Changing patterns of substitute care

There is a long history of providing for children whose own parents cannot care for them by placing them with substitute families. About 39% of children currently in care are living in foster homes. Until 1948, these foster placements were usually intended to be permanent, *de facto* adoptions. Since the creation of children's departments—now social services departments—there has been uncertainty and ambivalence about whether a foster home is a 'holding' placement in case the child might return to his birth family. At the same time a substantial proportion of children in care have always been placed in residential care. In 1976 it was 41%. Traditionally, adoption was primarily regarded as a resource for healthy white babies.

In the past few years there have been many new ideas and approaches to substitute care. This is partly because the 'in care' population has been changing. The proportion of children under 5 years admitted to care has dropped from 55% in 1956 to 31% in 1980. The number of children committed to care through the courts rather than at their parents' request has risen from 30% to 51% in the same period. Special fostering projects have been developed, mainly to provide for these older children. There is now less use of residential care. Adoptive homes have been found for a wide range of children. Nevertheless, there are still considerable divergences in practice between local authorities, and there is often a wide gap between theory and practice.

Need for planned placements

Research in both the USA and this country¹ has shown that too many children have not returned to their birth parents but have merely drifted into unplanned, long term care. Forty two per cent of the 10 000 children in care at March 1981 had been in care more than three years. The longer a child remains in care the more likely he is to lose touch with his parents and the more placements he will have. Fanshel,² who followed children in care over five years found that after one year only 2% of children had had three or more placements. With each successive year the number increased and after five years 43% had had three or more placements.

Permanence

Anna Freud³ and many others have stressed the

difficulty that children have in reaching their full potential when they are uncertain as to who is ultimately responsible for them or where they will be living next. McKay,⁴ Adcock,⁵ and others have questioned the capacity of a local authority to be a satisfactory parent, and suggested that children need permanent homes and are given the legal security to make this possible. Hussell and Monaghan⁶ have described how these concepts have been incorporated in local authority policy. 'As a target no child under the age of 10 should spend more than two years in care. Priorities for making plans are:

- a) rehabilitation with the natural family
 - b) if this is not possible, placement in a permanent substitute family preferably for adoption.'
- Other local authorities are now developing similar policies.

This has led to a reduction in the numbers of children in their care and has had considerable influence on the choice of placements. Rochdale states that 85% of children admitted to care now return home within two years and approximately 7% are placed for adoption.

Long term fostering

Local authorities pursuing policies of permanence have tried to reduce the number of children in long term foster care because the placement cannot have any legal security. It is always open to the natural parents, the foster parents, or the social worker to change the situation. The research evidence so far available⁷⁻⁹ suggests that because of the ambiguous nature of fostering relationships, children may suffer from anxiety, insecurity, and identity problems. Despite the research, or perhaps because many social workers are not yet familiar with it, long term fostering remains at the moment the preferred placement in many local authorities.

Residential care

Wolkind¹⁰ has stated categorically that residential care in this country today cannot provide children with an adequate substitute for family life. This view is shared by many professionals. There has also been administrative concern about the costs. Residential provision is now being cut substantially and there is some concern that adequate alternatives for very disturbed children may not be available.

Adoption

Practice in both the USA and this country has shown that adoptive homes can be found not only for babies but for a wide range of children of all ages, including those with mental or physical handicap, emotional disturbance, and large sibling groups. Research studies have concluded that the children do well.^{11 12} Nevertheless, the adoption figures show that out of the total number of adoptions, the proportion of children adopted over the age of 5 years has remained relatively constant. The reasons for the probable under use of adoption are not clear. Approximately 1.7% of the total number of children in care left to be adopted in the year ending March 1983.

Short or medium term foster care projects

A number of explicitly task-centred schemes have developed throughout the country aimed at providing treatment, assessment, or respite care. Foster parents are expected to work to an agreed contract, which defines the aim of the placements. The main emphasis of specialist fostering schemes has been on placing difficult or delinquent adolescents and getting them out of institutions and back into the community.

Transracial placements

There is a growing feeling that transracial placements pose social, political, and ethical dilemmas. Gill and Jackson¹³ concluded that black children they studied were doing well but were being brought up as white. The black community is urging that only black families be recruited to provide homes for black children. An increasing number of black families is being found but there is still a real problem in deciding how long a black child should wait for a black family if a white one is available.

The future

There is likely to be an increase in special projects, more clarity about the purpose of placements, and more training for foster parents as professional carers. It is less certain whether resources will be made available to assist more children to return to their birth parents and whether the number of children placed for adoption will increase. Among the unpredictable factors are the effects of new legal provisions giving birth parents more rights and the manpower and resources available to local authorities to provide well planned care.

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