An Investigation into the Perceptions of Biological Children Living with Foster Children

By

xxxxx
AN INVESTIGATION INTO THE PERCEPTIONS OF BIOLOGICAL CHILDREN LIVING WITH FOSTER CHILDREN
DECLARATION

This work is being submitted in partial fulfilment of the requirements for the degree of BSc (Hons) Health and Social Care and has not previously been accepted in substance for any degree and is not being concurrently submitted in candidature for any degree.

Signed: xxxxx (Candidate)

Date: 05/05/2017

STATEMENT 1

This dissertation is the result of my own work and investigations, except where otherwise stated. Where correction services have been used, the extent and nature of the correction is clearly marked in a footnote(s).

Other sources are acknowledged by footnotes giving explicit references. A bibliography is appended.

Signed: xxxxx (Candidate)

Date: 05/05/2017

STATEMENT 2

I hereby give consent for my dissertation, if accepted, to be available for photocopying and for inter-library loan, for deposit in Cardiff Metropolitan University’s e-repository, and that the title and summary may be available to outside organisations.

Signed: xxxxx (Candidate)

Date: 05/05/2017
Acknowledgments

I would like to take this opportunity to thank a number of people for their help and support throughout the completion of my dissertation. Firstly, I would like to thank the individuals who agreed to participate within this study and the fostering agency who helped me gain access to them. I am very grateful to my dissertation supervisor, Joanne Aubrey, who was there to support and guide me throughout my dissertation. Last but not least, I would like to thank my parents who are foster carers, my friends and Ellis, who have encouraged me to work hard and achieve my next goal of studying a MA in Social work.
Abstract

In the UK, a significant proportion of children who are in care, are placed with foster families. Foster carers have a key role in ensuring they provide a family-based care for foster children, in such a way which provides security, stability, love and a strong sense of identity and belonging (Cosis-Brown et al., 2014). While a breadth of literature exists on the topic of fostering, including both foster carers and foster children; the biological children of these families have rarely been the focus of foster care research (Nuske, 2010). This current study investigated into the perceptions of biological children, who have had the experience of living with foster children. The study has provided an insight into biological children’s perceptions, in relation to their involvement, feelings, experiences and the efficacy of support offered to them throughout the fostering process.

A qualitative design was used in order to gather in depth-data. Semi-structured interviews were conducted with four participants whom agreed to participate within the study. The data was analysed through a thematic analysis which lead to the identification of four main themes; role recognition, involvement, information and support, challenges, and benefits associated with fostering. One of the most significant findings from the data analysis, was the issues around minimal information and support participants received prior to fostering.

Future research needs to continue to investigate biological children’s valid contribution to the fostering process; and to understand how they can be better supported (Hojer et al., 2007).
CONTENTS

Chapter 1: Introduction................................................................. 1

Chapter 2: Literature Review.......................................................... 5

Overview.......................................................................................... 6

Biological children’s involvement in the decision to foster......................... 7

Preparation biological children received prior to fostering.......................... 8

Foster children’s transition into a placement.......................................... 9

Factors influencing the experiences of fostering for biological children ...... 10

Age influence.................................................................................. 10

Problematic behaviour........................................................................ 11

Responsibility and concern.................................................................... 11

The benefits of fostering...................................................................... 12

Chapter 3: Methodology.................................................................... 13

Design............................................................................................. 14

Ethics............................................................................................... 14

Sample.............................................................................................. 15

Development of interview schedule..................................................... 16

Procedure ....................................................................................... 17

Reliability and Validity....................................................................... 17

Data Analysis.................................................................................... 18

Chapter 4: Results and Discussion....................................................... 19

Role Recognition ............................................................................. 25

Involvement, Information and Support................................................. 28

Challenges associated with fostering.................................................. 30

Benefits associated with fostering....................................................... 32

Limitations of the Study..................................................................... 34

Reflective learning............................................................................. 34
Chapter 5: Conclusion .............................................................................................. 36

Summary of Key Findings ..................................................................................... 37

Recommendations .................................................................................................. 38

References ............................................................................................................. 39

References ............................................................................................................. 40

Appendices ............................................................................................................ 44

A: Ethical Approval Letter .................................................................................... 45

B: Participant Consent Form .................................................................................. 46

C: Information Sheet .............................................................................................. 47

D: Interview Guide ................................................................................................ 48

List of Figures

Figure.1 Evidence of Role Recognition ................................................................ 21

Figure.2 Evidence of Involvement, information and Support ......................... 22

Figure.3 Evidence of Challenges associated with fostering ......................... 23

Figure.4 Evidence of Benefits associated with fostering ............................... 24
Chapter 1: Introduction
Introduction

Within the UK there are as many as 64,000 children and young people living with almost 55,000 foster families each day (Fostering Network, 2016). Despite this staggering fact, the total number of children in care in the UK has increased yearly since 2010 (NSCCP, 2017). In Wales alone recent updates have shown that there are currently 4,264 children living with foster families. However, due to the increased numbers of children entering care there is a greater need to recruit more foster families. The Fostering Network (2016) have estimated that a further 500 foster families will need to be recruited each year to meet the high demands of children and young people entering the care system.

The vast majority of children are placed into care as a result of one or more of the following issues: family dysfunction, physical, sexual and emotional abuse, neglect or abandonment (Simms et al., 2000). Children’s early experiences often has a severe impact on their development and future life chances. As a result of this children in care are four times more likely to suffer with mental health difficulties compared to their peers (Meltzer, 2003).

Before any action is taken place to remove a child from their home environment, the local authority and multi-disciplinary teams will assess the individual circumstances. For example, if a child is perceived to be at risk of any harm then necessary steps will be taken to ensure that the child is placed into safer hands such as a foster placement. All actions will be made in the child’s best interests. In determining ‘best interests’ of the child, professionals will consider a variety of factors related to the child’s circumstances and the parent’s capacity to parent (Children’s Bureau, 2016). The child’s welfare and ultimate safety is the paramount concern in relation to his or her best interests (Children’s Bureau, 2016). In most cases, social services are already aware of these children before actions are taken (Mason et al., 2008).

Hoghughi (1998) has defined good parenting as a process that adequality meets the child’s needs and is delivered consistently enabling attachment, stability and security. It is the failure of this stability which is a contributing factor to children entering the foster care system. Government Policy has assumed that foster care is the best substitute of care which can provide children and young people with
an environment making a positive influence towards their health and development (Twigg and Swann, 2007). According to Schofield et al. (2012), foster care can provide children with the security and stability they need until they reach adulthood. Therefore, foster carers have a key role in ensuring they provide children with a stable family based environment so they feel love, a sense of identity and belonging (Cosis-Brown et al., 2014)

In recent years, research has focused sharply on the experiences of both foster carers and foster children throughout the fostering process. (Staines et al., 2010) However, few studies have investigated the impacts which biological children can potentially experience as a result of new children living within their household (Sutton and Stack, 2013).

Hojer (2007) stated that the whole family should be involved in the fostering process, however it has been argued that biological children’s views and thoughts often go unheard (Younes and Harp, 2007). Despite biological children’s valid contribution within the process, little is still known about their perceptions and experiences of the independent fostering context (Sutton and Stack, 2013). Previous studies have also identified gaps in policy and practice in relation to the support biological children receive throughout the duration of fostering. According to Tragowska et al. (2013), biological children are often unprepared for the issues which can arise from fostering and require much more support from fostering services.

One of the most common reasons as to why foster carers resign, is usually due to the difficult experience fostering has upon their own children (Twigg and Swan, 2007). Correlations have also been found between foster placements and the presence of biological children, in terms of placement success or failure.

Given that there is currently a shortage of foster carers across the UK, it is vital that professionals acknowledge the unique role that biological children have within the fostering process. More adequate support is needed from fostering services and professionals to increase the retention of foster placements and to reduce the risks of foster carers resigning (Fostering Network, 2008). In order for more adequate support to be provided by fostering services and to increase the retention of foster placements, a greater understanding of biological children’s
perception is required. Research, therefore, must investigate into the perceptions of biological children.
Chapter 2: Literature Review
Literature Review

This literature review was approached by researching into various published sources such as books, journal articles, online documents and government policies to analyse previous research regarding biological children in the foster process. In relation to the dissertation question, this literature review has highlighted the complex issues which may arise when a family starts to foster, and the changes that fostering brings to biological children’s lives.

Overview

Research into the foster care system has increased in recent years to improve the experiences for both foster carers (Hojer, 2004) and foster children (Staines et al., 2011). In comparison, few studies have investigated into the perceptions of biological children living in foster families and relatively little is known about their experiences (Sutton and Stack, 2013). According to Hojer (2007), the whole family including foster carers, biological children and foster children should be involved in the fostering process. Hojer (2007) has emphasised the importance of understanding the needs of and hearing the voices of biological children, as it is not just the foster carers who foster, but the children too. However, Younes and Harp (2007) have argued that, despite biological children’s valid contribution within this process, their voices are often unheard. This is surprising, as evidence shows the most common reasons why foster carers resign is in fact, due to the effect it has upon their own children and family structure (Hudson and Levasseur, 2002; Twigg and Swan, 2007). Furthermore, biological children have been identified as a key component in relation to placement success or failure (Farmer et al., 2004). Therefore, it is important to give them the opportunity to share their viewpoints and experiences which fostering brings to their lives. This will allow room for improvement and will help them understand some of the challenges associated with fostering such as problematic behaviours displayed by foster children (Spears and Cross, 2003).
Biological children's involvement in the decision to foster

The decision to become foster carers is usually initiated by one or both parents within the family household and is prompted by a range of motivators such as interaction with other foster carers, the willingness to love and care for a child in need and the desire to contribute to the community (Hojer, 2001 and Sebba, 2012). Although this decision is usually initiated by the parents, all family members, including biological children, are likely to be affected. Literature in this area has emphasised the importance of professionals and parents involving biological children in the decision to foster (Martin, 1993; Fox, 2001; Spears and Cross, 2003; Hojer, 2007). Previous studies have revealed the extent to which biological children were involved in this decision and have varied in numerous respects. Fox (2001) found that biological children felt left out of this decision and felt uninformed. Similarly, the biological children in Spears and Cross (2003) reported that they had not been consulted by professionals outside of the family, before the fostering commenced. Furthermore, Hojer and Nordenfors (2006) stated that biological children doubted that their parents considered their views and would have continued to foster even when they themselves expressed concern.

On the contrary, Younes and Harp (2007) found that all of the children in their study were consulted by parents prior the decision to foster, however their involvement depended upon their age. In Nordenfors’ (2016) study, several of the biological children stated that they were involved in the decision, however they reported that shared knowledge with the social services would have given them a better understanding of their foster siblings before arrival. The contact between social services and biological children varied within the study, but unfortunately was described as rare (Nordenfors, 2016). From the literature, it is apparent that the extent to which biological children are involved in the decision to foster has varied a great deal.
Preparation biological children received prior to fostering

In line with good policy, practice and legislation it is important to prepare the whole family for the possible challenges which could occur throughout the fostering process (Fostering Network, 2008). Research has suggested that preparing biological children for the changes fostering brings to their lives, is a crucial aspect in ensuring placement stability (Hojer et al., 2013). Having such information would allow biological children to understand some of the challenges associated with fostering such foster children displaying difficult behaviours. Sufficient preparation would also enable foster carers and biological children to manage these issues in the most appropriate way (Noble-Carr et al., 2014).

In previous studies, biological children have expressed many different opinions with regard to whether they received enough preparation to be prepared for the changes which fostering brought to their lives. While Martin (1993) explored biological children’s views on preparation, it was found to be problematic. The children believed that their own needs to be prepared for the tasks of fostering were not taken seriously. Furthermore, a variety of studies (Fox, 2001; Spears and Cross, 2003; Younes and Harp, 2007) have shown that biological children felt that they needed more specific information and better preparation before the arrival of foster children. According to Spears and Cross (2003), many of the challenges experienced by biological children could have been minimised through better preparation, communication and support. Younes and Harp’s (2007) study suggested that the reality of fostering for biological children was quite different to the preparation they received. In further detail, the children within this study stated that: “You don’t know what it’s like until you do it”, and, “I didn’t realise all that would happen” (Younes and Harp 2007 pp. 30). On the other hand, the findings in Hojer and Nordenfors (2004) study suggested that 39 per cent of biological children had received enough information about foster children prior their arrival which outweighed the 33 percent that felt they did not.

According to Martin (1993) biological children suggested that sharing information can be a protective factor for both themselves and foster children. For instance, foster children had disclosed previous experiences of abuse to biological children, who found this difficult to manage, without relevant information. This is
supported by recent findings where participants discussed incidents when foster children has disclosed previous experiences of abuse (Williams, 2016). Participants explained how this matter was not discussed with them, and that they managed this issue with their parents (Williams, 2016). More importantly, biological children have suggested that their relationship with foster children could have been improved if they had received more information prior they started fostering (Hojer et al., 2013)

**Foster children’s transition into a placement**

When a child first transitions into foster care, many mixed emotions are felt by the whole family, as this is a start of a new chapter for all involved. Twigg (1994) has identified the transition as the “settling in” period, which can be equally as challenging for carers, biological children and foster children (Twigg, 1994). During the transition period, biological children can certainly feel overlooked by their parents and are usually expected to abide by higher expectations compared to the foster child (Sutton and Stack, 2013). Younes and Harp (2007) highlighted the initial feelings expressed by biological children when a foster child first transitioned into their family. Feelings such as jealousy, anger and resentment were common emotions reported by biological children. Similarly, in Nuke’s (2010) study, biological children also reported feelings of resentment toward foster children due to the extra stress placed upon their parents. Throughout this period, biological children re-established their role, to ensure a good example was set for the foster children. Twigg and Swan (2007) stated that re-negotiating one’s role makes it difficult for a biological child to experience a sense of regularity within the family. In further detail, Hojer (2004) argued that the negative emotions felt by biological children are linked with the amount of attention parents give to a foster child. Additionally, Sinclair et al. (2005) suggested that jealousy is commonly felt amongst biological children, when they have to share their possessions with foster children. Indeed, Watson (2002) established sharing, as one of the most difficult tasks encountered by biological children.

While studies have explored biological children’s experience of the transition period, Sinclair et al. (2005) explored foster cares personal views, which contrasted with their children’s. Parents reported that their biological children had
generally liked and welcomed new children into the household. However, as previously stated, the expectations of fostering were very much different from the realities (Younes and Harp, 2007).

With the evidence provided in these studies, it would appear that the transition period has the potential to cause stressors and negative emotions, however Younes and Harp (2007) argue that birth children soon become used to their ‘new siblings’. Furthermore, if biological children maintain a positive frame of mind and focus on the positive aspects of fostering such as making new friends and taking part in fun activities, can influence their views and help them overcome difficulties experienced in the transition period (Sutton and Stack, 2013).

Factors influencing the experiences of fostering for biological children

Age influence

There are many contributory factors which can influence the experiences of fostering for biological children. Research in this field has suggested that age is a key influence in determining how well biological children respond to the fostering experience. Previous research conducted by Ellis (1972) and Pugh (1996) suggested that children between seven and thirteen encountered more difficulties in relation to change, however these studies did not provide any justification as to why this age group found it harder to cope with adjustments. In addition to this Cleaver and Berridge (1987) proposed that it was essential for biological children and foster children to have an age gap of several years, allowing the biological child to remain the oldest. Yet, they provided no evidence as to why it was essential to have an appropriate age gap. Further research conducted by Farmer et al., (2004) revealed that an age gap of less than two years between biological children and foster children, enhanced the likelihood of friendships and assisted in placement stability. Sutton and Stack (2013) found that biological children preferred foster children to be of a similar age or younger than them. This was apparent when biological children perceived older children entering their home as a ‘threat’ to their role identity (Sutton and Stack, 2013). Most biological children felt that being the oldest gave them a sense of purpose and responsibility in improving the lives of fostered children and assisting their
parents (Sutton and Stack, 2013). Similarly, biological children in Yones and Harp’s study (2007) preferred foster children to be younger than them so that their birth order status was not affected.

**Problematic behaviour**

As previously stated, children who enter the care system are up to four times more likely to suffer with mental health problems compared to their peers (Meltzer, 2003). This can be a contributing factor to behavioural difficulties within a placement. This is supported by Sinclair *et al.*, (2005) who stated that persistent behaviour difficulties displayed by foster children, have impacted biological children’s views upon foster children, leading to placement disruption.

Cited in Hojer *et al.*, (2013), Watson and Jones (2002) found the most difficult behaviours biological children encountered from a foster child which included the following; lying / storytelling, stealing and damage of own belongings. In their study, biological children explained how they often received the blame for things they had not done. This often led to trust issues and uncertainty as stated in Hojer (2007), many participants said it was hard to distinguish between what was ‘true’ and what was ‘false’. Biological children also suggested other issues linked with behavioural difficulties such as foster children not understanding basic house rules and boundaries (Hojer, 2007). Biological children stated that foster children would not inform their parents of their whereabouts and would not meet agreed time curfews (Hojer, 2007). Furthermore, biological children felt unfairly treated, as foster children got away with more things than they ever did.

**Responsibility and concern**

Previous studies have shown that biological children often take on many responsibilities when foster children are placed with them (Hojer and Nordenfors, 2006). Hojer and Nordenfors (2006) highlighted the most frequent responsibilities undertaken by biological children which included; babysitting, practical help, emotional support and support with educational needs. Noble-Carr *et al.*, (2014) found that many foster children would discuss their problems with biological children. However, this placed a lot of responsibility on biological children, as they
had an important role to determine whether such information should be passed on to a responsible adult or professional. Furthermore, the participants in Nuske (2010) study, expressed a concern for the responsibility they were faced with. For some participants, the responsibilities were reasonable, for other it was described as burden (Nuske, 2010).

Hojer and Nordenfors (2006) also found that biological children, were concerned about foster children having to leave the family. It was reported that children expressed concern about foster children’s well-being, when moving to a new placement, or returning to their previous family (Hojer and Nordenfors, 2006). Similarly, Noble-Carr et al., (2014) found that the uncertainty and concern around what would happen to foster children once they had left the foster family, was a difficult experience faced by biological children.

The Benefits of Fostering

Despite the various issues associated with fostering, numerous studies have highlighted a range of positive aspects reported by biological children (Younes and Harp, 2007; Sutton and Stack, 2013; Nobble-Carr et al., 2014). Younes and Harp (2007) found that biological children believed the experiences of fostering, developed their understanding of the complexities of life. The parents within this study, also commented on the positivity fostering brought to their children’s lives and their family. Parents stated that their children became “more compassionate” and “loving to those who were less fortunate” (Younes and Harp, 2007). Additionally, Sutton and Stack (2013) found that tasks and experiences of fostering made biological children feel part of the fostering team. Other benefits reported by biological children included; friendships, more fun shared activities as a family, new life skills, and deeper appreciation for their parents (Noble-Carr et al., 2014). In further detail, biological children believed fostering had improved their self-esteem, one stated “It changed me for the better, I used to be shy and really un-brave, now I am strong and confident and good with people. (Noble-Carr et al., 2014 pp.16)
Chapter 3: Methodology
Methodology

The following chapter will discuss the type of methodology used for this study and provide a justification of why it was chosen. This has included the reasoning for using a qualitative approach, the importance of ethical considerations, and a sample of the chosen participants.

Design

The chosen research method that was adopted for this study was qualitative. Qualitative approaches take in the form of words or text (Denscombe, 2010) which allows researchers to understand the feelings, beliefs and values of the participant’s perspectives (Hastie and Hay, 2012). In further detail, Pathak et al., (2013) stated that using qualitative methods enables participants to have a voice and will permit them to share their experiences, attitudes, behaviour and interactions on the topic in hand. Furthermore, Patton (2002) stated that qualitative research aims to understand individual situations in their uniqueness and the connections that happen in that context. Therefore, a qualitative approach was an effective method to gather in-depth data and developed a robust understanding of the views and experiences which participants had encountered throughout the fostering duration.

Interviews, a qualitative method, were used in order to collect data for this study. This is a data collection technique that involved gathering information through verbal communication with participants (Moule and Hek, 2011). The interviews were semi-structured and opened-ended; as this was useful for producing data based on participant’s thoughts, opinions and ideas (Denscombe, 2010). Kelly (2010) suggested that semi-structured interviews are appropriate to research questions regarding the meaning of events or phenomena to research participants.

Ethics

Ethical approval was sought from Cardiff Metropolitan University School of Health Science Ethic Committee, to examine any ethical issues which could have occurred during the course of this study. Research ethics are specifically
interested in the analysis of issues which are raised when people are involved as participants in research projects. Therefore, it was important for issues to be identified so that participants remained safe (Armour and Macdonald, 2012).

The potential issues which were identified by the researcher included: confidentiality, safeguarding and emotional involvement of participants. To protect participants, identify and sustain confidentiality, participants were anonymised with data codes for example participant 1 (p1), and all data collection was password protected. Whilst not including children directly in this study it was important to consider that participants may have disclosed information raising concern in terms of safeguarding. Therefore, all participants were informed that if the researcher had any concerns regarding the welfare of a child, then it is of duty to safeguard this child and pass this information on to Children’s services. Furthermore, participants were offered the opportunity to talk to a professional within the fostering agency, as the interview questions may have triggered difficult or emotional memories.

Prior to the interviews, the researcher took necessary steps to ensure that participants fully understood the process in which they were to be engaged in (Hennink and Hutter, 2011). In doing so, all participants were provided with information sheets (see Appendix C) explaining the study and had to sign a consent form (see Appendix B) in agreement to take part. Consent is crucial when conducting research as this confirms whether the participant is willing to participate, after understanding all aspects of what the study involves (Slot, 1996). The consent form notified the participants of their rights and reassured them that under the Data Protection Act (1998) they have the option to withdraw from the study at any given time without reason.

Sample

Purposive sampling was used to gain access to the participants who fulfilled the criteria. Denscombe (1998) suggested that purposive sampling is applied to situations where the researcher already knows about the specific individuals or events and deliberately selects particular individuals because they are likely to produce valuable data.
The sample used for this study consisted of four participants who lived in the same geographical area, Cardiff. All participants were between the ages of 18-25 to ensure that they could reflect on recent feelings and experiences as opposed to trying to recall what happened after a significant time-lapse. All participants had lived with foster children for over a year which provided a valuable insight into their experiences.

The researcher approached participants via email inviting them to take part in the study. More than six individuals were asked to ensure that there was enough people for this study to go ahead and this also allowed room for any withdrawals. Four individuals agreed to be interviewed; a time and date was then agreed at the convenience of both the researcher and participants.

**Development of interview schedule**

The interview schedule (see Appendix D) was developed in accordance with key themes specified in previous academic research, which have been discussed in the literature review. Developing an interview schedule was important as this allowed the questions to be directed towards the issues and topics that needed to be addressed (Kennedy, 2006). The interview schedule contained open-ended questions which allowed participants to determine their own responses with detail. The interview was split into three different sections which included the following; involvement and information prior to fostering, feelings and experiences throughout the fostering duration and the availability of support networks. At the start of the interview participants were asked closed questions regarding basic information such as 'how old were you when your parents started to foster?' The questions gradually focused on the views and experiences that participants had encountered whilst living with foster children for example 'What were the positive aspects of the foster child/ren living with you?' To end the interview participants were asked their overall views of fostering and if they would like to add anything else to the discussion. This actioned participatory research as it emphasised participation and involvement through giving participants the opportunity to discuss aspects which had not be structured in the interview schedule (Bergold and Thomas, 2012).
Procedure

Before each interview commenced all participants had to sign the consent forms to confirm that they were in agreement to take part and fully understood the information which was provided to them. Each interview took place in a private room at Cardiff Metropolitan University. This was the most appropriate location for participants as they all lived within the Cardiff region and this was a familiar place. It was important that the interviews took place here, as any other location such as the participants own home, may have affected the validity and reliability of the data, as they may not have wanted to share their views in front of their parents. More importantly, this location was necessary as it distanced the interviews from current foster children within the home.

Once participants were settled within the room, they were asked if they were happy to proceed and reminded that the interview would be recorded. During each interview participants were prompted when necessary to ensure the discussion remained on topic and to help the discussion flow. However, the researcher ensured that leading questions were avoided, as leading questions are phrased to suggest a particular answer or imply that one answers is expected or more correct (Herman and Bentley, 1993). Each interview was recorded and lasted around 20 minutes. Two separate devices were used to ensure that there was a copy of the data.

Reliability and Validity

To ensure reliability of this study, the examination of trustworthiness was crucial. Seale (1999) stated that trustworthiness of research is one of the main issues discussed with validity and reliability of qualitative research. To establish trust, four concepts were followed in accordance with Lincoln and Guba’s (1985) evaluative criteria: credibility, transferability, dependability and confirmability. In order to meet standards of credibility, researchers must have confidence in the accuracy and truth of the findings. Transferability is whether the findings could have applicability in other contexts and dependability looks at the consistency of the findings and if they could be repeated. Lastly, confirmability is to the extent of
which the findings of research are shaped by respondents and not by the researcher. (Lincoln and Guba 1985).

Data Analysis

For the purpose of this research a thematic analysis was conducted in order to identify, analyse and report key findings of the data-set (Braun and Clarke, 2006). Thematical analysis differs from other analytic methods that seek to describe patterns across qualitative data (Braun and Clarke, 2006) but similarities can be found in the grounded theory of methodology in relation to working with data for example, extracting codes.

To start the analysis, the researcher became familiar with the interview transcribes through repeated reading of the data and noted down initial ideas. Codes were used to highlight specific qualitative information and identify patterns within the data-set. Re-occurring patterns were then collated into potential themes, and reviewed by the researcher's supervisor. This ensured the themes reflected patterns from the data and related to previous literature.

This led to the identification of four key themes; Role recognition, Lack of information and Support, Stressors and Benefits of fostering. These were then refined into sub-themes and presented in hierarchy diagrams with evidence quoted from participants (see results in chapter 4).
Chapter 4: Results and Discussion
Results and Discussion

The analysis of qualitative data revealed four main themes; Role Recognition, Involvement, Information and Support Networks, Challenges associated with fostering, and Benefits associated with fostering. Each theme has been broken down into sub-themes to provide a clear representation of the results which are displayed in the hierarchy diagrams (figures 1, 2, 3 and 4). The diagram provides qualitative evidence which has been quoted directly from participants’ perceptions and experiences of fostering. To protect participant’s identity, no names have been used in the results. Instead participants were given a numerical code; for example, participant 1 (p1).
<table>
<thead>
<tr>
<th>Theme</th>
<th>Sub Theme</th>
<th>Qualitative Evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Role Recognition</td>
<td>Sibling Recognition</td>
<td>“I consider them as my brothers”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“we still have our bickers just like any other siblings”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“He was like a brother to me”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“….it was like having two younger brothers”</td>
</tr>
<tr>
<td></td>
<td>Caring Roles and</td>
<td>“Normally I take a big responsibly in settling them in”</td>
</tr>
<tr>
<td></td>
<td>Responsibilities</td>
<td>“I would regularly look after the children on a one to one basis”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“I usually took them out every weekend, and tried to help out as much as possible”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“I felt as though I had a duty to help my parents”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“When we had older children with us I didn’t really like it as I didn’t feel as</td>
</tr>
<tr>
<td></td>
<td></td>
<td>though I could help my parents as much”</td>
</tr>
<tr>
<td></td>
<td>Sense of Belonging</td>
<td>“The boys looked up to me as an older sister”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“The boys also got to the point where they called my mum, mum and my dad, dad”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“Some of the children would call me a sister”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“The children felt a part of our family”</td>
</tr>
</tbody>
</table>

Figure 1 Evidence of Role Recognition
<table>
<thead>
<tr>
<th>Theme</th>
<th>Sub Theme</th>
<th>Qualitative Evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Involvement, Information and Support</td>
<td>Minimal information about Foster Children</td>
<td>“I would sometimes worry in case I would offend the children, or if there was something in particular which would trigger a bad memory for them”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“It was never passed on to us for confidentiality reasons”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“I think all of us as a family were given very little information at the start”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“We were not given that much information at all”</td>
</tr>
<tr>
<td></td>
<td>Second hand information</td>
<td>“It was second hand information passed on to us, we didn’t have anyone come to talk to us personally about it”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“We only ever had updates from our parents”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“Only by my parents, and even then, they didn’t know much about either of the children”</td>
</tr>
<tr>
<td></td>
<td>Support Networks</td>
<td>“There wasn’t really anyone for me to talk to if I was upset”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“I think there should be more support offered to birth children, we should be more involved”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“I was never aware of any support which was available to me”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“I didn’t really know there was any sort of support, and today I still don’t know of what support is available for me”</td>
</tr>
</tbody>
</table>

Figure 2: Evidence of Involvement, information and support
<table>
<thead>
<tr>
<th>Theme</th>
<th>Sub theme</th>
<th>Qualitative Evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Challenges</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Concern for Parents Welfare</td>
<td>“My main concern was for my mum and the workload”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“It’s still hard, and my parents are both getting on so I sometimes worry about them”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“Many of times I have been worried about my parents, especially my mum”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“I sometimes worry about my parents, but never really talk to them about it”</td>
</tr>
<tr>
<td></td>
<td>Challenging Behaviour</td>
<td>“This would often come with much more aggression than a normal child would”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“They tested us and displayed challenging behaviour”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“It can be very frustrating and upsetting”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“I only now really understand why they were badly behaved”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“I had things thrown at me”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“It was clear that their behaviours were linked with their past”</td>
</tr>
<tr>
<td></td>
<td>Impact on Relationship with Parents</td>
<td>“Sometimes my mum would tell me not to interfere, this caused a few arguments”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“I am proud of my parents for what they do, they work hard and this has made me appreciate them more.”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“It wouldn’t be as easy just to go for a day out”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“My parents are always very busy, I feel as though it’s harder if I want to spend time with just them”</td>
</tr>
</tbody>
</table>

Figure 3 Evidence of Challenges associated with fostering
<table>
<thead>
<tr>
<th>Theme</th>
<th>Sub Theme</th>
<th>Qualitative Evidence</th>
</tr>
</thead>
</table>
| Benefits | Attachments, Connections and Friendships | “I made strong attachments with some children”  
“It was nice to have someone there”  
“I became quite close with him”  
“We were growing up together, and I was able to guide him at school and stuff”  
“We were good friends, and I was able to introduce her to my friends”  
“Fostering has brought my family closer together”  
“We did more as a family, and took part in more fun things together” |
| | | “It’s great to know that you are helping other children”  
“I have experienced great satisfaction from being able to help foster children”  
“It was rewarding”  
“I am so happy that we have been able to give children a better way of life”  
“Fostering has helped me gain knowledge around difficult life experiences which many children encounter”  
“I have made many warm memories with the foster boys”  
“It is nice to see them growing up as individuals who will now have better opportunities” |

Figure.4 Evidence of Benefits associated with fostering
Role Recognition

During the course of this study, all four participants recognised their individual roles within the fostering process. In relation to the results, three sub-themes emerged, sibling recognition being the first. All participants identified themselves as being an older sibling to the foster children and often referred to the foster children as their younger brothers or sisters. This appeared to be a positive aspect for participants as some described this as “quite nice”. In further detail, participant 1 stated that “as I was always the youngest out of me and my sister, it was quite nice to have younger children living with us, it was like having two younger brothers” (p1). These findings are important for the reader, as it suggested that biological children have identified themselves as being a sibling to the foster children. This clearly suggested that for some participants, participant 1 included, foster children are considered as their siblings/family, rather than children in care.

From the evidence gathered in this study, it also became apparent that foster children reciprocated a sibling recognition and would refer to participants as their brother or sister. This has identified a sense of belonging within the family which Angel (2014) has described as the following; “belonging to or belonging with someone, can be understood as an experience of equality and intimacy” (pp.3). This is a positive aspect which showed that participants undertook a role which helped foster children feel a sense of belonging within the family at a level which was comfortable and beneficial to them. This was highlighted when participant 1 stated that “the boys looked up to me as an older sister, we still have our bickers just like any other siblings” (p1).

However, participant 2 stated that children would settle better and refer to him as a brother and parents as mum and dad if they did not have any contact with their own family. A response from participant 2 suggested that “this is only because their own parents were out of the picture so they were a lot more inclined to bond with us” (p2). In line with previous research (Biehal, 2012), foster children who viewed foster carers as if they were their parents, had not been in contact with their biological parents for many years.
This information has suggested that foster children signify a sense of belonging, in the form of calling their foster family by their family relations for example: sister, brother, mum and dad. This could potentially come from foster children’s desire to seek attachments which they have not previously built with their families. In terms of practical implications for social workers, a foster child’s subconscious use of family relationship names such as mum and dad, signifies belonging and can be used to evaluate the progress and success of a placement.

Another sub-theme that was found from the results, showed that participants adopted caring roles and responsibilities. This was shown through some participants becoming older siblings to foster children who were placed with them. Participants undertook several duties to help foster children and take pressure of their parents, notably, their mothers. Participant 3 and participant 2 both stated that they “usually or regularly” looked after the children on a one-to-one basis. Supporting this, participant 2 said that “I usually took them out every weekend, and tried to help out as much as possible” (p2). Similarly, Sutton and Stack (2013) also found that children and young people extended their caring roles and responsibilities, not only by supporting foster children but supporting their parents too. Furthermore, evidence from this study suggested that caring roles and responsibilities develop with age. Participant 2 stated, “when it all started, there was less of an expectation from me and more of a ‘I hope everything’s alright’, but as I got older from 17 upwards there was more of a natural role developed from me (p2). This suggested that, with age, participants naturally develop caring roles and responsibilities through maturity, experience and expectations from parents. The development of role recognition would suggest that older, more experienced biological children may have a better recognition of their own roles in the fostering process. Therefore, social workers could evaluate biological children’s interpretation of roles, when considering a suitable placement for foster children.

It became apparent that three out of the four participants preferred to be the eldest with the original biological order when foster children were placed with them. This was clarified when they felt that being the eldest allowed them to have more responsibility and that they were able to adopt a more caring role.
Supporting this, one participant within this study stated that having individuals older than herself was sometimes “intimidating”. Participant 4 stated that “when we had older children with us I didn’t really like it as I didn’t feel as though I could help my parents as much, and sometimes this did intimidate me in my own home” (p4). This response suggested, that some participants do not like foster children being older than themselves, because it may take away their role identity by reducing their ability to help. On the other hand, participant 3 believed that when foster children were of similar age to her, she had a big responsibility in settling them in. In participant 3’s responses, she stated that “normally I take a big responsibility in settling them, because they were more my age than my parents age so it would be less daunting for them to talk to someone of a similar age” (p3). This has demonstrated that individual preferences should be taken into consideration as some biological children perceive roles differently to others, for example some may prefer to build friendships with foster children, as opposed to being a care giver.

In relation to these findings, Younes and Harp (2007) found that biological children preferred to be the oldest sibling in order to maintain their status which comes with birth order. Sutton and Stack (2013) found that biological children stated that being the eldest sibling gave them a sense of purpose. In further detail, Sutton and Stack (2013) concluded that age is a crucial component of maintaining biological children’s role identity. The analysis of this evidence suggested that all participants, bar one, preferred foster children to be younger than them. Supporting this, previous studies have suggested that when foster children are younger than biological children, better relationships were formed than when they were close in age (Højer and Nordenfors, 2004). Not only will an appropriate age gap benefit the foster child, for example: receiving one to one care, extra activities, and setting good examples, it also gives biological children the opportunity to develop caring roles and responsibilities, enabling them to help their parents. However, when placing children into foster placements, professionals may need to consider biological children’s perceptions and feelings around factors such as age gaps.
Involvement, Information and Support

According to Hojer et al. (2013), the importance of involving biological children in the decision to foster is a key finding in many studies. Previous research has suggested that biological children have felt left out of the decision to foster (Fox, 2001). The findings within this current study have suggested that three participants felt fully involved in the decision to foster, and had a discussion with their parents prior the decision went ahead. This is supported by Participant 1 who stated, “my parents asked us our opinions and I feel as though this was a family decision” (p1) and in further detail participant 3 said “my mam and dad pre-talked to use before they made their choice, to find out if we were comfortable with it” (p3). On the other hand, one participant believed that her age affected her involvement in the decision as she was “quite young” when it all started. Similarly, Younes and Harp (2007) found that involvement usually depended upon age.

One of the most significant findings from the data analysis was the issues around minimal information and support participants received prior to fostering. While the issues around minimal information did raise concern for some, one participant acknowledged the “importance” of confidentiality. Despite understanding the importance of confidentiality, participant 3 found this hard and stated that “it was never passed on to us for confidentiality reasons. I know that’s important and I found this hard and felt as though this was wrong” (p3). This therefore suggested that having minimal information regarding the foster child can be difficult for the participant. Reasons for this can be explained when two participants indicated a sense of worry when interacting with foster children, in case this would trigger “bad memories” from their past experiences. An example of this was from participant 3 who said that “I would sometimes worry in case I would offend the children, or if there was something in particular which would trigger a bad memory for them” (p3). Although participants would like to receive more information about the backgrounds of foster children, this may cause implications for practice such as breaching confidentiality. This is because social workers must respect the principles of confidentiality and ensure that private information is only divulged with the consent of the person using social work services (Hammersley, and Traianou, 2012). However, professionals must
acknowledge that biological children are worried about bringing up sensitive memories from foster children’s past experiences. Perhaps biological children could be advised on how to handle these particular situations when age appropriate. Martin (1993) interviewed biological children and supported the previous statements by suggesting that sharing information can be a protective factor. Not only did participants receive minimal information about foster children, but they had “no idea” what to expect. Supporting this, participant 1 stated that “we were thrown in the deep end” (p1).

Evidently, biological children may be vulnerable and unprepared for what to expect, due to having little information prior to the fostering process. In previous studies, biological children have felt uninformed and believed that they were not given enough information prior to fostering (Fox, 2001; Younes and Harp, 2007). The evidence presented from the responses in this study and from previous studies, have suggested that biological children need better preparation for the expectations of fostering. In the cases where information is provided to biological children, it usually comes from their parents. Supporting this, all participants in this study stated that they only received information updates from their parents. Thompson and McPherson (2011) also showed that the extent to which biological children received information prior to fostering depended solely on the initiative of their parents. Receiving information this way was perceived as limited by two participants in Thompson and McPherson’s (2011) study, expressing that they “didn’t know much about the children.” This evidence would suggest that professionals should prepare biological children and make them more aware of situations which their foster siblings may have experienced in their previous families.

Despite the vast evidence suggesting the need for extra communication or support, all the participants expressed a lack of knowledge of any support available to them. Furthermore, participants within this study also emphasised the need for better communication between social workers and themselves. Participant 4 suggested that “there should be more support offered to birth children.” In further detail, “it would have been better if social workers could have spoken directly to us” (p4). According to Williams (2016) some biological children
want to be acknowledged and consulted by social workers to benefit themselves within the fostering process. The apparent need for biological-child-specific support is crucial, due to the evidence provided within this current study and previous studies. This would suggest biological children should be provided with a more accessible biological-child-specific support network. This could be through support groups that offer training to gain an understanding of the complex issues which can arise from fostering. Support groups could also provide strategies to help biological children cope with the challenges associated with fostering. On the contrary, Noble-Carr et al., (2014) found that biological children wanted to be included in the support which was already provided to their parents, as opposed having their own support groups.

Overall, each participant within this study gave a clear indication as to how they could and should be provided with additional support. As such, they wanted to be provided with more information as a protective factor, to help prepare from the demands of fostering and understand foster children (Martin, 1993). Participants also wanted a continuous system which supports them throughout the fostering duration. This could be through the use of support groups to provide biological children with an understanding of the complex issues that can arise from fostering and provide strategies to cope with the change. Importantly, biological children need to be made aware of any support groups which are available to give them the opportunity to discuss their fostering experiences with other biological children for therapeutic effect.

**Challenges associated with fostering**

All participants communicated the difficult experiences which they had encountered throughout the fostering duration. This has been established as ‘challenges’ to highlight participant’s perceptions. Three main sub-themes were identified; a concern for parent’s welfare, challenging behaviour displayed by foster children and the impact which fostering had upon participants’ relationship with their parents. All participants expressed a general concern for their parent’s welfare. Similarities were found amongst all participants when they described the high demands of fostering as being a “24-hour job”. Participants had a general concern for their parent’s welfare due to the added stress and workload within
their family, notably their mothers. Two participants stated that concerns were never discussed with their parents, as they didn’t want to add extra stress or cause any further worry. In relation to this, participant 1 stated that “I sometimes worry about my parents, but never really talk to them about it, they have enough to deal with” (p1). In further detail, previous studies have shown that biological children do not often communicate their feelings or concerns with their parents, instead they cope independently or isolate themselves (Younes and Harp, 2007; Hojer, 2007; Thompson and McPherson, 2011). The evidence in this study and previous studies suggest that biological children do not often discuss concerns with their parents in order to protect them from further emotional stress (Hojer, 2007). Therefore, it is suggestive that biological children could be provided with some sort of direct support line so that they can discuss concerns with a professional and seek support when needed. This would allow biological children to offload any stress they may have themselves and seek advice to support their parents through stressful times.

Previous research has revealed that problematic behaviour can influence the relationships between biological children and foster children, which is often connected to disruption within a placement (Sinclair et al., 2005). The results from participants’ responses in this study also indicated that challenging behaviour was something which was quite difficult, but manageable. Participants explained how foster children’s behaviour would fluctuate from normal “day-to-day tantrums” to tantrums which came with “much more aggression”. Some described challenging behaviour as “frustrating and upsetting”. Furthermore, participant 4’s perception around challenging behaviour is as followed, “I would just feel sorry for my mum and have some sort of resentment towards the children” (p4). Supporting this statement, participants in Nuske’s (2010) study also revealed expressions of resentment towards foster children when witnessing such behaviours and extra stress placed upon their parents. In retrospect, however, participants within this study sometimes considered challenging experiences as a positive aspect. Participant 1 commented on how this has helped her to appreciate her own background, “with age, I started to understand the foster boys more, it was clear that their behaviours were linked with their past experiences, it helped me be more appreciative of my own background” (p1).
Experiencing challenging behaviours have helped participants to acknowledge issues which foster children may have previously encountered. This evidence can be interpreted as a positive aspect, which has given participants a better understanding of the reasons behind challenging behaviours. Furthermore, as participants matured they were able to cope with these challenges and found it easier to “let things pass over”. Whilst all participants discussed times where fostering had impacted their relationships with parents, two stated that this was not in a “bad way”. For example, participant 2 suggested that fostering had quite a positive impact on his relationship with his family, “as a family, I believe that fostering gave us all something to work towards together” (p2). In addition to this statement, participant 1 reported that she appreciated her parents for what they do, “I am proud of my parents for what they do, they work hard and this has made me appreciate them more” (p1). From this information, it is evident to see that relationships with parents can be impacted in a positive way. In contrast to this, others indicated that the demands of fostering would often mean that time spent alone with parents was not always easy. Despite the mixed feeling that participants demonstrated toward their relationships with parents, it was apparent that they understood these changes which would occur due to their parents having a busier lifestyle.

**Benefits associated with fostering**

There were many positive experiences highlighted by all participants and it became apparent that many of these aspects outweighed the challenging experiences. Being exposed to challenges of fostering, gave all participants a better insight into the experiences of their past and current foster siblings. Although participants found it difficult at the time, they reflected that the issues of fostering have improved themselves as individuals, for example: more appreciation for their parents, helping others, and understanding behaviours. Similar findings were reported in Sutton and Stack (2013) where biological children felt that fostering had changed their lives for the better.

The first key finding which emerged from results which related to benefits, included attachments and friendships. All participants commented on the attachments and friendships which they had made with foster children.
Participant 3 discussed how she made good friends with one foster child in particular and was able to introduce the foster child to her friendship groups. Furthermore, participant 4 talked about having some “really good” relationships with foster children and how they still make effort to keep in touch: “I have made some really good relationships with some of the foster children, and some still keep in touch now which is good” (p4)

When analysing the participants’ responses, the second sub-theme which emerged was satisfaction, rewards and life experiences. All participants stated that they were able to have access to more fun and shared activities with the foster children and their family which brought them closer together. This was supported by participant 4 and participant 1 who stated that “we do more as a family, and take part in more fun things together” (p4) and “fostering has brought my family closer together” (p1). These findings are consistent with Hojer (2007) and Noble-Carr et al.’s (2014) studies. In these studies, biological children commented on how the introduction of a new foster siblings gave them opportunities to take part in family shared activities. This demonstrates a specific benefit of the fostering process for biological children and enables them to bond more with their family and foster children (Hojer, 2007; Noble-Carr et al., 2014).

Furthermore, all participants discussed having a sense of satisfaction from being able to help foster children. Participants believed the experience of fostering has been very rewarding and has expanded their life experiences. As well as participants own personal benefits, they were happy that they could provide foster children with “better opportunities”. Additionally, one participant stated that the experiences of fostering has contributed to their knowledge, “fostering has helped me gain knowledge around difficult life experiences which children may encounter (p1). Due to the positive experiences of fostering, evidence from this study and other studies could be used to encourage more families to start fostering. Despite the many challenges which families and biological children face, many have stated that the challenges are often outweighed by the benefits (Swan, 2000). However, all of these experiences will inevitably differ depending on the age and understanding of the children involved (Fostering Network, 2008). Therefore, in order to promote successful placements and retain foster carers, it
is important that professionals match placements with consideration to age and understanding.

**Limitations of the Study**

Although this study has captured the qualitative perceptions of participants’ experiences, there are some limitations which have been considered. Firstly, the sample size consisted of only four participants, all from the same geographical area. Participants were also from the same independent fostering agency. This is a limitation as individuals from another agency such as a local authority may have different responses and experiences. Furthermore, although the age range was specifically between 18 and 25 to ensure that participants were reflecting on recent experiences, some often found it harder to recall certain information compared to others, for example one participant couldn’t remember when their parents first started fostering.

Engel and Schutt (2009) stated that interview bias during data collection could seriously compromise the validity of the findings. The interview questions for this study were based around previous academic literature as well as the personal experiences of the researcher. Therefore, it was assured that each interview was structured carefully so that the manner of the interviewer’s verbal and non-verbal responses did not influence the participants’ responses. It has also been acknowledged that the quality of these findings depended upon the researcher’s skills to analyse the data (Patton, 2002).

**Reflective learning**

Although this research study was approached in a professional way, I have acknowledged my own bias, as I was a biological child in my household growing up with foster children. I have experienced many years of living with foster children, therefore I was able to relate to the issues raised by the participants within this study. Due to this, it is possible that my own experiences informed my interview questions and some issues may have been further addressed than others. From this study, I have gained a better understanding of individuals’ perceptions around their life experiences of fostering and how they felt that they
could have been better supported. Despite this research study bringing many challenges to my educational experience for example, managing my time. I have thoroughly enjoyed carrying out my own small scale research and have developed research skills that will benefit me in my future education. I believe the findings in previous literature and this current study will help shape my professional practice in future, whilst studying my MA in social work.
Chapter 5: Conclusion
Conclusion

The aim of this study was to investigate into the perceptions of biological children who have had the experience of living with foster children. While this study has highlighted participant’s perceptions around the issues of fostering; it is also apparent that participants have experienced many benefits from their personal experiences leaving them with a sense of reward and satisfaction through helping those in need. For some participants, their experiences have influenced them with a desire to foster children in the future. The results from this present study are consistent with previous literature regarding the experiences of foster carers own children (Younes and Harp, 2007; Sutton and Stack, 2013; Noble-Carr et al., 2014).

Summary of Key Findings

The findings within this study have identified numerous challenges and experiences which participants have encountered whilst living with foster children. The current study has provided an insight into participants’ perceptions of how they managed these experiences and also how they would have liked to receive more support throughout the fostering process. One of the most significant findings from the data analysis was in fact the issues around minimal information and support participants received prior to fostering. The findings matched those of previous literature showing that biological children felt uniformed and unprepared for the challenges they were faced with throughout the fostering duration (Martin, 1993; Younes and Harp, 2007) Furthermore, research has shown that negative experiences of fostering could have been minimised for biological children through better preparation, communication and support (Spears and Cross, 2003). This is important for the reader because it has highlighted the need for further research into better preparation, communication and support.
Recommendations

Suggestions for future research should consider the issues discussed within this study in order to provide biological children with a better understanding of the complex issues which may arise from the fostering process. It is important that professionals and foster carers offer biological children appropriate guidance and support to manage their experiences. Future research could perhaps look into biological children’s understanding of the potential issues that can arise, before the decision of a placement match. If the biological child understands the needs of a foster child, this could assist in placement stability and reduce the risk of emotional involvement.

Another future direction for research could be to assess the efficacy of different types of support, as participants within this study were not fully aware of any types of support which were available to them. Therefore, awareness needs to be raised so that biological children know where to turn to when they need advice or support.

To ensure that foster carers can continue providing care for vulnerable children, future research must continue to explore biological children’s valid contribution within the fostering process; and explore how their experiences may influence placement success or failure and impact the recruitment numbers of foster carers.
References
References


Denscombe, M., 1998. Good research for small scale research projects.


Swan, T., 2000. Care providers’ children share their experiences’. *Unpublished research project funded by Toronto Catholic Children’s Aid Society, Toronto Children’s Aid Society and the Faculty of Social Sciences, McMaster University, Hamilton, ON.*


Appendices
A: Ethical Approval Letter

BSc (Hons) Health & Social Care
Cardiff School of Health Sciences

Dear Applicant

Re: Application for Ethical Approval: An investigation into the perceptions of biological children living with foster children

Project Reference Number: [Redacted]

Your ethics application, as shown above, was considered by the Applied Community Sciences Ethics Panel on 08/02/2017.

I am pleased to inform you that your application for ethical approval was APPROVED.

Minor issues may still need addressing before you commence any work — if so these will be listed below.

Where changes to the information sheet, consent form and/or procedures are deemed necessary you must submit revised versions to the relevant ethics inbox. If you are a student — your supervisor must do this on your behalf.

Note: Failure to comply with any issues listed above will nullify this approval.

Standard Conditions of Approval

1. Your Ethics Application has been given a Project Reference number as above. This MUST be quoted on all documentation relating to the project (E.g. consent forms, information sheets), together with the full project title.

2. All documents must also have the approved University Logo and the Version number in addition to the reference and project title as above.

3. A full Risk Assessment must be undertaken for this proposal, as appropriate, and be made available to the Committee if requested.

4. Any changes in connection to the proposal as approved, must be referred to the Panel/Committee for consideration without delay quoting your Project Reference Number. Changes to the proposed project may have ethical implications so must be approved.

5. Any untoward incident which occurs in connection with this proposal must be reported back to the Panel without delay.

6. If your project involves the use of human samples, your approval is given on the condition that you or your supervisor notify the HTA Designated Individual of your intention to work with such material by completing the form entitled “Notification of Intention to Work with Human Samples”. The form must be submitted to the PD (Sean Duggan), BEFORE any activity on this project is undertaken.

This approval expires on 08/02/2018. It is your responsibility to reapply / request extension if necessary.

Yours sincerely

[Signature]

Professor George Karani
Chair of Applied Community Sciences & Protection Ethics Panel
Cardiff School of Health Sciences

Tel: 029 20416855
E-mail: gkarani@cardiffmet.ac.uk

Cc: Aubrey, Joanne

PLEASE RETAIN THIS LETTER FOR REFERENCE
B: Participant Consent Form

Project Reference Number: [Blank]  Version: 2
Participant name:

Title of Project: An investigation into the perceptions of biological children living with foster children.

Name of Researcher: xxxxx

Participant to complete this section: Please initial each box.

I confirm that I have read and understand the information sheet for the above study. I have had the opportunity to consider the information, ask questions and have had these answered

I understand that my participation is voluntary and that I am free to withdraw at any time, without any given reason.

I agree to take part in the above study.

I agree to the interview that will be audio recorded.

I agree to the use of anonymised quotes in publications.

I agree that if the researcher has concerns about the welfare of a child, then it is of duty to pass this information on to Children’s Services (or Social worker)

______________________________  ________________
Signature of Participant  Date

______________________________  ________________
Name of person taking consent  Date

Signature of person taking consent
C: Information Sheet

Project Reference Number: [redacted]
Version: 2

Title of Project: An investigation into the perceptions of biological children living with foster children.

My name is xxxxx and I am currently in my final year at Cardiff Metropolitan University studying Health and Social Care. As part of my course I have to conduct research and produce a dissertation. My research project will be ‘an investigation into the perceptions of biological children living with foster children’.

The aim of the project is to investigate the views and experiences that individuals have when living with foster children. As a participant, you will be interviewed on a one to one basis to share your experiences of living with foster children. The information that is gathered will be kept strictly confidential and will only be used for the purpose of this project. Each participant will be allocated a 30-minute time slot for the interview, however it has been estimated that they will take approximately 20 minutes depending on the given answers. All interviews will take place at The National Fostering Agency Offices (Cardiff).

- If you want to find out more about the project, or if you need more information to help you make a decision about participating, please contact either Angharad (myself) or Joanne (My dissertation supervisor) on the emails provided at the bottom of this sheet.

Your Participation in the Research Project

Why you have been asked?
You are being asked to participate in this project because you are an individual who has lived with a foster child/children for at least a year.

What happens if you want to change your mind?
If at any time throughout the project you change your mind and wish to stop participating, this is not a problem; your decision will be respected. If you do wish to stop participating then please inform myself or Jo via email.

Are there any risks?
I do not believe there will be any significant risks during the project. If for any reason during the project you do feel uncomfortable, the interview can be stopped, and you can withdraw at any point.

How we protect your privacy?
All the information gathered from you is strictly confidential, and no personal information you give will be accessible to other individuals. All data will be stored in line with the data protection act (1998), and throughout the study you will be referred to as ‘participant A, B, C’ etc. The research will be read by lecturers on the Health and Social Care programme at Cardiff Metropolitan University, and possibly by an external examiner from another Higher Education Institution. It will also be made available for professionals from the NFA.

If the researcher has any concerns about the welfare of a child, it is of duty to pass this information on to the Children services (Or social worker).

Contact Details:
xxxxx
xxxxx
Joanne Aubrey Jaubrey@cardiffmet.ac.uk
‘An Investigation into the perceptions of biological children living with foster children’. Health and Social Care Year 3.

**Basic information:**
- How old were you when your parents started to foster?
- How many children were fostered at one time?
- What was the age and gender of foster child/children:

**Before the fostering period:**
1. What were your initial thoughts when your parents first told you that they were going to start fostering?
   - How did you feel about this? (excited, scared, anxious)

2. Did you have any involvement in the decision to foster?
   - How did you feel about the involvement in this decision? – do you feel as though you voiced your opinion of this decision?

3. What type of information did you receive before the fostering commenced?
   - Who told you this information (parents/foster agency)? - Was the information helpful and did you understand? E.g. informed of the fostering process, and what was going to happen?

4. How were you made aware of the child’s/children’s situation before they arrived?
   - If you were not made aware, how did you feel about this? – If yes, who shared this information with you; parents/social workers?

**During the fostering period:**
5. Do you remember the first day that the foster child/ren arrived?
   - What was this day like, did you interact with them?

6. How would you describe your relationship with the foster child/ren?
   - Were you seen as an older/younger brother or sister? - Did you have a strong attachment with them? – did you engage in activities with them?

7. Did the fostering process have an impact on your relationship with your parents?
   - What where the positives? - What was challenging?
Interview Guide (page 2 of 2)

8. Do you feel as though you had a particular role?
   - Were you ever asked to look after the children?  - Did you have to help your parents?

9. What were the positive aspects of the foster child/ren living with you?
   - Was this rewarding?  - Did you make a new friendship?

10. Was there anything which you found particularly challenging?
    - Did the foster process have an impact on your social/school life?  - Conflicts  - Behaviours

11. What kind of support was available for you whilst the foster child/ren was living with your family?
    - From parents, social worker, outside agencies, reviews of your opinions?

Placement Endings:

12. How did you feel when the foster child/ren left?
    - Were you supported by your parents social workers, outside agencies?

13. What is your overall view of fostering given your experience? And would you ever consider being a foster parent in the future?

14. Is there anything else you would like to share/add about your personal experiences?