decide to become a foster parent?
7. Aside from being a foster parent, are you working anywhere else?
  - a. Your partner?

### **Training Experience:**

1. Have you had any foster parent training? If so, please tell me about the training sessions you have attended as a foster parent.
  - a. Which ones resonated with you the most? What did you find most helpful?
  - b. Which ones were the most helpful?
  - c. What were the major subjects or themes of the training?
  - d. Were they specifically focused around children in care in Manitoba?

2. Did you participate in any pre-service foster parent training programs as a requirement to become licensed? Please describe.
  - a. Was this training helpful? Did it help you feel more prepared as a foster parent
3. How prepared did you feel as a foster parent on the following (i.e., 1 = not at all, 5 = very much):
  - a. Comfortable interacting with child's culture (i.e., awareness of programs, bringing new practices to your home, providing resources and knowledge to the child)
  - b. Responding to problematic behaviour (i.e., anger, drug use and abuse, violence, damaged property, AWOL)
  - c. Adapting parenting strategies when current strategies are not working
  - d. Working with other supports in the child's life (i.e.: case managers, social workers, teachers, therapists, doctors, support workers)
  - e. Advocating for child
  - f. Responding to crisis situations
  - g. Day to day love and care that will promote the child's well-being (i.e.: intense need for constant attention)
  - h. Interacting with natural family
  - i. Creating a support system including experienced mentors and respite providers
4. If you could develop a training session that all of Manitoba's foster parents would attend, what would it look like?
  - a. Themes/subjects?
  - b. Who would facilitate it?

- c. How long would it be (Hours? Weeks?)
  - d. When would it be offered (during the day, evening, weekend)?
5. What type of subject material do you think is missing from training sessions for foster parents in Manitoba?
  - a. Identify training gaps
6. What type of platform would be most ideal for you to receive training?
  - a. Online, in-person, hybrid?
  - b. Discussion, role-plays, lecture?
7. Are you aware of any agency or network that provides training to foster parents?
  - a. Have you ever taken training from these sources?
  - b. What was your experience with these trainings?
8. Do you now, or have you ever cared for Indigenous, Inuit, or Métis children in your home?
  - a. If so, have you received cultural training? Please describe.
  - b. Do you feel prepared to provide the children in your home with important cultural experiences? (i.e., access to an Elder, attending cultural events and celebrations, knowledge/awareness of cultural practices)
9. Do you now, or have you ever cared for children of other racial backgrounds?
  - a. If so, have you received cultural training? Please describe
10. What are obstacles you face when it comes to accessing foster parent training?
11. Would you support a pre-service training program for foster parents that was developed right here in Manitoba?

12. Is there anything else you would like to tell me about your experiences or thoughts on foster parent training in Manitoba before we move on?

**Placement Breakdown Experience:**

As a foster parent myself, I understand how devastating and upsetting it can be when experiencing or talking about a placement breakdown. At any time during this portion of the interview, please feel free to take a break, pass on questions, or do what you need to make yourself comfortable.

1. Have you experienced placement breakdowns as a foster parent?
  - a. How many/how often?
2. Looking back, do you think these breakdowns could have been prevented in any way?
  - a. If so, how?
3. Do you know where the children in care moved to after the placement breakdown?
4. Not necessarily related to placement breakdown, but what challenges have you experienced as a foster parent?

## **Appendix B. Questions for Semi-Structured Interviews for Child Welfare Professionals**

### **Demographic Information:**

1. How long have you been a child welfare professional?
  - a. What is your current title?
2. What agency do you work for?
3. Before beginning this role, do you have other previous relevant experience in child welfare?
4. What made you decide to become a child welfare professional?
5. Where do you work in Manitoba?
  - a. Rural/urban?

### **Foster Parent Training Experience:**

1. Tell me about the training sessions you provide to your foster parents.
  - a. Which ones do you think are the most impactful/helpful?
  - b. What were the major subjects or themes of the training?
  - c. Were they specifically focused around children in care in Manitoba?
2. Prior to becoming licensed, do your foster parents engage in any pre-service training?
  - a. Please describe.
  - b. Do you feel this training adequately prepares your foster parents to provide appropriate care to (foster) children?
3. If you could develop a training session that all of Manitoba's foster parents would attend, what would it look like?
  - a. Themes/subjects?
  - b. Who would facilitate it?

- c. How long would it be (Hours? Weeks?)
4. What type of subject material do you think is missing from training sessions for foster parents in Manitoba?
  - a. Identify training gaps
5. What type of platform do you think would be most ideal for foster parents to receive training?
  - a. Online, in-person, hybrid?
  - b. Discussion, role-plays, lecture?
6. Are you aware of any agency or network that provides training to foster parents?
  - a. Do you refer your foster parents there?
  - b. Thoughts?
7. Do the foster parents in your agency receive Indigenous cultural training?
  - a. Please describe.
  - b. Do you feel the foster parents in your agency are prepared to provide the children in your home with important cultural experiences? (i.e.: access to an Elder, attending cultural events and celebrations, knowledge/awareness of cultural practices)
8. What do you think are the largest obstacles (if any) that foster parents face when attempting to access relevant and helpful training?
9. Would you support a pre-service training program for foster parents that was developed right here in Manitoba?
10. Is there anything else you would like to tell me about your thoughts on foster parent training in Manitoba before we move on?

**Placement Breakdown Experience:**

As a foster parent myself, I understand how devastating and upsetting it can be when experiencing or talking about a placement breakdown. I can imagine it can feel similarly for child welfare professionals. At any time during this portion of the interview, please feel free to take a break, pass on questions, or do what you need to make yourself comfortable.

1. Have the children you supervise/have guardianship of experienced placement breakdowns?
  - a. Is this something that happens on a regular basis?
2. Looking back, do you think these breakdowns could have been prevented in any way?
  - a. If so, how?
3. In your experience, after children in care experience a placement breakdown, where do they tend to go afterwards?
  - a. Other foster homes, group homes, runaway, criminal justice involvement?
4. Not necessarily related to placement breakdown, but what challenges have you noticed that foster parents/children tend to experience?

## **Appendix C. Questions for Semi-Structured Interviews for Young Adults (Previous Children in Care)**

### **Demographic Information:**

As a foster parent, I recognize the difficult challenges some children who grow up in foster care might experience. Your voice matters, and I want to make sure you are heard; however, some of these questions may be difficult to answer. I completely understand and want you to be comfortable throughout the interview. If at any time you want to take a break, pass on answering questions, or end the interview – I want you to feel empowered to do so, and your decisions will be respected.

1. How long were you in care for?
  - a. How many families did you live with?
2. Do you currently have contact with any of your (foster) parents?
3. Where are you currently residing?
  - a. Rural/urban?

### **Lived Experience-based Questions:**

1. Was there a home (or several) that you felt were the best/most welcoming?
  - a. If so, what did they do that made you feel this way?
2. What were the largest struggles/challenges you faced while living in a foster home?
  - a. Do you think your foster parents were able to respond well?
  - b. Why/Why not?
3. What do you think could be done to make living in foster care a better experience?
4. Do you think your foster parents had training that improved their parenting?
5. Did your foster parents ever receive Indigenous cultural training that you know of?

- a. Please describe.
  - b. Do you feel your foster parents were prepared to provide you with important cultural experiences? (i.e.: access to an Elder, attending cultural events and celebrations, knowledge/awareness of cultural practices)
6. What do you think are the largest obstacles (if any) that foster parents face when attempting to access relevant and helpful training?
7. Do you support foster parents in Manitoba getting trained before they become foster parents?
  - a. Do you think it would be a benefit to have training that specifically addresses issues faced by Manitoba's children in care?
8. What do you think are the biggest obstacles/challenges that Manitoba's children in care experience?
9. Did you ever have to move homes while in care?
  - a. Were you told the reasons why?
10. What do you think are the biggest obstacles/challenges that foster parents experience?
11. If you could have a magic wand and make changes in the foster care system, what would they be?
12. Is there anything else you would like to tell me about your thoughts or experiences about growing up in foster care?

## **Appendix D. Foster Parent Training Programs**

Provided below is a description of both, along with other foster parent training programs, that are also used in the United States, but less often. The following trainings are also not offered in Canada, and include another pre-service training program, the Ohio Child Welfare Training Program. Also included are other training programs that are not pre-service, but have shown positive results, including KEEP: Keeping Foster and Kin Parents Trained and Supported, the Incredible Years intervention, and Circles of Security Foster Parent Training.

### ***PRIDE Training***

The PRIDE pre-training program was developed in the 1990s by the Child Welfare League of America as a way to implement a standardized recruitment, preparation, and selection of foster parents across the United States. Since then, more than 25 countries have adopted the model (Child Welfare League of America, 2020). The PRIDE model has five core competencies, including protecting and nurturing children, meeting children's needs and addressing their delays, supporting relationships with natural families, connecting children to safe families intended to last a lifetime, and working as a member of the professional team (Child Welfare League of America, 2020).

Although the PRIDE pre-service training program is used extensively in North America and beyond, there are some concerns about the program. First, some jurisdictions make some drastic changes to the program in order to suit the local context of foster care, which would affect the fidelity of the program (Price et al., 2009). In addition, despite research indicating foster parents are most interested in receiving training on strategies to manage challenging behaviour (Cooley & Petren, 2011; Delaney et al., 2012; Hebert & Kulkin, 2018), PRIDE does not focus on these strategies. Instead, the pre-service training program primarily provides information about

the recruiting and licensing process, determines suitability of prospective foster parents, and provides a general overview of the child welfare system (Delaney, 2012).

Furthermore, the literature points to a major gap when it comes to foster parent training program evaluations (Benesh & Cui, 2017; Festinger & Baker, 2013; Puddy & Jackson, 2003). In fact, one systematic review found only seven articles on foster parent training programs; and none were completed on PRIDE (Festinger & Baker, 2013). However, a different systematic review found one evaluation on PRIDE (Delaney et al., 2012). Indeed, Christenson and McMurtry (2007) found that participants in Idaho had an increase in knowledge from pre-test to post-test measures in the five core competencies. Limitations of the study include a small sample size and a lack of control group (Delaney et al., 2012). Currently, PRIDE relies only on self-assessments from participants to measure whether the training has prepared them to become foster parents (Delaney et al., 2012). Lastly, an overall challenge in evaluating the PRIDE training program is the significant variance in the delivery. There are different facilitators, different material, and different delivery methods, including online, in-person, and a hybrid of both (Delaney et al., 2012). Thus, although one small study yielded some positive results for the PRIDE training, there are too many unaddressed problems (i.e., context, limited evaluations, lack of practical strategies) that make PRIDE a problematic choice for Canadian foster parents.

#### ***Model Approach to Partnerships in Parenting Group Preparation Selection (MAPP/GPS)***

Along with the PRIDE training, the MAPP/GPS training is another often utilized pre-service training program for foster parents that was developed in the United States. The MAPP/GPS was developed by the Child Welfare Institute in Massachusetts in the 1980s in order to prepare future foster parents by providing them with relevant information (Delaney et al, 2012). The training program consists of 30 hours that take place over 10 sessions. Similar to the

PRIDE training, MAPP/GPS provides a general overview of the child welfare system. In addition, it provides information on attachment theory, grief and loss, connection to the natural family, and understanding the impact of foster care (Children's Bureau, n.d.).

Again, similar to the PRIDE training program, the research on MAPP/GPS evaluations is minimal (Delaney et al., 2012). In 2003, Puddy and Jackson completed one of the only evaluations on the program, and their findings are problematic. In fact, the findings suggest that the MAPP/GPS pre-service training program does not adequately prepare foster parents, according to its own identified goals. In addition, this training program was not found to prepare prospective foster parents to manage challenging behaviour (Puddy & Jackson, 2003). The same evaluation found that MAPP/GPS training does not have any theoretical foundation that informs its assumptions, content, or methods. It is important to note that there were some limitations of this evaluation, which included no random assignment, and a small control group (Dorsey et al., 2008). However, based on these findings, it was recommended that at best, the MAPP/GPS program be used for prospective foster parents to make an informed decision about whether they wish to proceed with the profession (Dorsey et al., 2008).

### ***Ohio Child Welfare Training Program (OCWTP)***

The OCWTP was developed in the 1980s in Ohio. This pre-service training program was created for foster parents and child welfare professionals. The focus of the training is to promote the mastery of skills, strategies, and knowledge necessary to respond to the complex needs of children in care (Ohio Child Welfare Training Program, 2007). One of the primary purposes of the training is for participants to complete a self-assessment to determine whether they are a good fit for foster parenting (Delaney et al., 2012). This training program is available only in the

state of Ohio, and the particular training curriculum is directed by a steering committee comprised of child welfare professionals (Ohio Child Welfare Training Program, 2007).

It is important to note that this pre-service training program has never been formally evaluated; however, the program itself does receive feedback from participants. According to this feedback, participants noted increased knowledge in six different content areas covered in the training. These include separation and placement, birth family, discipline and control, sexual abuse, and values and standards (Delaney et al., 2012). In addition, according to child welfare professionals in Ohio, the foster parents who were trained in this program seemed to be more prepared, flexible, and willing to engage with natural families (Delaney et al., 2012).

***KEEP: Keeping Foster and Kin Parents Trained and Supported***

KEEP is another training program for foster and kinship parents. It was developed in the 1980s in Oregon and contrary to the two prior described programs, KEEP is evidence-based and trauma-informed (Price et al., 2019). This training is based on the tenets of social learning theory and its curriculum includes effective strategic responses for challenging and complex behaviour. These include positive reinforcement, the use of non-harsh discipline methods, close monitoring of the foster child, being aware of peer associations, and working with collaterals to improve school outcomes. The structured training sessions include curricular content, videos, role plays, and discussions. In addition, the KEEP training provides a critical mentorship component. Mentors check in with prospective foster parents via weekly telephone calls for further discussion and clarification (Price et al., 2009).

It is important to note that KEEP is not a pre-service training program. In order for foster parents to participate in this training, they would have to complete their jurisdiction-required pre-service training program (i.e., either PRIDE or MAPP/GPS). It is unfortunate that one of the few

training programs for foster parents that has been extensively evaluated is a program that is not required (Price et al., 2019). The evaluations include six randomized controlled trials, independent replications, and external evaluations that have been published in peer reviewed journals (Uretsky & Hoffman, 2017).

Further, the evaluations have shown promising findings, including lower rates of emotional and behavioural challenges in foster children, fewer placement breakdowns, lower foster parent attrition, and more natural family reunifications (Keep Supporting Foster & Kinship Families, n.d.; Price et al., 2009; Uretsky & Hoffman, 2017). Although these results are the most promising of foster parent training interventions, more questions do need to be answered. These include whether the effects of the KEEP intervention generalize to other children in the home (i.e., age, personality, trauma). In addition, a longitudinal study is needed to determine whether these developed skills last over time (Price et al., 2009).

### ***The Incredible Years Parenting Intervention***

The Incredible Years (IY) is a 14-week parenting intervention program designed for parents who have children aged three to six. It focuses on building skills in positive parenting, teaching, and connecting with collateral agencies, including schools and daycares (Webster-Stratton et al., 2004). While this program is not developed specifically for foster parents, one module was subsequently added to the IY curriculum after a pilot study was completed in order to meet the unique needs of foster parents. This included information on the impact of trauma on childhood development, culturally relevant components, attachment and bonding, and roles and challenges in foster care (Conn et al., 2018). The pilot study found that compared to the control group, foster parents in the IY treatment group had significant positive changes in parenting attitudes as well as improvements in the perceptions of child behaviour problems and mental

health needs. The study proposes the trauma-informed Incredible Years training can benefit foster parents, given the current unmet training needs (Conn et al., 2018).

### ***Circles of Security Parent Training Program (COS-P)***

The COS-P training program has a main focus of improving the caregiver-child relationship. It is an eight-week education-based program developed to promote secure attachment and prevent infants from developing insecure attachments. The training program is supplemented with audio-visual and printed materials in order to facilitate discussion and understanding of the importance of the attachment theory, and the benefits of having a child who is securely attached to at least one adult caregiver. The training was developed in the early 2000s by Glen Cooper, Kent Hoffman, and Bert Powell in California, who were all therapists wanting to spread information about the importance of attachment to parents (The Circle of Security International, 2019).

There has only been one study exploring whether this well-regarded parenting program would benefit foster parents in the same way it does with their natural parent counterparts. The hypotheses of this study were that the quality of the caregiver-child relationships would improve after the training had been completed by foster parents. It is important to note that no main effects of this intervention were found for changes in the foster parent-child relationship. Krishnamoorthy and colleagues (2020) described the puzzling findings, as the primary aim for COS-P training is to improve the parent-child attachment relationship.

This new evidence is a clear indication that foster parents and their relationship with the children they care for is far more complex than the relationships biological parents have with their children. In fact, Krishnamoorthy and colleagues (2020) suggested that the reason for no main effects in the study could be due to the previous traumatic experiences that foster children

have experienced. They recommend future studies using COS-P to train foster parents should document the different types of maltreatment concerns the foster children have experienced, including neglect, sexual, physical, psychological and emotional abuse. This strategy could highlight any differences in the program's impact going forward. It is clear that training foster parents is simply not as easy as providing them with a traditional parenting program. Along with this significant challenge, there are several other challenges described below.

## Appendix E. Ethics Certificate



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### PROTOCOL APPROVAL

**To:** **Jamie Pfau** (Advisor: Kendra Nixon)  
Principal Investigator

**From:** **Jonathan Marotta, Chair**  
Research Ethics Board 1 (REB 1)

**Re:** **Protocol # R1-2021:045 (HS24789)**  
**Exploring the Training Needs of Manitoba's Foster Parents**

**Effective:** March 29, 2021 **Expiry:** March 29, 2022

**Research Ethics Board 1 (REB 1)** has reviewed and approved the above research.

REB 1 is constituted and operates in accordance with the current [Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans – TCPS 2 \(2018\)](#).

This approval is subject to the following conditions:

- i. Approval is granted for the research and purposes described in this application only.
- ii. Any changes to this research must be approved by the Human Ethics Office (HEO) before implementation.
- iii. Any deviations to the research or adverse events must be reported to the HEO immediately.
- iv. This approval is valid for one year only. A Renewal Request Form must be submitted and approved prior to the above expiry date.
- v. A Study Closure Form must be submitted to the HEO when the research is complete prior to the above expiry date, or if the research is terminated.
- vi. The University of Manitoba (UM) may request to audit your research documentation to confirm compliance with this approved protocol, and with the UM [Ethics of Research Involving Humans](#) policies and procedures.

**Funded Protocols:** Email a copy of this Protocol Approval, with the corresponding UM Project Number, to [ResearchGrants@umanitoba.ca](mailto:ResearchGrants@umanitoba.ca)