

IMPLEMENTING CHANGE IN CHILD WELFARE: LESSONS FROM *FAMILY TO FAMILY*

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October 1997

Preface

This report uses data from focus groups with workers and foster parent to assess changes in attitudes and practices related to the implementation of *Family to Family*. It begins by describing the methods used to plan and conduct a total of 40 focus groups with individuals involved in both *Family to Family* and more traditional practice models. It also describes methodological limitations that should be kept in mind when drawing conclusions based on focus group data. The report then presents workers' and foster parents' perspectives on six topics: services for children and families, resources to support them in their respective roles, support and encouragement, information sharing, partnership with birth parents, and perceptions of the *Family to Family* Initiative. Where possible, comparisons are drawn between the perspectives of workers and foster parents, and with comparable discussions in an earlier series of focus groups. Perspectives of workers and foster parents are considered important because of their direct influence on the implementation of practice changes in support of the goals of *Family to Family*.

The evaluation team for this Initiative includes staff from the prime contractor, Research Triangle Institute (RTI) and faculty and staff from its collaborator, the School of Social Work at the University of North Carolina at Chapel Hill (UNC). Charles L. Usher of UNC serves as the principal investigator and Deborah Gibbs of RTI is project manager. They share leadership of the evaluation team with Judith Wildfire, formerly of RTI and now with UNC. The focus group study was led by Deborah Gibbs, with assistance from Karen Lissy and Nancy Braxton.

Opinions and conclusions expressed in this report are those of the authors and are not necessarily shared by the Annie E. Casey Foundation, the sponsor of the evaluation. For further information about the evaluation of *Family to Family*, please contact the principal investigator at:

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Table of Contents

	Page
Preface	i
INTRODUCTION.....	1
METHODOLOGY	3
Description of Focus Groups	3
Limitations of Focus Group Methodology.....	6
RESULTS.....	8
Services	8
Resources.....	10
Support and Encouragement	15
Information	21
Partnership	25
Reform.....	30
DISCUSSION.....	31
APPENDIX	
Focus Group Protocols	

List of Exhibits

	Page
1 Focus Group Composition by State, Site, and Participants(Groups operating in Family to Family model shown in bold print)	4
2 Focus Group Discussion Topics	5

List of Charts

Foster Parents: Availability of Services	9
Workers: Availability of Services	10
Foster Parents: Reimbursement Issues	12
Workers: Caseload Levels	15
Foster Parents: Support from Caseworker	17
Workers: Assessment of Foster Parents	20
Foster Parents: Access to Information	22
Workers: Sharing Information.....	24
Foster Parents: Mentoring Birth Parents.....	27
Workers: Partnership with Birth Parents.....	29

INTRODUCTION

During the implementation phase of the Family to Family initiative, agency leaders have made significant changes in the policies, structure and resource allocation patterns of their foster care programs. The purpose of these innovations is to rebuild foster care as a family-centered process that actively engages child welfare workers and foster parents as partners in rebuilding and supporting families. Over time, this transformation should reduce the length of time children spend in foster care, increase the proportion of children who are reunited with their families, and reduce the likelihood that children will later re-enter care.

This report uses information collected through a series of focus groups with workers and foster parents to examine their attitudes, beliefs, and self-reported practice patterns in the third year of the Family to Family Initiative's implementation phase. A separate report, to be distributed in early 1998, will present findings from analysis of longitudinal data and from interviews with program leaders and managers. Based on the experiences described by workers and foster parents, we can assess the changes that have occurred as a result of the Initiative, and the barriers that stand in the way of achieving even greater changes. Focus group data are intended to complement other components of the Family to Family evaluation by providing a complement to interviews with agency leaders, and by suggesting possible interpretations of quantitative data and directions for further investigation.

Although it is shaped in important ways by administrative decisions, foster care is ultimately a service delivered by line workers and foster parents. Therefore, the degree to which this ambitious undertaking succeeds depends largely on two factors:

- the extent to which workers and foster parents are willing and able to engage in a partnership with each other and with birth parents to care for children and support families; and
- how well the agency's policies, structure and resources support this partnership on a day-to-day basis.

In interviews conducted during the planning and early implementation phases, workers and foster parents described such a partnership as being characterized by an open exchange of information and support. Based on these discussions, and on focus groups conducted during the first year of implementation, we hypothesized that each group's willingness to engage in partnership the other, and to adopt a family-centered practice model, would in large part depend on the extent to which they felt confident of adequate resources to perform their duties, access to services, and support and encouragement from the child welfare agency, as shown below.

The section following this one describes how the focus groups were conducted and reviews some of the limitations of focus group methodology that should be kept in mind when reviewing the findings. Section 3 presents the results of the focus groups, organized into four areas. We first examine how workers and foster parents feel about their roles, in terms of the resources and supports available to help them serve children and families, and the practical and interpersonal support available to them. We then look at their perspectives on the partnership between foster parents, workers and birth parents. Finally, we assess their perception of the Family to Family Initiative. Section 4 discusses the findings in terms of changes observed in the course of the implementation phase, and implications for continued efforts.

METHODOLOGY

Description of Focus Groups

We conducted focus groups in each of the Family to Family implementation sites,¹ for a total of 40 groups, between March of 1996 and February of 1997. Although terminology and role differentiation vary among sites, worker groups included non-supervisory workers responsible for making foster care placements, providing ongoing casework with children in foster care, reunifying and arranging adoptions for children leaving foster care, and providing ongoing support to foster homes. We attempted to limit participation to workers who had been employed at the site for at least six months, although this condition was occasionally not upheld. Foster parent groups included licensed foster parents who were currently caring for a non-relative foster child, or who had done so within the previous six months.

During the first round of evaluation focus groups, conducted in 1994,² we also held groups within each state that were matched as closely as possible to the Family to Family sites. Because even relatively similar communities varied in many important ways other than the presence or absence of Family to Family funding, the data from non-participating communities did not prove to be sufficiently informative to justify repeating these groups. Within Family to Family sites, we held separate groups to compare the experience of workers and foster parents practicing within the new model to those operating under a more traditional practice model. It is important to note that this distinction is not precise, since the implementation process proceeded somewhat differently in each site. Counties in New Mexico had no traditional groups, since Family to Family was implemented county-wide in that state. Exhibit 1 summarizes the composition of groups within each state.

To recruit participants for the foster parent groups, we first requested names and addresses of foster parents who met the geographic or practice model definitions defined for that site. We then mailed lead letters, on the letterhead of the local agency and signed by the local Family to Family coordinator or foster home resource coordinator, to potential participants. To ensure adequate participation, we mailed as many as 30 lead letters per group, randomly selecting names from any list that included more than 30 potential participants. The letter described the focus group, let foster parents know that they were free to participate or not as they chose, and invited them to call RTI's toll-free number for more information if they were interested. Those who called were screened to confirm eligibility, and given information as to the time and location of their group. RTI staff made additional calls as needed to recruit participants.

Because of the well-known difficulties of reaching social workers by telephone, we worked through supervisors to recruit participants for these groups. Although functional definitions vary among departments, groups were composed of workers who provide treatment services to children in foster care and their parents, as well as workers who recruit and monitor foster homes. In some

¹ Birmingham, AL; Baltimore and Prince George's County, MD; Albuquerque and Santa Fe, NM; Cleveland and Cincinnati, OH; Philadelphia, PA.

² *Evaluation of Family to Family: Reconstructing Foster Care: Focus Group Report*. June 15, 1995: Research Triangle Institute.

Exhibit 1
Focus Groups by State, Site, Participation and Type
(Groups operating in Family to Family model shown in bold print)

State	Site	Foster Parents	Workers
<i>Alabama</i>	Jefferson County	Target neighborhood Other foster parents	Family to Family unit Other workers
<i>Georgia</i>	Savannah	Zone 1 foster parents Zone 5 foster parents	Family to Family workers* Other workers
<i>Maryland</i>	Baltimore	Zone 17 foster parents Zone 19 foster parents	Family to Family unit* Other workers
	Prince George's County	Family to Family foster parents Other foster parents	Family to Family unit* Other workers
<i>New Mexico</i>	Bernalillo East	Foster parents (2 groups)	Workers (2 groups)
	Bernalillo West	Foster parents (2 groups)	
	Santa Fe	Foster parents	Workers (2 groups)
<i>Ohio</i>	Cuyahoga County	West Side foster parents Glenville foster parents	West Side workers Glenville workers Other workers
	Hamilton County	Primary site Site 2 Site 3	Primary site workers Site 2 workers Site 3 workers
<i>Pennsylvania</i>	Philadelphia	Private agency foster parents Private agency foster parent DHS foster parents	DHS workers

*Group included paraprofessional case aides.

communities, workers' groups included paraprofessional case aides. In this report, we will use the term "workers" to represent both social workers and case aides.

Group size ranged from 3 to 12, with a total of 196 foster parents and 152 workers participating. When fewer than three participants were available, we conducted informal interviews with those who were available, and rescheduled the group if possible.

The focus groups followed a topic guide that was adapted from that used for the groups held in 1994, to facilitate comparisons with the early stage of Family to Family implementation as much as possible. Topics were added and deleted based on our growing understanding of key issues and our experience of

what worked within groups. The topic guide provided a moderate degree of consistency across sites while allowing pursuit of relevant topics that may have emerged spontaneously in the course of discussion. Topics were roughly parallel for the foster parents' and workers' groups, as seen in Exhibit 2.

Exhibit 2
Focus Group Discussion Topics

Topic	Foster Parents' Groups	Workers' Groups
<i>Introduction</i>	Introduction of moderators Description of focus group purpose and format Explanation of confidentiality and audiotaping Introduction of participants	
<i>Resources</i>	Experiences in getting needed services for children Stipends, reimbursement, respite care	Availability of services for children and families Caseloads and their impact on practice
<i>Support and Encouragement</i>	Interactions with children's workers and homefinders, crisis services Agency's respect and appreciation for foster parents	Relationships with colleagues, supervisors and agency management
<i>Information</i>	Adequacy of information about children Participation in case reviews	Sharing information and decision-making with foster parents
<i>Partnership</i>	Attitudes toward mentoring birth parents	Attitudes toward partnership between foster and birth parents
<i>Reform</i>	Awareness and assessment of Family to Family Key components of Family to Family	Awareness and assessment of Family to Family Key components of Family to Family

All groups were moderated by an RTI staff member familiar with Family to Family, with a second staff member assisting with logistics and taking notes. With participants' permission, groups were audiotaped. Tapes were later transcribed, then reviewed by project staff, who abstracted the discussion by topic areas. Text-oriented database software (NUD*IST) was used to sort and compare abstracted data for review and synthesis.

To create an alternate summary view of the data, groups were also characterized (as strongly negative, negative, positive or strongly positive) according to their predominant attitude or assessment of conditions with respect to key topics. Where two groups of the same type (traditional and Family to Family) were held in a single site, they were combined for coding in order to avoid over-representation of that site within the group-level data. In instances where sharply mixed opinions were maintained throughout the group's discussion, or where a topic was not discussed in depth, no coding was attempted. This resulted in high levels of missing data for some topics, for which group-level data are therefore not be presented.

Ideally, qualitative data should be reviewed by at least two researchers, performing independent coding and checking the reliability of their coding decisions. Because the staff member who had assisted with the focus groups and was familiar with the data was unavailable during the analysis, recoding was not possible. Instead, the principal researcher reviewed the transcripts and coding sheets repeatedly over the analysis period.

Discussions in the following chapters are based primarily on review of abstracted transcripts, with group-level summary data and illustrative quotes. Some quotes have been edited for brevity and clarity.

Limitations of Focus Group Methodology

Although focus groups provide richly textured data that can expand our understanding of the respondents' perspective on their experience, certain cautions should be kept in mind when reviewing their results. As with any data collection method, focus groups can produce biased findings if there are systematic disparities in the persons who are recruited or in those who agree to participate. To guard against selection bias, we either recruited all eligible foster parents or a randomly selected group. However, the necessity of using supervisors to recruit workers who participated in the groups created a potential for bias. To counteract any natural tendency to select workers who might present a more favorable view of the agency, we attempted to recruit entire units whenever possible. We also assured supervisors that we were interested in gathering a range of opinions and that specific sites would not be named within the report. The wide range of both positive and negative perspectives heard in most groups suggested that selection bias was not a major threat.

Unlike other methodologies in which data are collected from individuals, focus groups are also subject to bias if the conversation is dominated by persons with certain viewpoints, or if a generalized inhibition against discussing certain topics exists within the group. The former situation is readily recognized and can be handled by a skilled moderator. The latter situation may not be detected by a moderator who is unfamiliar with the population, and if detected, may still be difficult to overcome. Unlike many other populations, both workers and foster parents are accustomed to discussing sensitive topics. Because they are able to set boundaries when they consider open discussion inappropriate, many potentially sensitive topics could be discussed relatively freely within groups.

As with many data collection methodologies, there exists the possibility that participants will provide responses that they perceive to be socially desirable or pleasing to the moderator. We attempted to minimize this tendency by explicitly disavowing any interest in hearing either "happy talk" or "horror stories," by stating that our experience was that all agencies had both positive and negative features. We also downplayed the connection between the focus groups and the Family to Family Initiative, saying instead that the groups were held in response to a desire to hear the perspectives of those on the front lines of foster care practice. However, the possibility that responses were stated in either a positive light (to present a favorable impression in hopes of influencing future funding) or a negative one (to expose poor practices) remains. Again, the wide range of both positive and negative comments tends to argue against the existence of a significant bias in this respect.

Finally, although our groups were organized to represent practice within Family to Family and traditional models, it must be emphasized that these distinctions are not clear-cut. None of the Family to

Family groups have fully implemented their intended changes. At the same time, those sites still operating in a more traditional model have undoubtedly been affected by changing attitudes, resources and practices resulting from the Initiative. In addition, there are substantial interpretations in how states have chosen to operationalize the Family to Family model, resulting in substantial variation *among* Family to Family groups as well as *between* Family to Family and traditional groups. Therefore, although we can use the group-level coding to comment on some general distinctions among the two models, it would be inappropriate to draw specific conclusions about differences within or between specific communities.

RESULTS

Services

The extent to which children can be returned to their families or successfully placed in other long-term living arrangements depends in part on the child welfare agency's effectiveness in providing or accessing treatment and support services. Because many of the services needed cannot be provided directly by the child welfare agency, their success in delivering services will require effective collaboration with community providers as well as internal procedures that facilitate identification of and access to appropriate providers. We asked foster parents about their experiences in getting needed services for the children in their care, and workers about their experiences in locating and arranging services for the children and families in their caseloads.

Foster Parents: Availability of Services. It is not surprising that foster parents have strong feelings about the supportive services needed by the children in their care, since they are typically those most directly affected by whatever difficulties children are experiencing. For the most part, foster parents reported that needed services were available. The barrier to services described most frequently was the effort required to engage the caseworker's attention, convince the caseworker that the service was needed, and process the required paperwork. Some foster parents believe that workers downplay the seriousness of a child's problems in order to avoid the effort necessary to arrange for services.

You have to know what terminology to use. Like if a child is really a behavior problem, you have to say that child is a danger to himself and others.

If you don't keep calling, they'll forget that you exist.

In some communities, foster parents report being encouraged to locate services themselves, and even trained to advocate on their children's behalf, with workers providing backup as needed. Although experienced foster parents, in particular, often prefer taking charge of the process, the balance of responsibility must sometimes be negotiated between foster parent and worker.

We've been around the block a few times, with other kids, and we knew what to ask for. But it's also a great help to have that agency saying you tell us what you need and we'll make sure that we put it in writing and put the money behind what needs to be done to get services for this child.

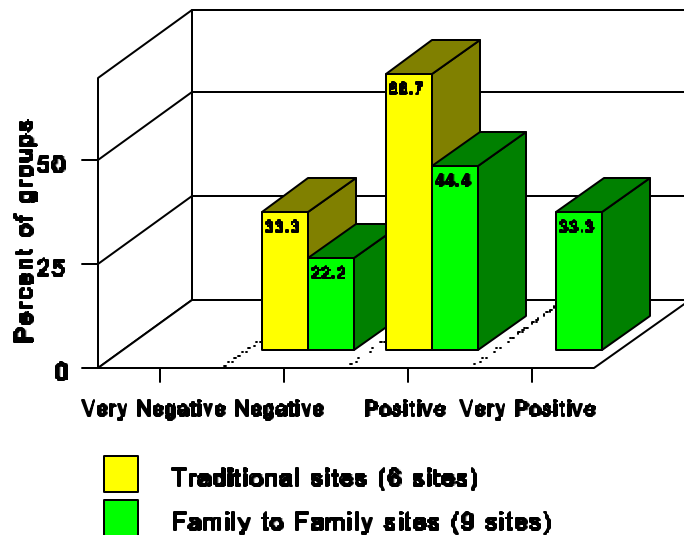
Just go ahead and make the schedule and appointments. Then call and tell them what you did. They are just so excited about it. You are taking your part and doing your job well. Unless they feel threatened by it. Then is when you get the resistance that says, you were supposed to call me and I am supposed to do that.

Most foster parents expect to transport children to appointments, and feel that they are the most appropriate persons to accompany children to medical care. However, those with several children in their

household, or children with frequent appointments to multiple providers, pointed out that the time required made it impossible for foster parents to keep up with both children’s needs and their own job requirements. This was particularly true for single parents or foster homes with two working parents.

Among service types, the most frequently mentioned problems were with school systems, when children needed special education services for learning or behavioral deficits. Foster parents across several communities described their frustration in dealing with schools and their need for reinforcement from caseworkers in negotiating with school personnel.

Foster Parents: Availability of Services



Although the majority of groups described their access to services in either positive or very positive terms, all of the “very positive” responses were from Family to Family groups. A review of foster parents’ comments revealed that these sites did not necessarily have more abundant local service resources than traditional sites. In fact, very disparate assessments of service availability were heard in different groups within sites. Generally, foster parents in Family to Family sites described having better access to

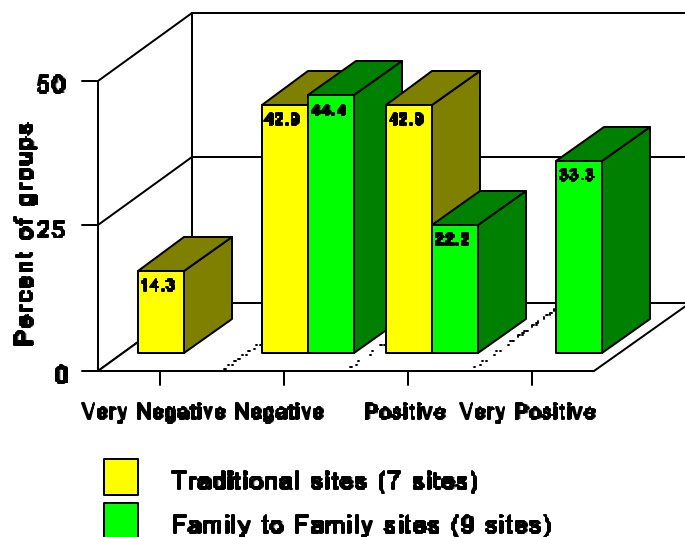
caseworkers who could respond to foster parents’ concerns and were willing to facilitate their access to services.

Workers: Availability of Services. Workers were generally less confident than foster parents of the availability of needed services. This may reflect their keener awareness of the gaps in the system, as well as their need to respond to the service needs of birth parents as well as children. Workers identified barriers in the larger service system and within their agencies that made it difficult to connect families and children to services. External barriers to service delivery include the familiar shortage of such chronically scarce services as substance abuse treatment and housing, poor quality of available services and long delays in arranging needed services, as well as restrictions on service access for families participating in Medicaid managed care plans. Internal barriers included lack of information about existing community services and cumbersome processes required to access resources within the agency.

When we send stuff over to finance, it’s the biggest headache we’ve got, because they say, oh, you need to get this piece of paperwork, and when you get it, they say, oh, we’re sorry, you can’t fax it, this isn’t dated right.

Most of the time, we get information from each other. You sit in a room and say, does anybody know who I can call about this situation? And we developed our own little resource box.

Workers: Availability of Services



Groups representing the Family to Family practice model generally described more favorable experiences in accessing services. As with foster parents, all of the “very positive” responses were from Family to Family groups, and were based on successful strategies for increasing access to resources rather than differences in the surrounding community. Resource mobilization strategies included direct contracting with service providers, community outreach to identify and access previously untapped resources, and teaching birth parents how to locate and access services on their own behalf.

We can help her find housing: go with her to different places to look at houses, and show what to look for, how to talk to the landlord and put money down and go get it.

Even if they don't have a phone in the house, I will take a phone book and show them in the front of the book there is a lot of resources for county agencies. In the back of the book are mental retardation agencies you can work with, there are advocates, there is the welfare rights organization.

Discussion. Most of the child welfare agencies participating in Family to Family must cope with seemingly intractable constraints with respect to available resources such as drug treatment, affordable housing, home-based services and school systems. Although workers and foster parents can rarely create resources where none exist, the focus group discussions demonstrate that adequate supports for workers can help ensure that they are able to connect families to services. Workers who have both the inclination and time to work with foster parents and birth parents can extend their reach even further by empowering them to identify and access services.

Although all of the barriers to service access identified by the 1994 groups were noted within this round of focus groups, strategies to facilitate access and support both birth and foster parents in mobilizing resources have clearly made a difference in some Family to Family sites.

Resources

The work performed by child welfare workers and foster parents must certainly rank among the world's most demanding jobs. The scarcity of basic material supports for performing the work quickly tests the dedication of even the most motivated, and drives many talented individuals from the field. Although the intrinsic rewards are far more likely to be important in attracting and retaining workers and foster parents to this work, material support clearly affects their experience as well. Therefore, we spent some time within the focus groups talking about financial support for foster parents and workers' assessment of their workload.

Foster Parents: Reimbursement Issues. Although foster care board payments are the largest part of foster parents' financial support, we did not discuss these within the focus groups, for two reasons. First, they are typically set at the state rather than the local level, and thus not within the power of local agencies to modify. More importantly, in our earlier groups we found that foster parents' feelings about board payments appeared to reflect general satisfaction with foster parenting more than the adequacy of the payment. Instead, we asked participants about their experiences in getting reimbursed for expenses related to foster care, such as clothing and transportation. Participants frequently volunteered comments on board payments within our discussions of reimbursements, however. Across the groups, there were a significant number of positive comments on both the adequacy of payments and the efficiency of reimbursements. However, there were also some recurring concerns.

For all types of financial transactions, a major source of tension is the availability of clear information on payment policies. Foster parents said they didn't understand, or got conflicting information on what kinds of expenses were expected to be covered by board payments, which were separately reimbursable, and what level of support they should expect for different children. In particular, they felt that the determination of whether a child is to be classified as special needs was based on convenience or budgetary considerations rather than assessment of the case. In the absence of widely available information, many believed that policies are interpreted and applied arbitrarily, and that relationships with the workers matter more than policy.

They've taken the position that all kids are okay, and they start you on the flat-rate. And then you have to go and prove that they're not.

It depends on your caseworker. If they like you, they'll break their necks for you. If they don't, you will wait forever. That's just the way it is.

It makes you feel like some people just have some kind of favored status, and we're not even informed about what is available. That's another thing that is really degrading.

Concerns about reimbursement were voiced most frequently with respect to children's clothing allowances. Foster parents said that support is particularly inadequate for infants who need disposable diapers, adolescents who feel they need brand-name clothing, and children who arrive as emergency placements with no clothes other than what they are wearing. The perception of arbitrary decision-making exacerbates these concerns. Foster parents also dislike clothing vouchers that are difficult to use efficiently, such as those that must be used all at once and in one store, making it impossible to shop for bargains or replace shoes as they are outgrown.

This clothing voucher is a big thing with all of us.

I had a fourteen-year old who came to me just before school started. She had nothing. With that \$55 they wanted me to buy clothes and books. I don't think that's enough.

I have two little girls that are siblings. Some social workers are so good about giving as much as they can, and then there's some that aren't. One child will have \$100 or \$200, and the other child won't get even \$100. They're the same age. This is not right.

Reimbursement for transportation expenses is another area of concern in many sites. Some participants said they were actively discouraged from submitting requests for reimbursement, while others described confusion over when transportation should be reimbursed. Many said that the effort and delay involved so far outweighs the value of the reimbursement that they no longer bothered submitting their requests. Some foster parents also report that items that were formerly reimbursable, such as day care expenses, are now supposed to be included in their board payments.

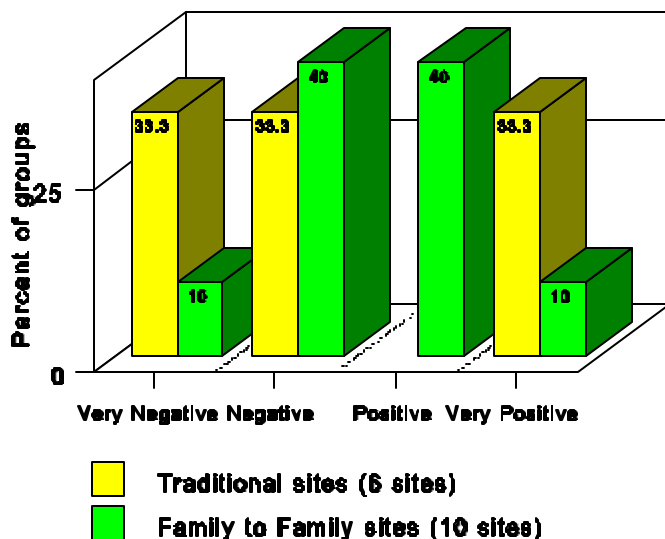
I keep doing it [submitting transportation claims], but I've only gotten one check in four years.

DSS placed an infant with me. I had nothing, not a crib, not nothing. They paid me \$570 a month, and \$400 went to child care. The rest went to everything else.

Delays in initial board payments were reported in a number of sites. For foster parents who provide short-term emergency care to a large number of children, delays and missing payments may accrue to substantial amounts. Foster parents described significant burdens of time spent and irritation involved in tracking and following up on payments, and reported that some were simply never paid.

I have two kids now. One I got recently, and one (three months ago) and I haven't received a dime on either. It's hard when you have four or five kids. They owe me \$1,600, and the mortgage payment doesn't care, you know.

Foster Parents: Reimbursement Issues



Foster parents in Family to Family groups were more likely overall to describe their experiences with financial transactions in positive or very positive terms, although there were some very positive responses from traditional groups as well. The apparently large number of “very positive” responses among the traditional groups represent sites in which improved processes have benefitted traditional and Family to Family foster parents alike. Groups with “very positive” assessments described quick, no-hassle reimbursements and board payments that started soon after placement of a child.

While some conditions, such as promptness of board payments and policies on clothing allowances, applied equally to Family to Family and traditional groups within the same site, disparities within the same site were sometimes noted in the perception of workers’ responsiveness to requests and the arbitrariness of decisions. Overall, negative assessments were more frequent than positive ones, but not by a large margin.

Workers: Caseloads. Since the fundamental resource available to workers is the amount of their own time available to work their cases, we asked them about their caseload and how they adapted to

it. As in 1994, this was an explosive issue that generated heated and frequently eloquent conversation in nearly every group. In striking contrast to earlier groups, however, was the fact that workers in several sites described their caseloads as being at least manageable, or even optimal.

Workers were quick to point out that numerical caseload levels alone are not an adequate indicator of their workload. Over time, the problems presented by families in their caseload have become more complex and seemingly intractable, the demands of paperwork have increased, and job definitions have been restructured so that caseworkers are now responsible for many more tasks than before. In addition, constant high turnover levels, exacerbated by the use of contract workers, shrinks the core of experienced workers who are familiar with local resources and procedures. Conversely, in some sites where caseloads have been reduced, the benefit of this change has in some cases been further enhanced by geographically-based caseloads that reduce travel demands and allow workers to develop relationships with a smaller group of service providers. In other sites, teaming of case aides with social workers allows the aide to work as a paraprofessional with his or her own relationship to families who can provide additional contact with families as well as taking over some routine functions from the social worker.

Workers readily provided examples of ways in which their practice is affected by caseload levels. When high caseloads demand choices among conflicting priorities, workers respond to explicit or implied messages from supervisors and management as to what is most essential and what can be compromised. Most said they routinely worked extra hours in order to meet even the basic demands of the families in their caseloads. This includes working through lunch or in the evenings, or making visits after hours or on weekends, even if this is discouraged by office policy. Several noted the resulting toll on their personal and family lives, and the contribution of workload to high turnover levels.

Even if you are caught up, you are behind. Right now I can tell you on all my cases, all the paperwork is up to date, but here are ten other things I need to be doing, like putting in referrals for assessments. All the official paperwork that would be checked if I got audited is fine, but you are never caught up.

You either drop the ball or work extra hours. And dropping the ball is not an option, because then you're written up. So you're going to come in and take care of whatever it is that you need to get done.

The amount and quality of contact with families is the area in which workers felt caseload levels most affect their practice. Although workers rarely acknowledged visiting families and children less frequently than the required minimum, they were quick to point out the superficial quality of these "drive-by" visits. Most frustrating is the realization that they are unlikely to be able to anticipate problems and take preventive measures even for families with whom they are in contact.

I don't go all the way upstairs every time and see if their rooms are clean. If they've got food in, they kind of open up the refrigerators when they see me coming. Throw the freezer open, line up the kids, they all wave to me. Okay, we're fine, we need some tokens, no, I didn't make it to counseling but I'll go next week. Love you. Bye.

We're focusing on the family that's already blown up. We can't prevent. Like the family that only needed day care: we can't get it to them. So we're removing their kids a week later because they left them unsupervised. It's really frustrating.

An Independent Living Program worker pointed out that because her time constraints meant that she could sometimes only respond to cases that were in crisis, the young people in her caseload would precipitate crises in order to get access to her.

They realize that the only way they are going to get your attention is to get in trouble—so they do. You're the most familiar thing they have, and they're going to do what they have to do to get you out there.

Workers with lower caseloads, by contrast, described themselves as busy, but did not report routinely working extra hours. Lower caseloads free workers to practice in a style more consistent with professional standards so that they can truly “work the case.” They visit more often, establish relationships with family members, identify underlying issues and begin work on them, help families locate a wider variety of needed services. Workers emphasized that their more consistent contact with the family meant that they were often able to identify emerging needs and take steps to avert crises.

I think it helps you to establish a more therapeutic relationship with your clients. I don't go in there and just say “hi” because they are okay, then leave. You really get into other issues, and get a sense of what their history is, and what they want to do with their lives.

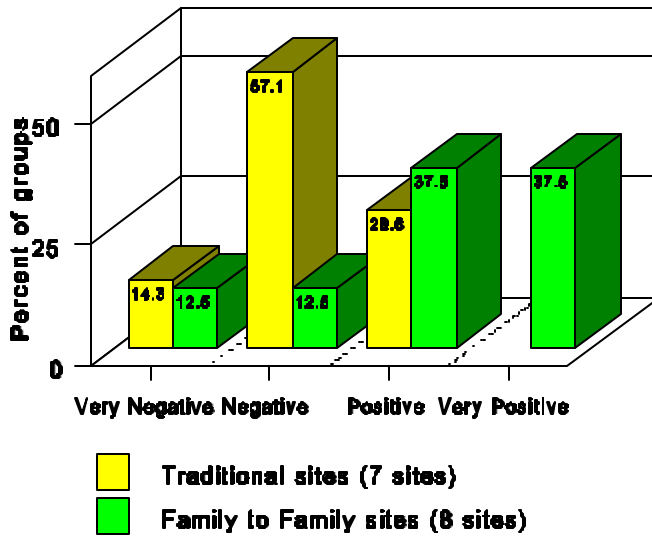
You are not just doing crisis management. You can see a crisis coming, and deal with it right then and there.

Workers with lower caseloads also noted that they were able to expand their network of contacts around the family to include more frequent contact with other professionals and even prevention-oriented community outreach. Most of these sites have also instituted family team meetings, in which birth parents, foster parents and other involved professionals and family members are mobilized in support of reunification. Although the time required to arrange and hold such meetings makes them infeasible for workers with higher caseloads, family team meetings leverage the worker's efforts by extending the network of active support for the family.

I give everybody assignments in my meetings, including me. I tell the dad, go establish paternity, and you have to have that done in two months. I'll tell the foster parents, go do this. So my case plan moves that much faster. My cases move double time because everybody on the case, including my providers, is doing assignments.

Seems like I've had more contact with the schools and with the therapist. Before they might give you a report once in a blue moon, but now I'm talking to them, sometimes on a weekly basis.

It is interesting to note that workers' description of increased contacts with the network surrounding the families made possible by lower caseload levels did not include mentions of greater interaction with



foster parents, except within family team meetings. As will be discussed in later sections, workers are far more likely to see foster parents as advocates for the child, rather than as potential partners in reunification.

Differences between Family to Family and traditional sites are striking with regard to caseload levels. Most of the traditional sites described caseload levels in negative or very negative terms, representing situations in which at best they were able to keep up with prioritized tasks while letting

others slip. In the Family to Family sites, by contrast, the large majority of sites characterized caseload levels in positive terms, with half of those describing their caseloads in “very positive” terms, at levels that enable them to truly “do social work.”

Discussion. Although both are determined by budgetary constraints, we do not mean to suggest that reimbursements and caseloads should be seen as equivalent issues. Workers’ comments make clear that caseload levels have a far-reaching impact not just on work-related stress but on the nature of their practice. This effect is compounded by the ways in which workers with lower caseloads are able to further extend their reach by empowering birth and foster parents to advocate for themselves and for children. Reimbursement practices have a more subtle effect, but one that is potentially far-reaching as well. Arbitrary decisions, delays and meager support are frequently interpreted by foster parents as indicative of the esteem in which they are held by the agency. At a larger level, inadequate financial support restricts foster parenting to those who can afford to supplement agency support for children from their own resources.

Since financial transactions were universally agreed to be an area of difficulty in the 1994 groups, it is notable that experienced foster parents in several sites identified this as an area where agency performance had improved in recent years. In 1994, all but one site described their caseload levels as excessively high. Now, workers in most Family to Family sites describe caseloads that allow more extensive client contact and prevention-oriented practice.

Support and Encouragement

Both workers and foster parents depend heavily on social support to sustain them in their efforts, advise them in dealing with difficult situations, and back them up during crises. We asked foster parents about the support they receive from workers, and workers about the support they receive from co-workers, supervisors and agency administration.

Foster Parents: Support from Workers. Although foster parents’ primary working relationship is with the children they care for, it is interaction with their children’s caseworkers that

communicates how they are viewed by the child welfare agency. In addition to serving as intermediaries for resources such as financial support and services, most foster parents look to workers for ongoing support in dealing with the children in their care.

More so than for any other topic, responses on this topic varied both within and among sites. So many statements were prefaced by the phrase “it depends on the worker,” as participants provided widely divergent examples from their own recent experiences, that it was difficult to characterize the sense of the group. Our review of the transcripts indicated that sites were in fact evenly divided between positive and negative assessments on this topic. However, the discussion tended to focus largely on negative experiences, suggesting both the importance of the topic and the level of pent-up feeling surrounding it. Foster parents’ chief concerns focused on the frequency of face-to-face contact with the workers, how easily the worker could be reached if there were problems, and the extent to which the worker conveyed respect and appreciation for the foster parent.

Foster parents were acutely sensitive to the frequency of contacts with their child’s worker. Although some foster parents profess to prefer being left alone, most welcome frequent and supportive contact with their child’s caseworker. They appreciate workers who visit regularly, appear interested in the foster parent’s feelings as well as the child’s well-being, and are accessible by telephone. Foster parents who have experienced this level of support acknowledged that the workers involved were often working extra hours to achieve it. When workers meet agency requirements for contact by seeing the child outside the foster parent’s home (in the course of family visits), this leaves the foster parent feeling a need for more interaction.

The really good workers either leave or end up moving up the scale to supervisor and other positions. Then you end up with those that are doing their job but are kind of burned out on it. And the ones you loved working with are way up there.

There’s the caseworker, and she has an assistant. They don’t visit at the same time, but they each come at least twice a month, which means they’re in my house every week.

When he comes to pick up the baby to go visit his mom, that’s when he talks to me. And he’s always on his way, real quick out the door.

Especially when workers do not visit frequently, ease of telephone access is a major concern for foster parents. They see voice mail as a barrier to contact rather than a way to keep touch with highly mobile workers, both because they want an immediate response, and because they are not convinced that workers will return their calls.

When you try to get the worker, if you get the voice mail or answering machine, you may as well stop because you’re going to get that for two or three hours. There’s a supervisor, too, but then you get their voice mail.

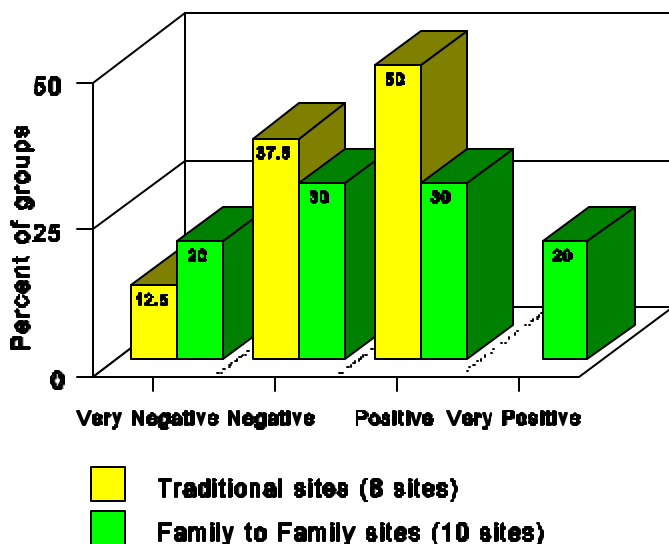
Participants are generally aware that workers’ high caseload levels limits their opportunities for contact. However, in several sites where caseloads have declined in recent years, foster parents do not report any difference in their contact with workers. Foster parents also see the effect of high caseload levels

in the form of frequent turnover among their children’s caseworkers. Experienced foster parents feel that they are constantly training new workers. They may resent being advised on parenting by young workers who may not have had children of their own, and who have not cared for children with the kinds of behavior problems common among foster children.

With the child I’ve had for 13 months, she’s gone through four social workers in that time, and I think I can count on one hand how many times they’ve been in my home.

We had a brand new social worker, and she was like, I don’t know how to do that yet. I felt like I was parenting the social worker.

Foster Parents: Support from Caseworker



Although the high variability within groups on this topic made any assessment of group ratings difficult, comments overall appear roughly evenly divided between positive and negative assessments in both Family to Family and traditional sites. Only in Family to Family sites were groups’ strongly positive comments heard frequently. Comments in those sites emphasized workers’ responsiveness and availability, with few or no negative comments.

Foster parents’ comments about their foster home coordinator, by contrast, were entirely positive and in some cases approached heroic dimensions. Although some were acknowledged to be less helpful than others, the most negative comment heard was from a foster parent who felt her home worker visited too frequently, disrupting her household routine. More typical were responses from participants whose home workers served as a sounding board in dealing with problematic children, offered encouragement, and facilitated access to resources such as clothing vouchers.

I know that she would go into a burning building for me and pull me out.

I couldn’t live without mine.

Foster Parents: Support After Allegations of Abuse. Perhaps the most severe test of a foster parent’s relationship with the agency occurs when an allegation of abuse is made against the foster parent. This topic, although not originally included in the focus group topic guide, was added after it emerged spontaneously in several sites. The overwhelming response described by foster parents was one of hurt, anger and betrayal that they could be imagined to be potential abusers.

What started getting to me was when they started sending people to check me. That would really get me angry. Because why would I want to be a foster parent if I was going to do that?

Specific aspects of the agency's investigative procedure were particularly difficult for foster parents under investigation. Foster parents were taken aback by the agency's apparent presumption of guilt on their part, particularly in contrast to what is perceived as leniency with birth parents. Some foster parents were not informed of the investigation directly by the agency, but learned of it from police officers or from children who had been questioned at school.

To make a long story short, the children got hurt visiting mom, they came back to me, I called and reported it, and I'm the one sitting in the police station taking a lie detector test.

They go to the school first, and they go to court before they come and accuse you of it. They go to all the kids, and you go to school with the teachers that you know because you've been a foster parent for so long, and they're looking at you and thinking, I wonder if she's really done this?

Some foster parents described scenarios of investigations where they felt the department had responded in a more respectful manner, by using "common sense" and not over-reacting to obviously fabricated stories, or by going through with the required procedure without demonizing the foster parent. Even so, they are troubled by the knowledge that the record of the allegation will remain in their file.

I did not have a bad experience. But the allegation is still in my record. Still unsubstantiated, but anybody that reads through that can question my qualifications.

The discussion highlighted the fact that few foster parents understand the agency's legal mandate to place paramount importance on representing the child's interests in such situations. When the investigation is concluded, there is rarely a chance for the foster parent to discuss the experience with the agency in an atmosphere that reaffirms confidence in the foster parent.

They treat you like you are some kind of bad perpetrator, this person who has done these awful things. Then when it is all over with, "oh, sorry." Like nothing happened.

A recurrent theme throughout the group discussions, and particularly in discussion of interactions with workers, was the general lack of respect for foster parents. Even among foster parents who described workers as being available and responsive, descriptions of the perceived attitude of workers toward foster parents were sometimes negative, suggesting a larger pattern in which foster parents are not seen as part of a team.

Most foster parents are processed out over a fairly short period of time because they cannot stand that kind of interaction. They don't understand why you need to have this consistent demoralizing, degrading, denigrating attitude directed toward you.

I don't get a real sense here that we are valued for our service, and this is very disheartening because the work we do is extremely difficult. It's subtle, how a social worker may speak to you disrespectfully or discount what you say.

Workers: Support Within Agency. Workers rely primarily on their colleagues and immediate supervisors for ongoing support. Their environment is also affected in significant ways by both explicit policies and symbolic communications from agency administration. Because of time constraints and the potential sensitivity of the topic, we did not directly ask workers how they felt about their relationships with coworkers, supervisors and administration. However, we did code and review comments on this topic offered spontaneously in approximately half of the groups.

It is likely that social pressures would inhibit discussion of unsupportive behavior by colleagues and immediate supervisors within a group of co-workers. Finding fault with upper management, by contrast, is a time-honored practice within many organizations. Nevertheless, the contrast in perceived support from colleagues, supervisors and administration is striking. When workers discussed interactions with their peers, it was generally in terms of ways in which they supported and relied upon each other. The most negative comment heard was framed in terms of how time and emotional pressures made it impossible for workers to support each other. More typical were statements that the support among workers was one of the strongest reasons for staying with a difficult and often frustrating job. Although the high level of non-response on this topic makes within-group comparisons unreliable, it is striking that all of the Family to Family sites in which this topic arose discussed their coworkers' willingness to provide both emotional and practical support, and the importance of their identity as a team, in highly positive terms.

If it weren't for the support and the commitment and the caring and the professionalism of my colleagues, I would not be here. I don't understand it, with what we have to deal with, but we do it and I think that keeps a lot of us here.

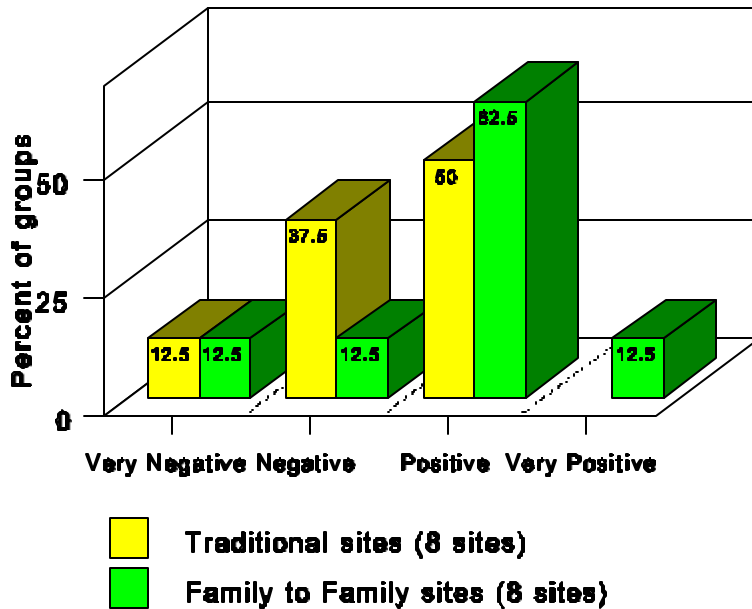
Comments were generally favorable, but somewhat more guarded, when describing supervisors. Positive comments described "guardian angels," whose own experience as line workers makes them aware of what workers must contend with because "they've been there." Negative comments focused on supervisors who were out of touch with the realities faced by line workers, and overly concerned with paperwork rather than social work.

If something happens on my caseload, my supervisor is going to be right there backing me up.

I give all credit to my supervisor, and I am serious. My supervisor was on the line for a long time, and so she knows. If I get overloaded, my supervisor will help write the paperwork. You need that.

Two strong themes emerge from the uniformly negative comments about agency administration. The first is that agency leadership either do not understand, or refuse to acknowledge, the pressures under which workers operate. Instead of responding to workers' concerns about clients and services, they are perceived as focusing on procedural trivia. Even more troubling to workers is the belief that agency administration would be unlikely to support a worker in the event of a serious incident or child fatality.

Basically they say that if you time-manage, and if you do this and do that, you should be able to manage this caseload. No one will ever say, we gave you too much to do.



We had ten people leave on one day recently. So what does the upper administration do? They send down a memo of rules on how we have to keep our space, what we can have hanging on our wall, how many plants we can have, what we have to dress like and where we can eat.

If anything comes down, the first head that rolls is yours.

We also asked workers for their assessment of the skills and

dedication of the foster parents in their community. Workers in most sites described the qualifications of foster parents in generally positive terms, but pointed out that there was substantial variability among them. They were quick to acknowledge the stresses under which foster parents operate, which in many ways mirror their own situation, and described with considerable sympathy how chronic shortages of foster homes lead to over-placement within available homes and made it impossible to offer foster parents an occasional break in between placements. They also acknowledge that their own caseloads made it impossible for them to provide the kinds of support that foster parents need in dealing with demanding children. Workers described a cycle in which these stresses contribute to turnover that exacerbates the lack of experienced and well-trained foster parents.

Our good foster parents are being burnt out because we're overloading them, putting too many kids in the home, which eventually leads to a CPS investigation, which may end in discharging them.

We have some families who could be stronger and more helpful if they had some extra support and training opportunities, and right now the placement staff can't get to that.

At the same time, workers were quick to point out that there are homes that fall far short of the skills and dedication that children need. Among these are foster parents who approach the role as a paid job, and engage workers in constant struggles over providing transportation and reimbursement. Although they would prefer not to place children in these homes, overall shortages of available homes make it impossible to avoid.

Some of them, you place kids and you walk away from the house going, "please God, don't let anything bad happen here." You don't tell the child, "oh, it's going to be better," because sometimes you just don't know.

I think out of ten foster parents, one of them would be really, really good, and at least three others are kind of okay. The rest - I don't know if they get tired of being foster

parents, or they're just not there for the right reasons. It's hard to work with a family that not's going to work with you.

Workers in several sites pointed out that recently-trained foster parents, and those who had been specifically trained or re-trained as Family to Family homes, were far stronger than others. Foster parents trained in Family to Family, in particular, were described as willing to work with difficult children, appreciative rather than resentful of higher levels of contact with the caseworker and more oriented to reunification. Although not all Family to Family workers have access to foster parents who are committed to Family to Family, workers in Family to Family sites were more likely to describe the foster parents they worked with in positive terms.

Once they have accepted Family to Family and retrained, their attitude is totally different compared to the old foster parents who were conditioned differently.

I see the foster parents that have been doing this for 18 years, and they've been doing it the exact same way for 18 years. Whereas the newer foster parents seem much more into it, much more trainable, much more flexible.

Discussion. Workers and foster parents share a lack of support from those on who in large part determine the circumstances under which they work. Members of both groups frequently describe themselves as being sustained by their dedication to children, and continuing in their work in spite of this lack of support. While some create support networks from among their colleagues, high turnover rates within both roles reflect the depth of the problem.

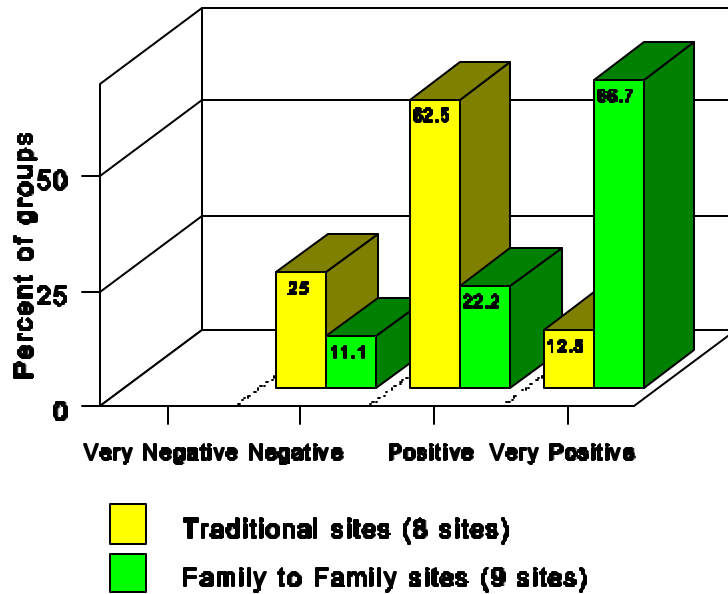
Evidence that relationships between child welfare agencies and foster parents have improved in recent years is scattered. Although workers in some sites may be more accessible, few foster parents feel that their role is respected or appreciated. As in 1994, workers feel strongly supported by their colleagues and supervisors, but less confident that agency administration will back them up in making difficult calls about cases.

Information

Sharing information about children is ideally an ongoing, mutual process between workers and foster parents. Workers have access to background information amassed during the investigation process and any previous placements; foster parents have rich information about the child's behavioral and emotional development and needs. We asked both workers and foster parents about the extent to which information about children was shared around the time of placements and in periodic reviews.

Foster Parents: Access to Information and Decision-Making. For foster parents, who take responsibility for all aspects of a child's care and who must weigh the impact of that child's presence on other members of their household, information about a child's needs and behaviors is a precious commodity. Although the types of information of specific interest to foster parents may simply not be available, in many instances workers ration the amount of information passed along to foster parents. Many foster parents reported that they received at least adequate information about the children placed in their care. This was particularly true in sites that have defined a standard (usually written) format to summarize relevant information such as medical needs, behavioral issues, educational status and daily habits.

Foster Parents: Access to Information



Although the forms do not always get used, or workers may be unable to fill them out completely, the existence of the format is seen as an acknowledgment of the foster parent’s legitimate need for information on the child. Foster parents in some sites report having access to portions of the child’s case file that do not include confidential information on the child’s parents. Foster home coordinators, in particular, were also seen as trustworthy and open sources of information at the time of placement.

I have no problem because my homefinder is very good about telling me the things that she actually knows. I can’t fault her if she doesn’t have the information.

Because I ask, my caseworkers have been real good about telling me about the situation with the children.

When the foster parent is dependent on the child’s caseworker or on a placement worker for information, several problems may occur. While it is often true that relevant information may be unavailable at the time of placement, participants cited instances in which the worker either had not been familiar with the information available, or deliberately withheld information. This was most likely to occur when the worker feared that a foster parent might refuse to accept a child with behavioral problems.

A blanket, pajamas and a diaper, and that was it. We had no idea of what he liked to eat, what he liked to do, we had to go trial and error on everything. But this social worker had already had this boy. We were his third placement in six months.

I found out later that there were all sorts of diagnoses for these children, that nobody told me about. When I asked I was told, would you have taken the kids if you had known?

Although information about the circumstances leading to placement is rarely shared with the foster parent due to confidentiality concerns, several participants felt they needed access to at least some information in order to understand the children’s behavior and respond to their needs. In cases where children had been sexually abused, they wanted to know so they could be alert to sexual acting-out with other children in the household.

We had a child who was sexually abused in the closet by an older male in the home. No one ever told us. We were playing hide and seek. The kid went into the closet. My

husband went and found him, and the kid freaked out. We thought we were having fun. If we had known, we would never have allowed that situation to develop.

Overall, foster parents in the majority of sites gave negative ratings to the adequacy of information received about children placed with them. The difference in Family to Family and traditional sites in this regard is striking. Although the majority of traditional sites described their agency's practices in positive terms, Family to Family sites were much more likely to respond in very positive terms describing an open flow of information, and much less likely to respond in negative terms, describing information deliberately withheld.

We also asked foster parents whether they had been encouraged to attend case staffings (variously known as semi-annual reviews or case planning meetings) for the children in their care. Although it was difficult to be sure that we were talking about internal staffings rather than court hearings or foster care review board meetings, foster parents in most sites report that they are invited to these meetings for at least some children some of the time. For many, however, their experience makes it clear to them that they are very much seen as secondary players in the process. At the simplest level, parents describe receiving notification of meetings at the last moment, or not being told when a meeting is scheduled, or not being invited unless they contact the worker to find out when the meeting is being held. Some admitted that they do not make it a priority to attend, some because they felt intimidated at the prospect of the birth parents' participation in the meeting. Others described feeling that their participation was meaningless because all the important decisions had been made prior to the meeting. Although their opinions were solicited, it was clear that they would not have any influence on the process.

You get a call at 4:00 the day before and they tell you that there is a staff meeting at 2:00 and they would like you to be there.

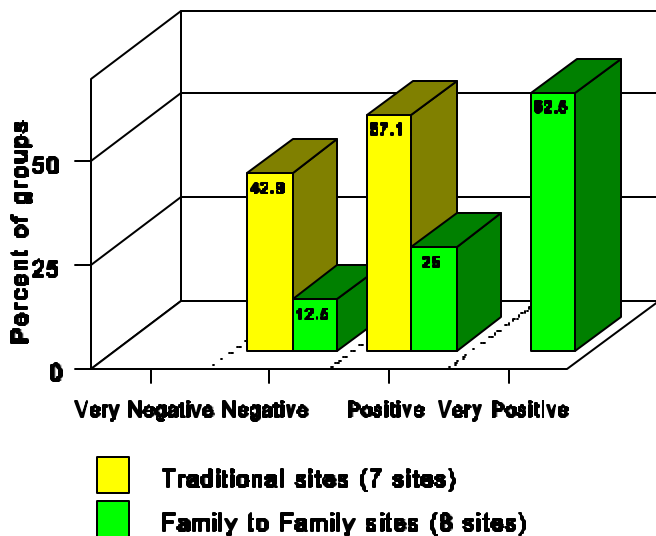
Decisions had been made and I was the last to know. I just sat here with my mouth open. Everybody looked at me like, you poor foster parent, you'll get over it.

We made a couple of suggestions, but if you go back and look at it, they already had the treatment plan written. It was nice that we were there, and we did get to air some of our concerns. But the reality was that we were there to endorse the treatment plan that had already been written by the social worker.

Foster parents with more positive assessments reported being included on a consistent basis. They appreciated having their opinions listened to and valued, although they may not have had any actual influence on case decisions. Some reported attending staffings as a way of picking up more information about the child's background and needs than had been provided by the child's worker.

Workers: Sharing Information and Decision-Making. In contrast to the limited flow of information described by foster parents, most workers say they are committed to sharing all relevant information about the child. They were quick to point out that foster parents are better equipped to respond to the child if they know what to expect, and that placements are less likely to disrupt if the foster parent is fully prepared for the behaviors that may be displayed by the child.

Workers: Sharing Information



I tell them, "I'm going to be frank with you. This kid may kick you, may spit on you, may call your mother a bitch. If you can't handle that, then tell me now so I won't have to come back next week and pick him up."

The more the foster parent knows about the family background, the better they're going to be able to help that child adjust. So we don't want to hide anything. We tell them everything we know.

Most participants agreed that downplaying the seriousness of children's

behaviors is likely to be counterproductive, increasing the chances of problems and disruptions. However, a few admitted to doing so on occasion, and many said that they were aware that other workers did this. Participants also pointed out that some information could not be shared without compromising the confidentiality of the birth parent.

Because of my religion, I tell the truth. But I don't tell them everything.

Some workers aren't as forthcoming as others. It's Friday, and you want to go to happy hour. You tell this mother the kid bites and scratches and calls people thieves and everything else, then you know they're not going to take them.

Workers also described family meetings, held shortly after placement, as a way of informing foster parents about children's behaviors and daily routines. These were only rarely discussed within foster parents' focus groups, perhaps because they are a relatively recent innovation that have not yet been experienced by the majority of foster parents. In general, workers' comments suggest that in the face of chronic time constraints, ongoing communication is less of a concern for workers than for foster parents.

That's simply not realistic. They can't be chit-chatting a lot with the foster parent, with all the other things they have to take care of.

Workers generally described their willingness to share information about children with foster parents in positive terms. Workers from Family to Family sites were more committed to information sharing overall, and more likely to be "very positive" about this process, describing a defined procedure for sharing information and a belief that it is important to do so.

Workers in most sites agreed that foster parents should be invited to case staffings. Some workers cited specific advantages of foster parents' participation, including the foster parent's greater knowledge of the child, the importance of their participation in transition plans, and the improvement in communication when all involved parties can be present to discuss decisions related to a case.

Children can play us one against the other, but when we got that foster parent, they know this child.

Other comments, however, revealed the limits to workers' belief in the value of foster parent participation. Some workers pointed out that only the "good" foster parents, who were genuinely interested in the child's welfare and in supporting the case plan, were likely to actually attend reviews and offer useful input. Many agreed that although it was policy to invite them, few foster parents were sufficiently interested or able to come, particularly when meetings are held during working hours. In only a few sites did workers mention specific efforts to schedule meetings at times and places that would make it more feasible for foster parents to attend. Some acknowledged that foster parents might not be included in reviews if they were perceived to be difficult to work with or likely to sabotage plans to return children home.

You know they have three or four kids in their home, and pack them all up [would be difficult]. So it has to be at 6:00 at night. I go to their house; it makes it convenient for them.

There are times when foster parents are not invited because the treatment worker and foster family don't get along. We don't want to invite them because they are going to be so difficult to deal with at that meeting. So we just make our plan, and go back and tell them "this is what is happening."

In general, workers in Family to Family sites were more likely to be strongly supportive of foster parents participating in case reviews, and less likely to say that foster parents were not invited, or only rarely included in these meetings. Even in the sites most committed to the process, however, the value of foster parent participation was described in terms of keeping foster parents informed of case decisions and providing useful information to workers rather than actually influencing workers' decisions.

Discussion. The discrepancies between workers' and foster parents' viewpoints on the adequacy of information sharing is striking. One possible explanation is that workers' attitudes in this regard have indeed changed, but that actual behavior changes have yet to be acknowledged among foster parents. It is also possible that workers, whose focus is on information to support placement decisions, are far less attuned to the detailed information on activities of daily living that is of paramount importance to foster parents. While both workers and foster parents recognize a move toward inclusion of foster parents in case staffings, foster parents' expectations of influencing decisions are clearly greater than workers are likely to grant.

Foster parents in this round of focus groups are more likely to feel that they are well-informed about the children placed with them than in 1994. Although they are now frequently invited to case reviews, they are uncertain that their participation is really valued. Workers, particularly those in Family to Family sites,

are more committed to sharing information with foster parents and valuing foster parents' input for case planning than previously, although it is far from a full partnership.

Partnership

Because the concept of foster parents working cooperatively with birth parents is a cornerstone of the Family to Family model, we asked both foster parents and workers about their beliefs regarding the practice. We also asked foster parents to tell us about their experiences interacting with birth parents, whether these occurred independently or with the encouragement of the child welfare agency.

Foster Parents: Mentoring Birth Parents. Few topics sparked such strong discussion and divergent opinions among foster parents as the trend toward increased interaction with the birth parents of children in their care. Although generally positive or negative trends could be discerned among each group, dissenters were outspoken. Among those who spoke in positive terms, most seemed to accept the practice as agency policy, rather endorsing it based on personal experience and commitment. Particularly among recently-trained foster parents, the concept of partnering with birth parents has been clearly communicated through training and other communication from the agency. These foster parents are at least willing to try working with birth parents. However, many have clear reservations regarding what will be asked of them and whether they are equipped to do it.

None of us are trained to do that kind of work with families. We're simply asked to do it, and you can only look at yourself and say, "Well, what kind of skills do I have, and what kind of fears or concerns do I have? Am I going to create another problem, or am I going to be able to really help?"

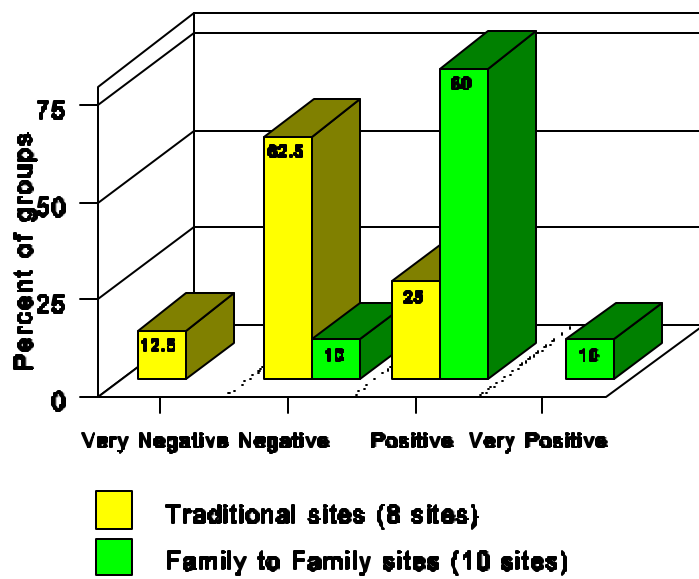
Those who are most enthusiastic about contact with birth parents are the more experienced foster parents, who frequently initiated the practice on their own, when it was either not encouraged or was actively discouraged by the child welfare agency. These participants are more confident of their own skills, and able to draw on personal experience in working with birth parents. However, even these seasoned foster parents are frequently wary of current birth parents, and particularly concerned about interaction with substance abusing parents. Many of these participants, while supporting the concept of mentoring, took pains to point out that the birth parents were, at least initially, not easy to work with. Instances in which the birth parent criticized the foster parent's parenting practices were particularly difficult.

We have done this ever since we've been in foster care. This is nothing new to us.

We did it when it was illegal.

Among foster parents with positive attitudes toward working with birth parents, the reasons cited in support of the practice were limited in scope. They included supporting and encouraging the birth parent, relieving the child's concerns during the placement, and easing the eventual transition home. No participant cited the broader perspective in which foster-birth parent partnership is more typically discussed among professionals: that of rebuilding families by developing birth parents' capacity for child-rearing.

Foster Parents: Mentoring Birth Parents



Concerns about contact with birth parents followed three general themes. First was concern about the limits of what would be asked of foster parents, with discussion of whether they would be expected to entertain active substance abusers in their home. These discussions sometimes included anecdotes of problematic encounters with such birth parents in the past, although the contact in these cases had not been officially sanctioned and was hardly typical of the model intended by the agency. However, participants' anxiety about the extent and circumstances of expected interactions, and whether any support could be

expected from the agency in the event of difficulties, was clearly evident.

It really puts the foster parent in a potentially dangerous situation because if these people hit you with a brick, DSS is not going to sue them or prosecute them. You are on your own.

A second theme centered around the belief that partnership with birth parents represented approval of their behavior. Those expressing this view appeared to feel that such normalized contact conveyed an equal status for foster and birth parents. They also pointed out the stress experienced by the child as a result of contact with the birth parent. Taken together, these viewpoints represent the belief among some foster parents that agencies are favoring the birth parents' interests over those of the child.

These kids were taken out of your home for a serious reason, and I don't want to sit and socialize with you, as if what you did was okay.

Kids have such a trauma when they visit the parents—come home and kick a hole in the wall. We have to pick up the pieces. I think the idea [of mentoring] is excellent, but at some point we need to look at the damage.

Finally, many foster parents pointed out that they simply lack the time to care for several foster children, carry on their own lives and work with seriously troubled birth parents as well. Those who care for young children in particular felt that while children are demanding, their parents may be far more difficult to work with. While acknowledging that it may accomplish some good, these participants clearly see mentoring as beyond their role definition.

You can't save the world. I know the best way to help the kids is by helping the parents, but you can't do it all. If I can keep their kids in a safe, clean environment and give them love, then the parents—who don't have nothing but time on their hands—they can get their selves together if they want to.

The distinction between Family to Family and traditional sites is clearly evident, with Family to Family sites predominantly expressing positive views regarding contact with birth parents, and traditional sites expressing negative views. As stated earlier, diversity of opinion on this topic occurred frequently within groups.

Workers: Partnership with Birth Parents. Workers in most sites agreed that increased interactions between foster and birth parents are encouraged by their agencies. However, they were quick to identify barriers and limitations related to the practice, and relatively few offered examples of successful interactions from within their caseloads.

Although workers generally agreed that these interactions are endorsed by their agencies and are part of the training process for new foster parents, their comments made clear that many had reservations about the concept. Being acutely aware of just how challenging work with birth parents can be, many wondered if foster parents were capable of taking on this task, and whether they should be asked to do so. Some agreed that a limited degree of interaction, engaging birth parents in the events of the child's daily life, such as haircuts and medical appointments, could be beneficial, but did not believe that foster parents could act as mentors or allies in the therapeutic process. They agreed with the foster parent quoted above that the role of the foster parent should revolve around the needs of the child. Several pointed out that they would not be willing to jeopardize a good match between child and foster parent by pushing the foster parent to work with a birth parent.

Foster parents are the ones that are the experts in providing a safe home. But they don't necessarily have the skills to coordinate and nurture and do what the biological parents need, which is a whole lot.

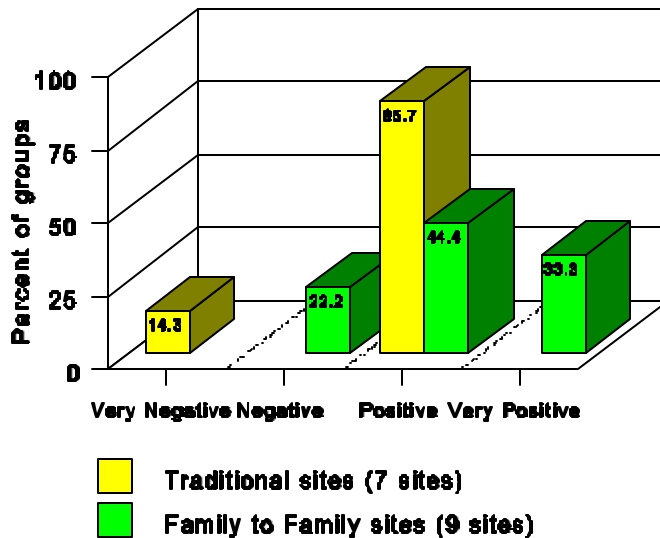
I don't really think it is the foster parents' responsibility to work with the biological parents, too. They have a large responsibility with the kids, and their main focus should be on the children.

I don't waste my breath. I'll ask once, be nicey-nicey, and then try to edge them into it. If they won't go, I'm not going to force the, because the kids are fine here. I don't want to put them into some new foster home who won't take such good care of them, just because she'll work with mom.

Workers identified several advantages to increased interactions between birth and foster parents, primarily in improving the attitude of birth parents toward the placement so that they were more open to the workers' efforts. They also agreed that the practice could be beneficial for the child who witnessed positive interactions between the birth and foster parents. Although newer foster parents, who have been exposed to the concept throughout the recruitment and training process, were most likely to be willing to try work with birth parents, participants cited examples of long-term foster parents who have been working with birth parents for years, with or without official encouragement.

When the foster parent is able to work with the biological family, that is when it works the best. When the foster family is willing to sort of wrap around extending family to the biological family. It doesn't matter if it's a teen or a young child, that's when the system works the best.

Workers: Partnership with Birth Parents



There have always been these types of families in the system. Family to Family is an initiative that's trying to make that the norm. The best foster parents have always been the type that would go for Family to Family, but now we're recognizing them. That's the important part, that they're being recognized and encouraged to do it rather than it all depending on the worker.

Even among those who favor increased contact between birth and foster parents, few workers described any active

involvement in the process. Only a few agencies formalize the process through team meetings or service agreements, in which the worker can model mentoring behavior for the foster parent, and where expectations from all parties can be made explicit. Some workers pointed out that both workers and foster parents would both need to have substantially reduced workloads before this kind of interaction becomes a practical alternative.

I tell them, it's up to you. If you feel comfortable with doing it, you go ahead and do it. You just let me know what you've done.

It takes more than just saying, "do you want to do it? Here, let's go try it." I think they need some worker, working with them.

Workers have to have their caseloads reduced to where they truly facilitate the relationship between the foster parent and the biological family. If we don't have the time to do it, it's not going to happen in most cases.

Workers in both Family to Family and traditional sites had similarly positive attitudes toward interactions between birth and foster parents, although, as noted, their practical expectations fall somewhat short of the theory. It seems that workers responded to this topic in accordance with agency policy, but went on to state their personal skepticism as well. Workers in Family to Family sites were somewhat more likely to cite positive attitudes based on experience rather than theory.

Discussion. Although both workers and foster parents voice positive attitudes toward partnership between foster and birth parents, evidence of changing behavior is tentative. The willingness of recently recruited foster parents has yet to be extensively tested in practice. Workers are skeptical that foster parents will be able to be effective in interactions that they, as professionals, find difficult. Successful implementation of partnership may demand more active support than workers are currently willing or able to provide.

Attitudes toward interaction with birth parents among newer foster parents have clearly been influenced by more recent changes in recruitment and training practice. Although not without some reservations, these foster parents are far more open to mentoring than participants in earlier groups. Workers in some sites have seen the benefits of increased interactions between birth and foster parents compared to participants in earlier focus groups, but many remain skeptical.

Reform

Finally, we asked both workers and foster parents if they were familiar with Family to Family, and what that phrase meant to them. Our intent was two-fold. We wanted to assess participants' familiarity with Family to Family, and to identify the programmatic components most commonly associated with Family to Family implementation. Because time limitations frequently made it impossible to address this topic fully, data are incomplete.

It is important to stress that we are not assuming that reform can only take place under the banner of Family to Family. Sites that have implemented substantial changes may have chosen to incorporate the reform process into other efforts or into agency-wide or cross-agency change processes. Therefore, no judgement about the success of implementation is assumed within the following discussion.

Foster Parents. Among those sites designated as Family to Family implementation sites, some but not all use the term internally, so that most or all foster parents know the term and have clear associations with it. These sites may have specifically recruited foster parents into a new model and held training sessions designed to “convert” existing homes to Family to Family homes. More frequently, in both Family to Family and traditional sites, only a few were familiar with the term. Those who had heard of it were most commonly longer-term foster parents, who had attended orientation sessions early in the implementation phase.

Only in two of the Family to Family sites did foster parents identify the term as representing a comprehensive reform, representing “the way we do business here.” Far more frequently, Family to Family is associated with specific practice styles, organizational changes or resources. The most frequently mentioned of these changes is the increased expectation of interaction between birth and foster parents, followed by community or neighborhood placements.

Workers. Since workers in many sites have been organized into dedicated Family to Family units, awareness of the term is general (although not universal) among those practicing in both Family to Family and traditional models. Discussions within the workers' groups suggest that the existence of designated units, rather than agency-wide implementation, tends to limit the scope of change associated with Family to Family. Workers in these agencies associated the term Family to Family with specific innovations, organizational changes, or resources, rather than a comprehensive shift in philosophy and practice.

Not surprisingly, workers' associations with Family to Family are more extensive than foster parents'. The most frequently mentioned component was teamwork among workers, birth parents and foster parents. Workers tended to view the notion of teamwork as a broad concept rather than focusing specifically on the foster-birth parent mentoring relationship. Both Family to Family and traditional workers were highly aware of changes associated with a shift toward community-based practice, either through worker location, caseload assignment or neighborhood placements. Family to Family workers also mentioned practice changes such as intensive reunification work and community outreach, and specific resources such as flex funds and new positions.

DISCUSSION

Qualitative data provide a useful complement to the quantitative analyses described elsewhere³ because they allow us to explore the perceptions and experience of those most directly involved in implementing *Family to Family*. The focus groups identify some important changes in front-line practice that have occurred during the implementation period, as well as some substantial challenges still to be overcome in working toward the Initiative's goals.

Most notably, workers and foster parents operating in the Family to Family practice model describe substantial differences in practice compared to traditional groups. In at least some sites, foster parents in Family to Family groups were more likely to feel they had access to services needed for children in their care, were more satisfied with payments and reimbursement, were more confident of receiving information about children in their care, and had more positive attitudes toward partnership with birth parents than did foster parents in traditional groups. In at least some sites, workers in Family to Family groups felt more confident that they could obtain needed services for families, were more likely to say that their caseload allowed them to practice family-centered care, and were more willing to share information on children with foster parents. Where comparisons with focus groups held in 1994 are possible, these data suggest improvements in at least some sites with respect to access to services, resources to support the work of social workers and foster parents, and information-sharing between workers and foster parents.

The focus groups provide resounding support for **the far-reaching impact of reduced caseloads**. In sites that have made substantial reductions in caseloads (below 15 cases per worker), the impact extends far beyond workers' ability to see families more frequently. Workers in these sites are able to mobilize previously unknown and untapped community resources, prevent some of the crises that make out-of-home placements unavoidable, develop creative collaborations within work units and support foster parents who are developing mentoring relationships with birth parents. By contrast, in sites where workers still struggle with high caseloads, workers can often do no more than meet minimal expectations and respond to the most potentially dangerous crises.

The focus groups also demonstrate that **workers are far from fully acknowledging foster parents as valued members of the team**. Many sites have made important strides in sharing information and inviting foster parents to sit at the table. However, workers' comments make it clear that they often fail to respect the unique insights that foster parents bring by virtue of their involvement with the child. Workers too frequently assume that foster parents are incapable of understanding, or unwilling to act on, the best interests of the child. Although workers grappling with high caseloads may feel that they lack the time required to nurture collaborative relationships with foster parents, this pattern was also observed in sites with reduced caseloads. The resulting attrition among the very foster parents who are most able to support workers' efforts on behalf of children only compounds the pressure faced by workers.

³ Measuring Outcomes in Child Welfare: Lessons from *Family to Family*. Prepared by the Family to Family Evaluation Team, December 1996.

It is striking that the policy and organizational changes achieved by agency leaders within Family to Family **have not yet created an environment in which workers feel supported by agency administration.** This finding, consistent across all sites, remains unchanged from focus groups held in 1994. Even in sites where workers described improved working conditions or expressed enthusiasm over programmatic innovations, agency administration's efforts to create these changes was not interpreted as supportive of workers. It is possible that "upper management" will always serve as a useful scapegoat for the enormous stresses and frustrations inherent in child welfare work. However, unless workers are able to believe that their specific efforts in implementing change are recognized and appreciated, it is unlikely that they will be willing to take the risks that accompany a move into more family-centered practice.

In spite of these concerns, the focus group data strongly support the **willingness of both workers and foster parents to adopt a new practice model.** Although the changes are far from complete, the strongly voiced support for family-centered foster care is in striking contrast to what was heard from the 1994 focus groups. Changes in recruitment practices and training programs have produced cohorts of workers and foster parents with radically different attitudes and beliefs from those of their predecessors. In addition, ongoing education efforts have yielded substantial changes among some—but never all—of the more experienced workers and foster parents. This shift in attitude may represent the strongest of all indicators of both the success of efforts to date and the prospects for continuing change.

Practice changes described in this report may be too recent, or too limited in the scope of their implementation, to have resulted in significant changes in quantitative outcome measures such as length of stay and re-entry rates. Changes in foster parent training, for example, may have resulted in substantial changes in attitudes and behavior of newly-recruited foster parents without effecting equivalent changes among existing foster parents. Other changes, such as increased sharing of information about children prior to placement, are more likely to influence outcomes such as rates of placement disruptions in current and future longitudinal cohort data. Overall, the focus group data document extensive changes in front-line practice, which can be expected to result in changes over time in the associated Family to Family outcomes.
