



Placement disruption in long-term kinship and nonkinship foster care[☆]



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ABSTRACT

The purpose of this study was to explore factors related to placement disruption in long-term kinship and nonkinship foster care in a Nordic country.

The study included 136 children aged 4–13 years in kinship and nonkinship foster care in Norway in the year 2000, with updates for the year 2008. Placement and demographic information and the Child Behavior Checklist (CBCL) were collected from foster parents and youths. Generalized linear mixed model analysis was undertaken. A thorough literature review was done in order to study association between disruption and relevant variables.

None of the predominant variables from previous literature were significantly associated with disruption for this sample of children in long-term foster care.

Since long-term stable foster care (rather than adoption) is the preferred option in Nordic as well as some other European countries, there is a need to explore the processes of inclusion that give children a lifelong commitment to their foster families.

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1. Introduction

This article presents findings from a longitudinal study on factors associated with disruption in long-term kinship and nonkinship foster care. Kinship foster care as one alternative type of placement is here defined as children being cared for by non-parental relatives within child-protection jurisdiction.¹

The need to secure stability and prevent the breakdown of foster families is grounded in theory, policy and practice. The basic understanding within the literature of child welfare is that the negative effects of maltreatment on children's mental health and their well-being can be healed by placement in a stable family (Berger, Bruch, Johnson, James, & Rubin, 2009; Carlson, 2002; Harden, 2004). When children needing care because of neglect and abuse are required to move from one foster family to another, earlier social relationships might be lost. The child must also learn new family values and rules and get accustomed to a new physical and social environment.

In quantitative studies with children and youths in foster care, placement instability has been seen to have an impact on self-esteem, delinquency (Ryan & Testa, 2005), educational achievement, behavior problems, social network disruption and drug use (Berger et al., 2009; Carlson, 2002; Harden, 2004; Rubin et al., 2004). Qualitative studies with youths in foster care and young adults leaving foster care have found themes of loss and loneliness as well as a lack of the sense of belonging due to placement disruptions (Stott & Gustavsson, 2010). Of the cited references above, Berger et al. (2009) and Carlson (2002) refer to studies where both kinship and nonkinship foster care were included. The other references do not specify the type of foster care placement.

Theories from psychology, social sciences and jurisprudence have influenced thinking about child welfare. Within psychology the attachment theory developed by Bowlby has been recognized as applicable to children in foster care, on both social and legal grounds (NOU:5, 2012; Oosterman, Schuengel, Wim Slot, Bullens, & Doreleijers, 2007). This theory claims that children placed in foster care lose access to persons to whom they had become attached, and this can only be resolved by relating to alternative caregivers (Bowlby, 1973/1998). From sociology, theories of family have been used in order to study relationships between child and foster family (Thørnblad & Holtan, 2011b) and social integration of foster children (Holtan, 2008). Theories on power have been used to study the relationship between child and family on the one hand and between child and child-protection system on the other (Thørnblad & Holtan, 2011a). Koh and Testa (2008) relate placement in kinship foster care to altruism and family duty.

Since the Convention on the rights of the child was adopted by the United Nations (UN) in 1989, social theories that see children as social

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¹ The term "nonkinship foster care" will refer to placements with others than relatives. "Foster care" will refer to both kinship and nonkinship foster care placement where type of placement is not specified.

actors and not merely as objects of socialization have come to the fore. Although there is little empirical evidence of a link between child collaboration in the placement process and subsequent placement disruption, it has been suggested that greater stability in foster care is achieved when the child participates in the matching and preparation process (Altschuler, 1999). In many agencies in western countries, however, a limited pool of available foster carers limits participation by children in “choosing” a caregiver.

The underlying goal of foster care is that children should avoid multiple moves between different kinship and nonkinship foster homes and group homes. This goal may be seen either as “permanence” or “stability.” Permanency refers to reunification, adoption or guardianship (Winokur, Holtan, & Valentine, 2009). Stability refers to number of placements, re-entry and length of placement (op. cit.). As there are essential differences among countries concerning child-welfare policy, legislation and practice, the relevance of these two terms will vary between countries. Within Nordic countries, the Netherlands, Spain and Australia, long-term stable foster care is preferred, and adoption is seldom an option (Sallnäs, Vinnerljung, & Kyhle Westermarck, 2004; Strijker, Zandberg, & Van Der Meulen, 2003). Stability is therefore a relevant measure in the evaluation of foster care in these countries (Sallnäs et al., 2004). The aim in these countries is to maintain continuity of family relationships while the child is in state custody. In the US, in contrast, the 1980 *Adoption Assistance and Child Welfare Act* requires that public child-welfare agencies pursue legal permanence (adoption, guardianship) for children in out-of-home care (Shlonsky, 2006). Permanency thus is in line with US policy and legislation.

Although child-welfare policy has emphasized stability, research indicates that placement disruption is a major problem of child welfare in western countries. Rates of prematurely terminated placements vary from 30 to 37% in a Swedish sample, the exact number depending on whether a narrow or wide definition of breakdown was applied (Sallnäs et al., 2004), and is 39% in a Norwegian sample of 70 children during a period of 7.5 years (Christiansen, Havik, & Anderssen, 2010). Half of all children in the US experience at least one placement change while in care (Connell et al., 2006). A longitudinal study from Spain, however, reports that only 15% of children in foster care (in a sample of 649) experience two or more placements (del Valle, López, Montserrat, & Bravo, 2009). The authors state that stability emerges as a dominant trait in Spanish foster care.

The research literature differs in terminology and definitions of placement disruption, e.g., breakdown, instability, number of placement changes, unplanned removal. We define placement disruption in this article as the phenomenon when a foster-home agreement is terminated and a child in state custody (on care orders) must move to another foster family or residential care.

1.1. Purpose and aim

The purpose of this study was to explore factors associated with placement disruption in long-term nonkinship and kinship foster care in a Norwegian sample of 136 foster children. The study sought to identify the child and placement characteristics associated with disruption. The aim was to place the findings in the context of current child-protection policy in a Nordic country and discuss the implications of the findings for further research in order to create stable placements.

2. Research on factors associated with disruption

There are several studies and systematic reviews on factors related to stability versus multiple placements. In the following section we will give an overview of the significant factors.

2.1. Factors associated with children's background

2.1.1. Age at placement

In their systematic review, Oosterman et al., 2007, examine risk and protective factors associated with placement breakdown across 26 studies (dating from 1960 to 2005) of 20,650 children in foster families. Of these, six studies of 11,390 participants compared kinship and nonkinship foster care in relation to placement disruption (Berridge & Cleaver, 1987; Iglehart, 1994; James, 2004; Usher, Randolph, & Grogan, 1999; Webster, Barth, & Needell, 2000; Wulczyn, Kogan, & Harden, 2003).

Results from the analysis of the total sample indicate that children placed at an older age experience more placement breakdown (Oosterman et al., 2007). Meta-analysis shows significant but small effect sizes, and smaller effects in multivariate studies when controlling for other factors (op. cit.). Their findings also indicate that age was a more important factor in non-US studies and in more recent studies. Recent studies further show that risk of disruption increases with a child's age (Akin, 2011; Connell et al., 2006; Strijker, Knorth, & Knot-Dickscheit, 2008).

2.1.2. Behavior problems

The systematic review by Oosterman et al. (2007) showed a significant association between behavior problems and disruption in several studies. These studies found that children and adolescents with behavioral problems were the least likely to achieve placement stability. For example, James (2004) found that 20% of all placement changes were behavior related and 70% of all placement changes were the result of system or policy mandates. The remaining 10% were caused by events occurring in the lives of the foster families (sample size = 1084). The highest risk of behavior-related moves occurred during the 100 days after placement (associated with older age and evidence of externalizing problems). Findings from the study suggest that behavior-related problems could serve as a critical marker for targeted intervention.

Newer studies are confirming an association between placement disruption and behavior problems (Akin, 2011; Chamberlain et al., 2006; Eggertsen, 2008; Hurlburt, Chamberlain, Degarmo, Zhang, & Price, 2010). However, there are studies that demonstrate no association between the number of placements and mental health (Berger et al., 2009; Chew, 1998). These studies indicate that other demographic or environmental factors may contribute to behavioral outcomes. They emphasize a need to understand the complexity of foster-care moves. Some moves might in fact be fruitful for children (Berger et al., 2009; Chew, 1998). For example, if the foster parents cannot nurture a close relationship with a foster child, and if the child is allowed to play an active role in the placement process, the child may choose to break off the relationship (Andersson, 2005). In such cases, breakdown might not be a bad outcome for the child (Andersson, 2005).

2.1.3. Placement history

Results suggest that children with previous placements in foster care experience more placement disruptions, although there is doubt whether number of placements is an independent predictor (Oosterman et al., 2007:66). Oosterman et al. (2007) cite Webster et al. (2000), for instance, and claim that children with more than one placement move in the first year of foster care were more likely to experience placement instability over the long term than if they did not move or were moved only once during their first year in foster care. In their review, Oosterman et al. (2007) found that the first six months of placement carry the highest risk of disruption. Subsequent studies also have found that early stability is an important predictor of foster-care permanency (Akin, 2011; Koh & Testa, 2008; Lernihan & Kelly, 2006; Strijker et al., 2008).

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