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Fixing Foster Care: How Can We Best
Support Foster Parents?

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FIXING FOSTER CARE

HOW CAN WE BEST SUPPORT FOSTER PARENTS?

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Pell Scholars Honors Program Thesis

The foster care system aims to provide a temporary home to children who are unable to be cared for by their parents. The reasons for this vary, but can be due to "abuse, neglect, or abandonment" (Marzick 507). According to the Pew Commission on Children in Foster Care, there are more than half a million children in our country who are currently in foster care. These children remain in the system for at least two years and are often moved around from family to family (Krinsky, "A Case" 541-542). This paper involves examining the foster care system, as well as its history and intent. The focus on the wellbeing of the families taking in the children, rather than the children themselves, and the shift that made the children's needs the most pressing concern is first recognized. The problems the system faces are also introduced, including systematic concerns, which can tragically harm the children. Some suggested areas for improvement are then presented, notably recommendations for how to best support foster parents. Effectively supporting foster caregivers results in their own success as well as a stable refuge for children in need. This paper addresses the themes of the Pell Scholars Honor Program, notably by reflecting upon the appropriate public policy to remedy this situation, by acknowledging the importance of respecting the rights of all humans, acting to increase public awareness of the problem, and examining the importance of a collaborative effort to remedy the injustice.

Foster care has roots dating back centuries in this country. In 1728 the first orphanage in North America was created in New Orleans. This growth continued into the 1800s due to Civil War and immigration (Youth Communication xvi). By 1849 there were so many children living on the streets in New York that Charles Loring Brace took steps to remedy this by creating the Children's Aid Society. This placed

200,000 children between 1854 and 1930 on trains and relocated them to the Midwest. There they lived with farm families in exchange for their labor (The Adoption History Project, “Charles” par. 1). During this time, the interests of the children were not given priority, but rather the interests of the family they were moving in with (Youth Communication xvii).

The prevalence of foster care over orphanages quickly developed. Henry Dwight Chapin assisted in this, for he focused on using foster care as a temporary home, rather than placing children in an institution. He revealed “statistics showing that orphanages literally sickened and killed alarming numbers of children” (The Adoption History Project, “Fostering” par. 1). He believed “a poor home is better than a good institution” (The Adoption History Project, “Fostering” par. 2). During this time the importance of children remaining with their biological families was also stressed.

Between 1950 and 1970 the number of children in foster care greatly outnumbered those in orphanages. While their time in the system often was not as temporary as the system would hope, it was still classified that way for “children maintained ties to their birth parents” (The Adoption History Project, “Fostering” par. 5). 1960, in particular, saw an increase in the number of foster children as a result of a “heroin epidemic” (Youth Communication, xvii). “The impact of crack cocaine and HIV and AIDS on families has pushed a new wave of children into foster care” (Youth Communication xvii) and is expected to continue.

During the late seventies and eighties, which has been called the era of child welfare reform, the practice of records checks became common to prevent abuse encountered during placement. The focus was now on the foster children, rather than

the foster families. Under the Foster Care Independence Act of 1999, even more drastic reforms were implemented. The legislation was intended to double the funds for housing for these young adults to \$140 million, allow flexibility in decision making in individual cases, allow states to extend Medicaid until 21 years of age, and create more accountability for each state by implementing an evaluation program (Graf 3-4). While these are all essential in ensuring the success of foster children, evidence shows that foster care youth are not aware that these options are available to them. “Many youth want to leave care as quickly as possible and do not realize that they may be jeopardizing eligibility for many services. This contributes to their poor outcomes after leaving the foster care system” (University of South Carolina 2).

Due to the challenges that exist within the foster care system, the children who exit from it face many difficulties. Former foster youth struggle with many long term problems that not only affect the individual, but also the well being of society. Around 19,000 children “age out of foster care” (Krinsky, “A Case” 542) annually, meaning usually on their eighteenth birthday (while some states extend care until the child turns twenty-one years old) they are released from foster care. Upon this release they are often without a permanent family to provide them with support. This leads to problems with these individuals “establishing themselves as productive and responsible adults” (Mathis 355). Awareness of this issue has been recently raised. An article written on September 24, 2008, explained a bill passed to extend the time that foster children remain in the system. \$3 billion in federal funding was awarded to provide support for foster children until they are 21 years old, rather than 18 years old, which many states

follow. This extension is an important step in ensuring that when foster children exit the system, they are prepared to live independently (United Press International).

Issues also exist with young adults beginning a career. Greater than one third of these youth do not possess a high school diploma or GED, which corresponds to the problem that less than half of these youth are employed 12 to 18 months after leaving the system (Krinsky, "A Case" 542). When they are employed, they often receive lower wages that place them below the federal poverty line. This leads to a greater reliance upon public assistance programs (Budd et al. 445-446).

Former foster children are also likely to experience health care issues. Upon release, one third of the youth have a mental health problem, notably posttraumatic stress disorder, alcohol or substance abuse, and major depression (Krinsky, "A Case" 542). Former foster care children are more likely to find themselves in a mental health facility, less likely to hold health insurance or have physical or mental care available to them (Budd et al. 446).

These young adults are also more likely to experience difficulty in establishing a stable life. Statistics have also shown that one fourth of these young adults will be in jail within two years of leaving the system (Krinsky, "A Case" 542). Over twenty percent of these adults will be homeless (Krinsky, "A Case" 542).

These startling statistics force an examination of the system, which reveals many systematic flaws. Often health care is not readily available to these children. Krinsky notes that the system "fails to provide foster youth with the most basic physical or mental health care and treatment or with desperately needed emotional support" ("A Case" 542). These children have often been known to "have significant behavioral and

emotional problems, and many of them are at risk for developing additional problems because of a history of child abuse and neglect, family poverty, or parental mental problems” (Buehler and Orme 3). Furthermore, evidence has shown that foster children under six years old “are substantially more likely than other young children to be in fair or poor health, rather than excellent, good or very good” (Chalk 2).

The manner in which the system runs is also problematic. The court is responsible for deciding “whether a child should remain in foster care or can safely return home, where foster children will live and how often they will move, whether they will have contact with their siblings and other family members, and when they can leave the system” (Krinsky, “A Case” 542). However, the court proceedings are closed, and therefore the public does not witness them. This leads to false perceptions about foster care, which reflects negatively on the families and children who are part of the system (Krinsky, “A Case” 542-543). “That world needs to be seen by adults – biological parents, foster parents, childcare workers, foster care administrators, politicians, policy makers, and anyone who cares about our youth” (Youth Communication xvi).

Concerns also lie with how decisions are made in the system. When change occurs, it is most likely due to a problem that requires a reaction (Krinsky, “A Case” 543). Equally as problematic, “there is a lack of collaborative leadership and sharing of key information among workers, advocates, and departments involved in the lives of vulnerable children and families” (Krinsky, “A Case” 543). This lack of cooperation only frustrates the problems that are already present. Furthermore, these foster children often are not active participants in their proceedings. “Decisions about individual

children are usually made by large numbers of adults [which] may lead to a practice of regarding children as a homogenous group” (Leeson 269). Leeson interviewed four young adults who had been foster children and found that they felt helpless by not being involved in key decisions that affected their lives (272). This is detrimental, for it may lead to “emotional damage, inability to make decisions in the future, extreme anxiety, [and] attachment disorders” in the children (Leeson 269).

An additional issue lies in the lack of political lobbying on behalf of these children. “This disempowered political voice on these issues compounds the resource problems, especially when added to the closed system that inhibits public awareness and knowledge of these issues” (Krinsky, “Email”).

Evidence has shown that some professionals meant to help these children are not meeting this standard. The book *The Heart Knows Something Different* contains narratives written by foster care children about the issues that they face. Many children noted that their social workers and counselors were not caring or willing to help them. Anita Nieves, 15 years old, from New York, felt that social workers and counselors “should be trained properly, because most of them do not act as if they are. They should at least show some concern and care” (Youth Communication 110). Anthony McMahon, 16 years old, also from New York, observed “I want counselors who wouldn’t just be there for the money but who would have good, friendly relationships with the kids” (Youth Communication 112).

Another issue exists in how organizations properly recruit foster parents. These agencies are responsible for “screening foster care parents, adequately training social workers, and complying with mandatory periodic foster care placement supervision”

(Marzick 508). However, these requirements sometimes are not met. Foster parents are not always properly trained, which in some cases can lead to children being placed in homes where they should not be, and encountering abuse.

Perhaps the most troubling issue with the system is the abuse that occurs within foster care placements. H.J David Ambroz, who is now a lawyer but spent his young years as a youth within the foster care system, touched upon this problem. He was taken away from his mentally ill mother, who was known to be physically abusive, and placed into a foster home where he was punished by being kept out of school, denied visits with his siblings, food, and showers (440). Sometimes abuse can occur by workers who are intended to protect the children. A story written by an eighteen-year-old mother described the sexual and mental abuse she was subjected to by her social worker. In her account she recalls saying “You’re supposed to be my social worker, you’re supposed to help me!” to which he replied, “It’s after five P.M. and I’m not nobody’s social worker now.” (Youth Communication 86). This young woman reported the case to the state, but not much action was taken. There have even been cases where children have died from being placed in a home by the system. Between 2005 and 2006 in Dallas, Texas three children died while in foster care. A six year old girl died by the foster parent’s fourteen year old son, a three year old girl and a toddler boy died of head injuries (Garrett, Grabell and Yan par. 1 – 30). It is tragic that children who are meant to be cared for have been severely harmed.

Even more troubling, evidence has indicated that some departments “are rarely forthcoming about the actual extent of maltreatment that occurs in foster care” (Marzick 508). An incident occurred in California, where there was a “secret room” that had files

of 3,000 unreported instances of abuse. Frustrating this issue are the unduly large caseloads that social workers are expected to handle (Krinsky, "A Case" 543). Danger clearly lies in the overwork that is placed on these workers. Furthermore, studies have shown that employees feel pressured to look the other way when it comes to these issues, because "in an overworked and underpaid field, it is too risky for state employees to admit fault because of the perpetual fear of losing a job due to budget cuts" (Marzick 508). However this practice can be clearly be tragic for the children.

The system has made notable advances, but has not solved all of the problems plaguing it. This is why it is imperative to recognize the foster parents who bring the children into their homes to nurture their growth.

"Foster caregivers merit special attention because they play such a fundamental role in the lives of the children... Child welfare specialists agree that today's foster caregivers require enhanced professional support services to adequately perform their role, and an overwhelming majority of foster caregivers concur". (Soliday, "Services" 20)

Regina Diehl, a family law lawyer, agreed that this issue is both of local and national concern. Diehl discussed a state audit review for California whose results yielded caregiver support as an ongoing issue that must be addressed. She also shared the story of a California Supreme Court justice who became a foster parent and due to the problems he encountered with the system, described it as an awful experience. Unfortunately, she found this to be a common problem (Interview).

Worthy to acknowledge, researchers have found "that professional support services received by caregivers indirectly influence children's outcomes via their

influence on caregiver quality” (Soliday, “Services” 23). “As caregiving quality changes, children’s outcomes are affected and vice versa” (Soliday, “Services” 24). Therefore, effectively supporting foster parents is not solely a benefit to them, but to the foster children as well.

Research indicates foster parents today are supporting children who have more complex needs than in years past. Behavioral and medical problems contribute to this, often arising from “the duration and intensity of the situational stressors the children experience” and prenatal exposure to drugs and alcohol (Soliday, “Services” 21). These problems specifically include learning needs, delay in development, and lack of social skills. “In the past 2 decades, studies have found that foster children have three to seven times as many acute and chronic health conditions (including HIV infection), developmental delays, and emotional adjustment problems than other children” (Soliday, “Services” 21). Additional “challenges include...managing the transitions of foster children in and out of their homes...and managing a variety of complex relationships (e.g., with foster care agencies, birth parents, and child welfare workers) and roles (e.g., parent, advocate)” (Buehler et al 77).

Prior to training, it is essential that families are sure they are ready to welcome foster children into their homes. Self selection programs are designed to ensure that each family member is prepared for the changes that will come with foster children. The Casey Family Programs has created a questionnaire to facilitate this. The Casey Foster Applicant Inventory-Applicant (CFAI-A)

measures the potential to successfully promote foster child development, foster challenging children, manage worker and agency challenges, coparent foster

children in two-parent families, integrate foster children into families with birth or adopted children, and provide care to children of a relative. (Buehler et al. 88)

The CFAI-A can easily be taken online and the results can be seen automatically, with a more detailed explanation sent through email (Buehler et al. 90). The CFAI-A is meant to be “used to improve decisions about how to support, monitor, and retain foster families and to match, place, and maintain foster children with foster families (Buehler et al. 77). Mary Adams found self selection very valuable, for she felt taking the time to make the proper match as the key to a successful foster parent and child relationship. It is discouraging for a child to move from place to place and can result in attachment disorders (Interview).

Once caregivers are confident that they are able to become foster parents, training is needed so that they are prepared. Each training program consists of different criteria, so it is difficult to compare one to another. Perhaps the best place to begin would be to establish “a clear conceptual framework” (Soliday, “Services” 23). The Child Welfare League of America (CWLA) seems to agree, for they developed a program entitled Parent Resources for Information, Development, and Education (PRIDE). PRIDE

is designed to strengthen the quality of family foster care and adoption services by providing a standardized, consistent, structured framework for the competency-based recruitment, preparation, and selection of foster and adoptive parents, and for foster parent in-service training and ongoing professional development”. (CWLA, “Pride” par. 3)

The development was a collaborative effort from the Illinois Department of Family and Children's Services, the CWLA, 14 state agencies, one private agency, two national resource centers, one foundation and numerous universities (CWLA, "Pride" par. 4).

PRIDE training consists of three stages, which are preservice, core, and advanced/ specialized training. Preservice training includes recruiting, choosing, and preparing potential foster parents. This training recommends utilizing home visits for this purpose. The focus of PRIDE preservice training is to assess the parents' desire to foster children while examining their ability to "meet the essential competencies" (CWLA, "Pride" par. 10), similar to the self selection program discussed above. Core training differs from preservice for it is intended for new and seasoned foster parents and is much more intensive. The program contains 87 hours of training with sessions varying from 3 to 15 hours each. The sessions focus on identifying developmental needs of children, how to effectively use discipline, how to address sexuality, how to respond to sexual abuse, how to work as a "team member", how to recognize a child's culture and heritage, how to promote permanency, how to manage fostering, recognizing how chemical dependency of families affects children, how to promote child development, and how to handle teenage development (CWLA, "Pride" par. 19-20). The specialized training focuses on caring for teenagers and taking care of children who have experienced domestic violence (CWLA, "Pride" par. 11-13).

Consistent with the objectives of the PRIDE program, most states have foster parents participate in training before they begin foster care. Preservice training is intended to make the foster parents feel supported and prepared to care for a foster

child. As mentioned before, this training is especially important now considering the challenging problems children today are facing (Cummings 354). The methods of training include conference learning with other training foster parents, viewing videos, listening to audio tapes, reading self-study guides, attending workshops, and participating in online programs (Hunter 2-6).

Online training programs are prevalent. The courses are described as containing a self-paced experience, including “visible instructions, printable handouts, question and answer sessions with immediate feedback” (Foster Parent College par. 4). The Foster Care and Adoptive Community (FCAC) Training offers many classes for foster parents to choose from that discuss alcohol and drug issues, behavioral problems, disorders, educational concerns, health problems, and techniques to care for children of all ages (“Foster” par. 1). Some criticize these courses since evidence tends to indicate foster parents learn best in an environment where they are able to interact with one another (Soliday, “Interview”). However, foster parents who have utilized this method of training praise the program for its flexibility and thoroughness (FCAC, “Welcome” par. 4-10). Many states accept online programs to fulfill their training requirements (Hunter 2-6).

The content of training programs varies from state to state, but can include CPR certification, first aid training, water safety, a focus on maintaining a relationship between the foster child and their biological family, a discussion of the resources available, how to identify and report child abuse, foster parenting skills, medical training, and behavior management. Some states, including Colorado, Oregon and West Virginia, develop a tailored plan for each foster parent based upon the individual’s

strengths and needs, as well as those of the child (Hunter 6-8). This is important, for in order to obtain the best results, “it has to be...individualized sometimes” (Cummings 361).

Perhaps worthy of consideration would be training on legal issues. Regina Diehl discussed that foster parents need this training on legal matters they will encounter while caring for foster children. Foster children’s proceedings can be complicated, so explaining the process would be quite helpful to the parents (Interview).

The amount of training varies among the states. Some states refrain from setting a specific number of hours, such as Hawaii and Rhode Island, while others require up to twenty a year (Hunter 2). Mary Adams, a professional with experience in the field, recommended Vermont’s child welfare system as a reputable model (Interview). Vermont requires 40 hours of training in two years in order to advance to a higher level of reimbursement (Hunter 2).

Private agencies have also established requirements. Before training begins, Casey Family Services requires potential foster parents to be at least 25 years of age, have a steady source of income, be healthy, have the space for the child, not to have undergone a significant life change in the last year, and have experience with children. (Casey Family Programs, “Process” par. 6-7). Once caregivers move past this stage, pre-service begins. This training consists of 30 hours of classes where it is discussed “what foster parenting is all about – what it takes, what to expect, the obligations, the challenges, and rewards (Casey Family Programs, “Seven Steps” par. 6).

Additional training is available in the form of specialized training. This can focus on a variety of topics. A survey of foster parents’ feelings indicated “no amount

of training would have prepared them adequately, [but they] wanted more realistic and specialized training that was geared to the specific needs of the children (e.g. autism, abuse)” (Cummings 361). Many families find this training important because it deals with specific problems that many families are faced with (Soliday, “Interview”). As mentioned previously, the PRIDE program provides specialized training too.

Ongoing training is also important, for it keeps caregivers informed and content. In a study evaluating foster caregivers opinions, “a significant portion reported a need for additional ongoing training for effective retention” (Soliday, “Services” 24). New Hampshire, for example, approaches ongoing training as an opportunity “to enhance the quality of care for children living outside their home” (Granite, “Caregiver” par. 1). The New Hampshire Division for Children, Youth and Family collaborates with Granite State College to provide these courses. There are many available, from behavior management, communications, transitions, self development and more (Granite, “Courses”). A private agency in Ohio, called A Child’s Waiting, offers ongoing training as well, however in a more limited manner. Last winter the agency offered seminars examining fetal alcohol syndrome (par. 1).

Training is not only important so that foster parents are prepared to care for children, but also to retain foster parents in the program. An idea to increase the effectiveness of training involves including seasoned foster parents in the process in addition to social workers. Experienced foster parents would be an asset to the program, notably for their ability to speak from experience (Cummings 361).

Introducing foster parents to their new role gradually is an additional strategy to consider. While this may be difficult from a practical standpoint due to the shortage of

available foster parents, it would likely benefit the newcomers. Refraining from assigning the most difficult cases to them would allow time to adjust to their role before helping the most challenging children (Cummings 362).

Funding is another form of practical aid certainly necessary for the foster parents. To provide for a child's daily needs, including food, clothes, school supplies, toys, and more is costly. The pay foster families receive is not sufficient to meet these needs. Rhode Island pays foster parents \$14.39 per day from children up to three years old, \$13.64 a day for children between four and eleven years of age, and \$15.79 for children older than twelve years (RI DCYF 8). This amount would not even cover food for the day for a child. The state of Rhode Island provides a "clothing allowance" three times a year. For children up to three years old, foster parents receive \$100, for children between the ages of four and eleven they are given \$150, and children over twelve years old are given \$250 (RI DCYF 8). Mary Adams found "foster parents in many instances receive less money than kennels charge to keep dogs" (Interview). Foster parents should receive more money to adequately care for the children. "Foster parents do not do this for the money. Costs should be covered" (Interview).

Frustrating this situation, many foster families are lower-middle class, so the money is a concern (Adams). Reports have found that "even modest increases in stipends have been found to relate to more positive outcomes" (Soliday, "Services" 25). Money is so important that "lack of financial support resources were frequently cited as motives for discontinuing foster care" (Soliday, "Services" 21).

Emotional support is imperative for foster parents. When they have questions and concerns about the children they are caring for, they need a reliable source to turn

to. An organization, located in California, is able to provide this. The Navigator Program, which is staffed by foster parents, is a resource where caregivers can call with their concerns and talk to people with whom they can relate. Oftentimes, foster parents have issues trusting social workers, therefore there is value in being able to speak to other professionals that the caregivers feel they can trust. Furthermore, social workers are overburdened with their work. They do not always have the time or resources to provide this service, and are often tackling larger problems (Deihl "Interview").

The Navigator Program receives around 150 calls daily. During each phone call, they identify what the problem is and then develop a plan to deal with it, basing this decision on what is best for the child. Regina Diehl, president of the program and a foster mother herself, finds that when foster parents encounter a problem they want immediate support. The Navigator Program is able to provide that in a cost effective manner (Diehl).

While Diehl finds that the program meets foster parents practical needs, it also offers emotional support. When a caller reaches the Navigator Program, they speak with other foster mothers, which forms a type of relationship in which each can relate to the other. It is a way to air grievances, frustrations, and gain advice from someone with whom they share a common bond (Diehl).

While all foster parents would like a speedy response to their concerns, when a crisis occurs an immediate response is necessary. As noted previously, many of the children that foster parents are now caring for are especially difficult, so a reliable person to contact in a crisis is needed, for problems are likely to arise after office hours (Cummings 360). Rhode Island also has made an effort to provide this with a help line.

The help line is open to callers 24 hours a day and is answered by fellow foster parents. Similar to the Navigator Program, “a foster parent...provides information, referrals, and a sympathetic ear” (RIFPA par. 4). Massachusetts offers a similar program (MA Office of Health and Human Services par. 2). Washington also has a help line available, however the hours caregivers can call are from 4:30 pm to 8:00am Monday through Fridays, and all hours on holidays and weekends (Washington State Department of Social Services and Health par. 4).

Another valuable means of providing support to foster parents lies in a program that transitions new caregivers into their role. This is known as the mentoring or buddy program, where support is provided to the novices by seasoned foster parents who are experienced. Foster parents find this program to be an effective way to meet their emotional and practical needs that they encounter when fostering. They have a buddy to provide them with support when they encounter a problem or have a concern (Adams). A study of foster parents indicated that they “appeared to appreciate being able to vent their frustrations and share their joys about fostering with other parents” (Cummings 362).

Rhode Island utilizes this type of program. It was launched in 1992 and has been successful. The Rhode Island Foster Parent Association finds “a mentor’s ability to empathize and share with their own foster care experience is what makes them uniquely effective” (RIFPA par. 1). Matches are made based upon individual needs. If a parent has a child with a behavioral problem, they can be matched with other foster parents who have dealt with the same issue. The type of contact is variable upon the people as well. Some prefer telephone contact, while others appreciate visits. The mentor is

available for the foster parent to contact at anytime that they specify (RIFPA par. 2). The mentors are to refrain from becoming involved in conflicts, and instead “provide [the foster parents] with the resources they need to achieve their own solutions” (RIFPA par. 3). Adams agrees that mentoring programs are very helpful in providing caregivers with the support they need (Interview).

An additional form of practical and emotional support is a foster parent’s relationship with their foster child’s social worker. It is imperative for a foster parent to have “open communication and rapport [with the]...agency workers”, a close working relationship, and be recognized as being an important part of the child’s life to benefit both the child and the parent (Cummings 353). Evidence has shown that “retention would be improved if [foster parents] received more emotional support such as workers checking in regularly to see how things were going in the home, giving help when it was requested, and helping parents deal with their feelings of loss when a child was removed” (Cummings 362). This is an area of support that can not be ignored.

The relationship between foster parents and social workers has an effect on the children. Often these relationships can be difficult to cultivate.

Parents felt that agency workers did not trust their abilities to deal with foster children or trust them enough to give them full information about their child.

Other foster parents felt that they had to watch what they said and did...because of fear that workers would lay blame on them for any misstep”. (Cummings 359)

A strong relationship is “critical if the child is to receive all that’s needed” (Soliday, “Interview”). It is important for social workers and foster parents to

acknowledge that they are both working together for the children and therefore both actively try to cultivate this relationship.

There have been studies that have taken some of the ideas above and put them into practice. One program, gave foster parents “specialized training in behavior management, enhanced stipends, and regular phone contact to assess foster children’s behavior” (Soliday, “Services” 28). These parents had high rates of retention and the children experienced benefits as well. “Children had fewer behavior problems, they had significantly more successful days in care, and they experienced fewer placement breakdowns” (Soliday, “Services” 28).

Of great importance is the recognition and appreciation of foster parents for all that they do. “Appreciation in the form of positive feedback and gratitude is almost as important as financial incentive” (Soliday, “Interview”). PRIDE also recognizes that integral...is the belief that protecting and nurturing children at risk and strengthening all their families requires teamwork among individuals with diverse knowledge and skills, but all working from a shared vision and toward a common goal. Foster parents...are *essential members* of this team”. (CWLA, “Pride” par. 8 emphasis added)

How can foster parents be recognized? Perhaps by social workers and others simply acknowledging and respecting the caregivers as an important part of the foster child’s life.

Most [of the foster parents] believed that workers did not recognize and respect foster parents’ ability to do their jobs competently... Because parents felt that they knew their children better than workers did, they wanted to be consulted

about decisions affecting their children. As one parent stated: The times I've felt most valued was to have workers who called me before they did something and said, 'What do you think of this?'" (Cummings 360 – 361)

Hosting events that honor caregivers is also important. In Massachusetts, offices hold events intended to appreciate and recognize foster parents for their efforts, even if they are simple gatherings like a pot luck dinner (Adams). Wisconsin agrees, and within the last year held an event at the State Capitol recognizing six foster parents and the Wisconsin Foster and Adoptive Parent Association for their outstanding work (Wisconsin Department of Health Services par. 1-6).

Also important, May has been recognized as National Foster Care Month in an attempt to recruit more foster parents, but also to "show our appreciation for the dedication of the foster families who care for these children and youth, and the social workers who support them" (CWLA, "May" par. 2). An organization, National Foster Care Month, has been established to promote this message. They have created a "tool kit" to facilitate this. They encourage people to send personal notes to foster parents, hold events, and award banquets (National Foster Care Month par. 2).

Recognizing social workers for their efforts is also imperative, since it is a trying job. Social workers face challenging caseloads, which lead to an issue with time management. There is just not enough time to properly give each child the attention that they are deserving of (Krinsky, "A Case" 543). "Although the Child Welfare League of America recommends caseloads of between 12 and 15 children per worker, the average caseload is between 24 and 31 children. Workloads are only increasing because of such complicated issues as substance abuse and HIV/AIDS" (Marzick 508).

Child welfare workers often leave their jobs because of this stress. Krinsky reports that the turnover rate is twenty percent for public agencies and forty percent for private (“A Case” 543). 90% of states have indicated that they have trouble enlisting child welfare workers (Marzick 508). Further contributing to this problem, 76% of social workers polled by a University of Colorado School of Medicine study, reported that they had “considered themselves the object of the client’s anger” (Marzick 508) and 70% “have been victims of violence or received threats of violence” (Marzick 508).

How can social workers best be recognized? Perhaps by focusing on the positive things that do happen as a result of the work social workers do. “Unfortunately the media tend to focus only on the rare, negative events rather than on all the people and children who are trying hard every day” (Soliday, “Interview”). The satisfaction of a social worker with his or her job will improve the relationship with both the child and the foster parents. As mentioned above, recognizing May as Foster Care Month is also in an effort to honor social workers for their work (CWLA, “May” par. 2).

The issues that challenge the foster care system and the efforts taken to remedy them are illustrative of the Pell Programs themes. It is imperative to recognize the importance of the rights and welfare of all individuals, especially children. It is especially important to support foster caregivers, for they have recognized the injustice a child without a home experiences and expressed a commitment to remedying this. The importance of raising awareness cannot be dismissed, thus great value can be found in the organizations that seek to do this, such as the Child Welfare League of America and the Casey Family Programs. Bringing greater awareness to the startling statistics of the system hopefully will encourage citizens to become involved in developing

solutions. Collaborative efforts are vital for success, not only between social workers and foster parents, but lawyers handling the cases, departments working with the children and anyone else involved in the child's life.

The foster care system is intended to be a safe haven for children who are in need. While the concept is crucial to protecting children's wellbeing, it faces significant challenges that threaten it. "Foster care children are among the most powerless individuals in our society. Many...are represented by overworked law guardians, are at the mercy of individuals who may be maltreating them, and lack the developmental ability to organize" (Marzick 508). It is vital for foster parents to be supported for it affects their ability to provide care for these children. The more support, the better quality care the children will receive, resulting in improved outcomes when the time arrives to leave the system (Soliday, "Services" 23). Practical care, such as effective training and adequate funding should be made available to the caregivers. This should be coupled with emotional aid, such as an available telephone hotline to call, crisis support, a mentoring program to help new foster parents adjust, the cultivation of a stable relationship between the social worker and caregiver, and the recognition of both foster parents and social workers for the essential role they play in protecting the children. If the parents have "a variety of concrete supports to be motivated and satisfied with fostering [it will]...increase the likelihood of retention" (Cummings 354) and therefore ensure the nurturing of more children. Stable, healthy, secure children would then be seen leaving the system to grow to become responsible citizens.

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