

Fostering Together—The Why and How of Involving and Supporting Biological Children of Foster Carers

Anna Targowska,¹ Tara Cavazzi² and Stephan Lund³

¹*School of Psychology & Social Science, Edith Cowan University, 270 Joondalup Dve, Joondalup Western Australia 6027, Australia*

²*School of Psychology & Social Science, Edith Cowan University, Perth, Western Australia, Australia*

³*Wanslea Family Services, Perth, Western Australia*

This article discusses the outcomes of a research project undertaken in 2011/2013 by a team of researchers from Edith Cowan University (ECU) in collaboration with *Wanslea Family Services*. The project aimed to address the relative lack of voice of biological children in the fostering task, despite the increasing acknowledgement of children's rights and their capability to be involved in decision-making processes. Data was collected through the use of focus groups and interviews with a small number of biological children, foster carers and service providers in Western Australia (WA). The data indicated the necessity to reconsider the rights of biological children in the fostering task and the need for specific strategies to address these rights. The findings of the study informed the development of a set of interactive resources for supporting biological children of foster carers during all stages of the fostering process in Australia. The resources also have potential value for use in overseas jurisdictions.

■ **Keywords:** family foster care, children's rights, children's welfare, foster carers

Background to the Study

There is a growing recognition of the need to listen to children and to provide them with opportunities to participate in decisions that are pertinent to their overall wellbeing. Theoretical underpinnings of this trend come from the frameworks of children's rights (Jans, 2008; United Nations Convention on the Rights of the Child (UNCRC), 1989) and from the sociology of childhood (Corsaro, 1997; Jenks, 1982), which view children as competent agents in their own life. This recognition, however, is often tokenistic and does not translate into practice (Quortrup, Bardy, Sgritta, & Wintersberger, 1994; Thomas & Thomas, 2005). An example of such limitation is the lack of involvement of the biological children of foster carers in the fostering decisions.

Foster care is a complex and demanding task, which requires dedication and patience not only from the primary carers, but the whole foster family (Walsh & Campbell, 2010). Yet, the important role that biological children play in the fostering team often goes unacknowledged and their opportunities to be involved in the decision-making processes during the fostering task are sparse. Their lack of voice and recognition has been well documented in international lit-

erature (Kaplan, 1988; Martin, 1993; Moslehuddin, 1999; Pugh, 1996; Sutton & Stack, 2013; Tadros, 2003; Thompson & McPherson, 2011; Twigg & Swan, 2003; Watson & Jones, 2002; Younes & Harp, 2007) for over two decades and more recently by some Australian studies (Clare, Clare, & Peaty, 2006; Noble-Carr, Farnham, & Dean, 2014; Nuske, 2005, 2010).

Despite overwhelming evidence highlighting the importance of recognising biological children's voices in the fostering process, and a range of recommendations made by Clare et al. in their 2006 WA report, little appears to have been done in WA at the level of policy and practice to address the issue. Although there is some evidence of useful strategies being recently introduced in the Australian Capital Territory (Noble-Carr et al., 2014), there is no available data demonstrating that the need for support for biological

ADDRESS FOR CORRESPONDENCE: Dr Anna Targowska, School of Psychology & Social Science, Social Justice Research Centre, Edith Cowan University, 270 Joondalup Dve, Joondalup Western Australia 6027, Australia.
E-mail: a.targowska@ecu.edu.au

children is adequately addressed in other Australian jurisdictions. The purpose of this project was to gather evidence regarding the levels of information and support required by biological children of foster carers in WA, and to use these findings to develop a range of practical strategies to specifically address these children's needs.

Aims of the Project and Research Questions

Children are placed in Out of Home Care (OOHC) for a myriad of reasons, including neglect and abuse, as well as other traumatic experiences such as exposure to parental drug use, crime and violence (Whiting & Lee, 2003). Adding to these children's trauma is the need to adjust to an unfamiliar family environment when placed in OOHC. The rights of fostered children to a safe home and to have their needs addressed are certainly of high importance and require careful consideration. At the same time, however, the rights of another group involved in the fostering task, carers' biological children, also need to be deliberated.

Foster carers' biological children should have the opportunity to be included in the fostering decisions for two reasons. As discussed earlier, one is the children's right to be heard and involved in decisions that significantly impact on various aspects of their life. Another is more pragmatic, and relates to the "success" of foster placements. It has been well documented that one of the most common reasons for families to withdraw from fostering is the effect it has on their own children (Briggs & Broadhurst, 2005; Moslehuddin, 1999; Pugh, 1996; Twigg & Swan, 2007). Biological children can, and often do, make a significant contribution to the success of a foster placement (Sinclair, Wilson, & Gibbs, 2005). At times, however, this might come at a considerable emotional and social cost to these children (Moslehuddin, 1999; Nuske, 2010). Thus, it seems that the need for placement success has to be reconciled with the careful consideration of strategies to engage and support biological children in the fostering task.

The literature, as well as data from this project, consistently demonstrate that carers' own children report a strong desire to be included in planning and decision-making (Clare et al., 2006; Martin, 1993; Pugh, 1996; Sutton & Stack, 2013; Walsh & Campbell, 2010), and to be able to share their feelings and experiences about fostering (Clare et al., 2006; Younes & Harp, 2007). In the context of children's rights and the ever growing demand for family foster care in Australia, providing biological children with adequate support needs to be seriously considered.

The Australian OOHC system relies on family foster and kinship care, with 93% of children in care living within family settings (Australian Institute of Health & Welfare (AIHW), 2014). The latest available national data indicates that the number of children admitted to OOHC is 2000 more than the number of children discharged from care (ibid.). Adding to the pressure on existing foster care services are

the increasing difficulties with recruitment and retention of foster carers, which have been noted over the last 20 years (Colton, Roberts, & Williams, 2008; Ford, 2007; Siminski, Chalmers, & McHugh, 2005).

In addressing the above issues, this project adopted three overarching aims:

1. To use and expand the existing evidence in relation to the support required by biological children of foster carers in the Australian context;
2. To explore ways of supporting foster carers' biological children in WA; and
3. To use the data to develop a set of resources for foster care services, foster carers and their biological children to facilitate involvement of these children in the fostering task.

The research was guided by the following questions:

1. What do some WA biological children of foster carers say about their fostering experience?
2. What type of support is offered to them prior to and during the fostering period?
3. How would biological children like to be involved in the fostering process?
4. What role could the fostering agencies have in including foster carers' biological children in the fostering task?

To achieve the above aims, the researchers engaged in a two-phase process. Phase one focused on exploring the views of foster carers' biological children, foster carers and representatives from a range of foster services in WA, on the ways biological children should be engaged in the fostering process. This phase provided an opportunity for the voices of biological children to be heard and considered.

In phase two, the findings of the study were used to develop a set of resources to facilitate the process of children's engagement. These resources are intended to fill the gap identified by the current study and other researchers (Clare et al., 2006; Nuske, 2005; 2010) in the provision of practical strategies required by the Australian foster care sector and to initiate conversations about various aspects of fostering amongst all who are part of the fostering task.

Methodology

Theoretical Framework

The study utilised the theoretical frameworks of the sociology of children (Corsaro, 1997) and children's rights in examining children's involvement in the fostering process. The UNCRC emphasises the importance of including children in decisions that affect them. Article 12 of CRC relates to the importance of children's participation and states that children have the right to express their views in all matters that affect them, and for adults to consider these views seriously (United Nations (UN), 1989).

The current research has embraced the need to recognise biological children's right to have their voices heard and appreciated during the fostering process. It has also adopted the sociology of children perspective, which views children as competent decision makers who are able to make important contributions to a range of processes including that of fostering. These frameworks informed the sampling process as well as data collection methods.

The study incorporated the voices of children and foster carers into the debate regarding how and when biological children are to be included in the fostering task. It used their voices to directly inform the development of support materials for biological children, their parents and fostering services.

Sampling

Purposeful sampling was used to select study participants. Wanslea Family Services sent information letters about the study to all their foster families, representatives from the Department for Child Protection, and to a range of non-government fostering services in the metropolitan area of Perth. Families from Wanslea Family Services self nominated to take part in the interviews and focus groups. Consent forms to participate in the study were obtained from carers as well as from children.

Data Collection and Analysis

This research adopted a qualitative approach to the inquiry to allow for an in-depth data collection (Patton, 2002). Semi-structured interviews and focus groups were used to explore the views of a range of stakeholders on the fostering experiences of biological children of foster carers in WA. Individual interviews with children were approximately 45 minutes long, subject to the child's age and developmental stage. Focus groups with children lasted for approximately 1.5 hours with a half-hour break, during which refreshments were offered. Prior to the interviews and focus groups, the researchers spent some time having informal chats about subjects of children's interest. These conversations aimed to be the "ice breakers" to help children feel at ease with the researchers. In both interviews and focus groups, children consented to being interviewed without parents, to avoid children feeling obliged to moderate their comments.

Data was collected through:

1. Facilitating two focus groups and individual interviews with a total sample of fourteen biological children, between 6–14 years of age, of foster carers;
2. Facilitating one focus group with a sample of six foster carers; and
3. Conducting interviews with five representatives from a range of government and non-government fostering and support services in WA.

Data collected from the interviews and focus groups were audio recorded with the written consent of the participants and the consent of the participating children's parents.

Data analysis involved:

1. Transcribing the individual and focus group interviews;
2. Coding and organising the data along the emerged themes and patterns.

Ethical Considerations

This project was guided by the National Health and Medical Research Council's (NHMRC) National Statement on Ethical Conduct in Human Research (2007). Ethical approval was obtained from the ECU Human Research Ethics Committee (HREC). All research team members who participated in primary data collection and the development of the DVD obtained a Working with Children Check.

As there was the potential for involvement in this project to cause some level of stress, formal counselling and support was made available by Wanslea to all biological children and their families if required.

Limitations of the Study

As with all research, the present study was not without limitations. These limitations related to the relatively small study sample and to the self-selection process of study participants who came from one agency only. Therefore, the generalisability of data in relation to the level of support for foster carers' own children in other agencies in WA and other Australian jurisdictions needs to be treated with caution. This study does not aspire to any universal "truths", it does, however contribute to the general knowledge related to the topic. The study's findings are consistent with the research conducted by Clare et al. in WA in 2006 and with other national and international literature. This lends support for the argument that although fostering offers many opportunities, at the same time it provides some significant challenges for carers' biological children whose needs for support have to be better addressed.

Study Findings and Discussion

The data from all focus groups and interviews identified a number of gaps at the level of policy and practice in relation to the support required by biological children of foster carers. Findings from the study indicated that biological children are often undervalued and unprepared for fostering and receive limited formal support. This evidence is consistent with previous national and international research. The data clearly demonstrated the need for information and various forms of support required by biological children of foster carers during all stages of foster care placements.

Phase 1

Before Placement Starts

Lack of information and discussion. The findings indicated that during the initial stage of fostering (before placement),

almost all children who participated in the study were simply informed by parents about the fostering decision and had no choice but to accept it “... *Everyone was in the car and she [mother] said like, oh, guess what, we’re getting a girl this Friday*”. When first introduced to the concept of fostering, most were reportedly confused and didn’t understand its implications “*At the start of fostering, I dunno what it meant so I agreed to it just to try it out...*”. Another child also stated “*I had no clue what it [fostering] was*”. Many children were initially excited at the prospect of fostering, often as a direct result of being told by their parents “*that it was going to be fun*”. This was quite a common experience for many children who often had unrealistic expectations of the fostering process.

Three children, who were consulted prior to fostering, were provided with opportunities to discuss it openly. However, these opportunities depended mainly on the initiative of their parents. As one of the carers stated, and others agreed by nodding, [services did not provide] “... *any formal stuff...; like we had to go for the training sessions [but] they [children] didn’t have anything along those lines, they only got what I told them*”.

This finding is consistent with research literature (Clare et al., 2006; Cline, 2005; Heidbuurt, 2004; Martin, 1993; Moslehuddin, 1999; Pugh, 1996; Tadros, 2003; Thompson & McPherson, 2011; Younes & Harp, 2007), and indicates that despite previous recommendations made by Clare et al. (2006), there is still a substantial lack of information given to biological children in foster families in WA. Further, there appears to be an expectation within the OOH system that it is the carers’ responsibility to inform and educate children. As one service provider stated “*I think the way you do it [educate biological children] is through the carers, it’s their responsibility after all*”. This was confirmed by one of the carers during the focus group “*they [biological children] only got what I told them, and what I could offer them from what I knew of fostering*.” As information provided in the initial discussions with biological children were derived from carers’ own understandings of what information was required, some children were left with limited knowledge about reasons for fostering.

Pressure to say “yes”. As carers often showed a lot of compassion when discussing fostering, more than half of the children felt pressured to agree to foster, despite feeling internally unsettled about it. Children reported that they felt it would be ‘selfish’ to say they didn’t want to have a foster child in their family. This was particularly common among older children, who felt obligated for social justice reasons “... *it was my mum and dad’s decision, I didn’t, I didn’t have any right to say no, you know, and I guess I wouldn’t either because fostering is the right thing to do*”.

Service providers also reported that some biological children seemed persuaded by parents despite their own hesitations towards fostering. These findings echo those of previous research (Heidbuurt, 2004; Younes & Harp, 2007) in

relation to feelings of obligation to comply with carers’ wishes. Despite the limitations of parent-guided discussions, biological children in the sample who were included in such discussions in the initial stages of fostering reported feeling more in control, and seemed more willing to accept fostering than those children who were not included in the consultation process:

“at the start I was a little like ‘I don’t really want to’, because I thought I would be like pushed to decide, but no, I wasn’t, so we talked it through lots, and I thought cool, it sounded decent”.

This finding is consistent with other research (Clark & Statham, 2005; Jans, 2008; Jenks, 1982; Mc Kechnie, 2000; Sutton & Stack, 2013), which suggests that the inclusion of children in decision-making enhances the child’s sense of control over themselves and their environment. Given that, it seems important to support biological children by providing them with realistic information about fostering and genuinely engaging them in the decision-making processes. According to the data from this study, providing information and support should be the shared responsibility of carers and service providers.

Experiences of Children during the Placement

Benefits of Fostering for Biological Children

Enjoyment and companionship. Despite the limited amount of initial information or education provided to carers’ children, those involved in the current project reported experiencing a range of benefits of fostering. For some, fostering provided enjoyment and companionship with fostered children, and resulted in more frequent family outings and special occasions “*they’re really fun to have [a]round us, [and] before we started fostering it was kind of boring in the house, and now we go down to the park and stuff with them so now it’s really fun*”.

Bonding and mentoring. Other benefits of fostering included the development of bonds between biological and fostered children, and opportunities for the former to act as a mentor and to witness the developmental progress of fostered children “*We teach them how to play sport and stuff like that. We teach them how to play basketball...*” and “*now I’m teaching X [fostered child] how to swim*”; “*she never learned how to keep friends... but, I know kids would judge her at school, so I was always giving her little hints and stuff, about what she should expect*”.

These experiences contributed to the biological children’s sense of pride in the role they played in the fostered child’s life “[I watched] X learning to crawl... I felt soft when I saw X [doing that]” and “*I’m just amazed that someone who has only been to school for like two years has like... [progressed]*”.

Companionship, development of relationships and ability to mentor fostered children have also been identified in previous research, which suggests that these benefits are commonly shared amongst biological children in foster

families (Bruce & Bruce, 2002; Clare et al., 2006; Cline, 2005; Hojer, 2005; Noble-Carr et al., 2014; Part, 1993; Pugh, 1996; Sutton & Stack, 2013; Thompson & McPherson, 2011; Watson & Jones, 2002; Younes & Harp, 2007).

Cognitive flexibility and socio-emotional maturity. The present study demonstrated biological children's high level of cognitive flexibility and maturity, evident in their awareness of the divergence that can occur between fostered children's chronological age and current developmental stage "*well I guess I was expecting her to be a completely 'normal' kid . . . like you meet in class . . . [but] it was almost like we, like I was 18 and she was 6 years old, it felt like that*".

Although initially frustrated, some children were later able to demonstrate their understanding of some of the reasons behind these differences, linking them to the fostered child's lack of formal schooling and social isolation "*I guess it's because she wasn't used to being around kids, because she hadn't been umm, well, she hadn't gone to school or anything . . . before she was home schooled. And she basically never saw kids*".

The cognitive maturity of biological children was also noted by carers and service providers. This was evident in the biological children's growing ability to reconcile both the benefits and challenges of fostering "*. . . if you'd asked me . . . two years ago I would have said like no, I'd never foster, but now it's like changed my views, and now I actually like it*"; "*. . . I would even consider fostering when I'm older*".

Altruism and empathy. These views were often linked to the children's concept of altruism "*because it's helping other kids, because if everyone said no, they'd have to stay with really bad parents*", and feelings of empathy:

"It's good to see how much she's improved and that . . . it's like if you're taking them away from some like, really bad like environment . . . and then you're giving them like this fresh start . . . the pros of it way outweigh the cons of it"

The advanced socio-emotional maturity and cognitive flexibility of biological children of foster carers has also been noted in other studies (Clare et al., 2006; Nuske, 2010; Pugh, 1996; Sutton & Stack, 2013; Twigg & Swan, 2007; Younes & Harp, 2007).

Challenges Experienced by Foster Carers' Children

Exposure to maladaptive behaviours. Although the increased maturity and cognitive flexibility can be considered a major benefit for biological children, fostering may also have detrimental effects on children's psychological and social development. This could be a result of a number of factors including exposure to fostered children's maladaptive behaviours such as stealing and lying, using offensive language as well as aggression and violence "*They punch, they kick, they nip, they scratch, they bite*"; "*they kicked the dog, pulled his tail, pulled his ears, poured tomato sauce in his ears and he had like an ear infection after one of them did that*".

Additional duties and early "parentification". Children who participated in this study reported that they were required to undertake additional duties in the home, make adjustments and allowances to various activities and family rituals, and compromise their own likes and dislikes, in order to engage and include fostered children. Even very young children often took on great responsibility in caring for fostered children and, at times, assumed parenting roles. This was evident in children's acute awareness of parental strain and their attempts to take responsibility for reducing tension and maintaining family harmony. For one six-year-old child this meant:

" . . . if mum and dad are growling at them, like I will try and get them [fostered children] away from them. So they can have a bit of time to themselves . . . so I can distract them from my mum and dad"

This evidence is consistent with previous national and international research findings (Bruce & Bruce, 2002; Clare et al., 2006; Cline, 2005; Hojer, 2005; Nuske, 2005, 2010; Pugh, 1996).

Violation of privacy, feelings of lack of control and helplessness. Exposure of carers' own children to maladaptive behaviours of fostered children at home and their increased responsibility was often accompanied by feelings of lack of control over the family environment, and helplessness when confronted with fostered children's challenging behaviours in public spaces:

" . . . we also had another kid . . . we took him to the park one day and he was pushing people on the slides, and he was just uncontrollable . . . we didn't know what to do most of the time"

They also commented on the lack of privacy and stability in their own homes "*they always ruin my room and throw things around everywhere after I've tidied up*" and violation of personal boundaries "*some of them used to get up really early and wake me up, like T [fostered child] when she first came, she used to come in my room and sneak into my bed in the middle of the night . . ."*

These findings are consistent with other research data (Bruce & Bruce, 2002; Clare et al., 2006; Cline, 2005; Hojer, 2005; Noble-Carr et al., 2014; Part, 1993; Pugh, 1996; Watson & Jones, 2002; Younes & Harp, 2007). Children's feelings of limited control over their home environment were further exacerbated by the lack of information about the placements' duration "*like we don't know if our girl is going to go in the morning or something . . . [it would be good] if you knew that, that they may leave tomorrow or they may live with you forever*".

This uncertainty and lack of stability contributed to children's frustration, feeling unsettled, disempowered and on edge, which can potentially negatively impact their psychological and social development.

Experiences of vicarious trauma. As discussed by service providers in the present study, biological children were also

vulnerable to experiencing vicarious trauma from fostered children. This phenomenon was also reported in previous Australian (Clare et al., 2006; Noble-Carr et al., 2014; Nuske, 2010) and international research (Sutton & Stack, 2013; Watson & Jones, 2002). The exposure of biological children in this sample to fostered children's disclosures of trauma and abuse often left them feeling confused and unsettled about their understandings of safety, parenting and parent-child relationships:

"My memory was with X's [fostered child's] brother and he came to our house . . . and then he was talking to my Mum . . . and he was saying stuff like . . . [his biological father] hurts him and strangles him and I didn't really feel good about that . . . so I felt a bit worried about it".

The need for support to develop coping strategies. The stories of fostered children whose parents had neglected or abused them were often in conflict with many biological children's conceptualisations of parenting and parent-child relationships. These stories were especially difficult for biological children to reconcile when witnessing the fostered children's longing for their biological families. Comprehending the complexity of this attachment requires a high level of emotional maturity and cognitive flexibility, which is often beyond these children's developmental capacity. It is therefore important to provide biological children with opportunities to discuss their own and the fostered children's feelings. It would be useful to combine such discussions with training related to learning *protective behaviours*, and the development of coping strategies to facilitate their psychological adjustment to a new child in the home. Such training and discussions might also help them refine their conceptualisations of safety, parenting and parent-child relationships.

The need for support for biological children to develop strategies to cope with the numerous challenges they face has been a consistent recommendation within the fostering literature (Clare et al., 2006; Cline, 2005; Moslehuddin, 1999; Noble-Carr et al., 2014; Nuske, 2010; Part, 1993; Pugh, 1996; Sutton & Stack, 2013; Tadros, 2003; Watson & Jones, 2002; Younes & Harp, 2007). Although biological children are expected to incorporate fostered children into all aspects of their lives, including their home, school and peer groups, little support is provided to help them adjust to their new situation. In the present study, children reported feeling distressed, embarrassed and frustrated by fostered children's behaviour, which often resulted in weakening of peer relationships, and internalisation of stress for fear of upsetting their parents. For some, fostering was associated with biological children losing their place in the family, and resenting fostered children for occupying time with their parents. As one participant stated:

"I did not like it at all. No, I was used to being the youngest kid in the family, and I guess I got a lot of attention from my sisters and I would always get to do things with them and when this kid came . . . everybody was focused on her . . . I definitely felt like I was getting replaced".

Social isolation. Many biological children reported becoming increasingly withdrawn from their family and peers. This issue was sometimes overlooked by the carers who perceived fostered children to be a higher priority than their own children "*. . . generally we put our own children second . . . because you think they're lucky they've got us, they're the lucky ones*". As one carer stated there is "*a very fine line [between] not disadvantaging your own children [and] taking in foster kids*".

The carers reported that at times they were unaware of the impact fostering was having on their biological children:

" . . . he kept shutting himself in the bedroom, and I didn't pick up on it at first, because you're so busy doing 50 million things as a mother, I think sometimes you blinker your own children a bit, you think he'll be fine, he'll cope . . . "

The emotional and physical withdrawal of biological children from their family has been reported in previous studies (Heidbuurt, 2004; Hoyer, 2005; Nuske, 2005; 2010; Part, 1993; Pugh, 1996; Twigg & Swan, 2003; Watson & Jones, 2002; Younes & Harp, 2007). This withdrawal is often used as a way of coping with the environment and protecting the self from psychological and physical harm. The social isolation of biological children is of great concern given its frequency within the literature. It is important therefore that this issue is noted and acted upon by both carers and service providers. It seems that there needs to be greater focus on training and support to assist foster carers to be able to respond effectively to their biological children's signs of withdrawal and emotional distress.

When the Placement Ends

Participants also noted issues and challenges around the end of placements. Sometimes fostered children were abruptly removed from foster homes without warning, with biological children unable to say goodbye. But even if informed earlier of the fostered child's impending departure, biological children still experienced a loss of friendship and sibling relationships, and a major loss of attachment. This grief was often exacerbated by a lack of post-placement contact, with many concerns and fears about fostered children's future safety. Biological children were often left with unanswered questions, felt regrets and sometimes blamed themselves for placement breakdowns. These issues have been also reported in previous research (Bruce & Bruce, 2002; Clare et al., 2006; Heidbuurt, 2004; Part, 1993; Pugh, 1996; Sutton & Stack, 2013; Tadros, 2003; Twigg & Swan, 2003; Watson & Jones, 2002; Younes & Harp, 2007).

It is therefore important to assist biological children to develop an understanding of the transitional nature of fostering. This realisation gradually develops during the fostering experience, because in order to cope with the grief, biological children invest less and become more accepting of the fostered child's inevitable departure. As one child stated "*At first, the first kid was definitely hard, but now you get used*

to it, you know that they're gonna go. It's still hard, but like you sorta get used to them coming and going".

The gradual development of the understanding of the transitional nature of fostering has been also confirmed by other studies (Heidbuurt, 2004; Hojer, 2005; Martin, 1993; Nuske, 2010; Pugh, 1993; Twigg & Swan, 2003; Watson & Jones, 2002; Younes & Harp, 2007). Although acceptance of the transitional nature of placements comes with experience, discussions in relation to the end of placement with parents and service providers and sharing common experiences with other biological children could additionally assist children in the grieving process.

Phase 2

The following part of this paper provides a more detailed description of the set of resources that were developed using the data collected from interviews and focus groups. These resources were intended to be used as a starting point for conversations about fostering between biological children, foster carers and service providers.

Fostering Together. Biological Children of Foster Carers Speak out

The first resource in this set is a DVD which has been developed for potential foster carers and their children. It is based on the focus group and individual interviews conducted with biological children of foster carers during phase one of the study and presents their views on, and experiences of, fostering. The DVD is separated into chapters, reflecting the different phases of the foster family's journey. It starts with children's reflections on the family decision-making prior to commencing fostering, continues through the child's arrival and settling in stages, through to the point where the child leaves the family. The DVD combines footage of foster carers' own children (including some of those who participated in the research and a few others who followed a script based on the study's findings) relaying their experiences directly to camera, and simulated scenarios based on situations that typically occur in a foster family during their fostering experience.

Fostering Together. A Guide to Supporting Children of Foster Carers

This booklet provides information about the needs of biological children who live within foster families. It is intended to help foster services' workers and foster carers understand what level of support is required for biological children at different stages of placement. It contains an explanation of why it is important to support these children and offers a number of practical suggestions in relation to the roles carers and service providers can play to ensure that the needs of these sometimes "invisible children" are met. The booklet also presents possible topics for training and mentions the sources of support that can be used.

Two developmentally appropriate children's story books:

I Live here Too: Rosie's Story and I Live here Too: Jay's Story

These two books are intended to be used by foster carers and their own children as a starting point to the introduction of the fostering concept and to prompt discussions about its benefits and challenges. *Rosie's story* is intended for younger children and targets 5–10 year olds. *Jay's story* is aimed at children between 11–14 years of age.

The books are written in child-friendly language and each contains a set of cards that provide information about various aspects of fostering. The books vary in the style of illustrations and language to make them more appealing to the relevant age group. The cards encourage children to ask questions, to share their feelings with parents and to ask for help when required. Each of the stories follows the *before*, *during* and *after* placement stages of fostering. The books have been based on the information obtained during data collection and include quotes and themes from the study.

The above resources were launched by the Director General of the Department for Child Protection during the 2013 Foster Care Conference in WA, and received positive feedback from foster families and service providers who attended the conference. Due to the demand from the fostering field, they were reprinted within the next few months from their initial publication. Since then, the resources have been distributed to foster families and fostering agencies throughout WA. In addition, they have been marketed nationally and some resources have also been sent internationally.

Training on how to use the resources has been provided to some WA fostering agencies and foster families. Members of the research team have presented papers highlighting the development and use of the resources at a range of Australian conferences. *Wanslea Family Services* is currently developing a group support program for biological children of foster carers using these resources as the basis for the program.

Anecdotal evidence from foster carers and service providers indicates that the resources have been well received and utilised. Informal feedback has been received through a number of different channels to indicate that foster families appreciate having a tool to introduce sometimes difficult conversations about fostering with their children. Foster care assessors report using the resources to good effect in the assessment phase with new foster care applicants.

It is reassuring that the resources are being used to encourage conversations about the benefits and challenges of fostering amongst all those involved in the fostering task, and provide an opportunity for biological children to have a voice and be recognised as valid members of the foster family. Let's hope that these conversations will continue and that the much needed support for biological children will be increasingly provided by carers and OOHC services. It is recommended that future research formally evaluate the impact of these resources not only on the OOHC field in general, but more specifically on the biological children who live in foster families.

Conclusion

Although the researchers acknowledge the limited sample of this study, collected data seems to demonstrate that despite the widespread evidence of the importance of biological children's role in successful foster placements and consistent recommendations calling for training and support for biological children, these are still notably absent in WA. As discussed by those interviewed, and supported by previous research (Clare et al., 2006; Cline, 2005; Martin, 1993; Nuske, 2010; Pugh, 1996; Sutton & Stack, 2013; Tadros, 2003; Watson & Jones, 2002; Younes & Harp, 2007), there is a significant need for developmentally-appropriate training for biological children before fostering begins. The training should cover the benefits and challenges of fostering, how to deal with challenging behaviours, and how to adopt *protective behaviours*. In addition, biological children need to be provided with more information and support to better understand their role in fostering, and assistance in developing methods of responding to, and building healthy relationships with fostered children. These requirements for information and training echo previous requests from biological children and carers reported by other Australian and international studies (Bruce & Bruce, 2002; Clare et al., 2006; Cline, 2005; Heidbuurt, 2004; Martin, 1993; Nuske, 2010; Part, 1993; Pugh, 1996; Sutton & Stack, 2013; Tadros, 2003; Watson & Jones, 2002; Younes & Harp, 2007).

Children in the present research expressed their desire to be consulted at all stages of the fostering task, and to be involved in the initial the decision-making before a child is placed. They also discussed the need to be provided with information about a fostered child before the placement, in order to begin to emotionally and practically prepare for the child's arrival. As found in the present study, being included in consultation can enhance biological children's sense of control over their lives and is consistent with current knowledge and best practice. Also evident in the current findings, and supported by previous research (Bruce & Bruce, 2002; Twigg & Swan, 2007), was the need for respite, which can allow foster families to reconnect and give biological children the freedom to have fun without the continuous responsibility of caring for fostered children. Due to the early "parentification" of carers' own children, regular respite away from the additional responsibilities associated with fostered children is essential for their healthy development.

In addition to the training, education and provision of respite, it is essential that biological children receive emotional support through a variety of means, including peer support groups. The need for peer support was emphasised throughout both current and previous research findings (Bruce & Bruce, 2002; Clare et al., 2006; Cline, 2005; Noble-Carr et al., 2014; Nuske, 2010; Part, 1993; Pugh, 1996; Sutton & Stack, 2013; Tadros, 2003; Watson & Jones, 2002; Younes & Harp, 2007). Support groups can provide a safe and neutral setting where biological children can express their feelings, learn more adaptive coping strategies and deal

more effectively within their challenging home and family environment.

Carers also requested the provision of further training and education for themselves. It was emphasised that this training needs to include ways to enhance and further facilitate development of biological children's coping skills, and to help carers recognise and respond to children's early signs of distress. This echoes previous Australian research (Clare et al., 2006), which emphasised the need for training and support for carers in order to help them support their biological children and encourage harmony within the home. It is hoped that such support will contribute to reducing the biological children's potential vulnerability due to experiencing distress during foster placements, and help carers to be better prepared to intervene when necessary. Overall, this could improve family harmony and encourage the success of foster placements.

In summary, biological children are often the invisible children involved in fostering. They are frequently unrecognised and insufficiently supported despite their unique contribution to fostering. The present study highlights the lack of recognition and support for biological children in the fostering task. Despite two decades of research calling for change in this often invisible population, little improvement can be observed in the provision of information, education and support for these children in WA. The present study not only supported and extended the current understandings of the needs of biological children, but also provided the foundation for the development of the unique age-appropriate resources specifically tailored to biological children, which appear to be the first of their kind developed specifically for an Australian setting.

Although it is hoped that the development of these resources will assist biological children of foster carers, it needs to be emphasised that there is still a substantial and unmet need for training, education and emotional support for these children. As discussed, carers' own children often assume greater responsibility than many of their peers and are expected to cope with the confronting nature of fostering with very limited training or support. It seems that considerable work is required to effectively educate, train and support these children, in order to increase the stability and responsiveness of home environments for all children: both those who are fostered, and the biological children who help to care for them.

Conflict of Interest

None.

This manuscript is an original work that has not been submitted to nor published anywhere else.

Acknowledgements

This article is dedicated to Susan Teather who significantly contributed to the research project this paper is based on.

Susan passed away in June 2014. She will be sadly missed as a colleague and a friend.

We would also like to extend our thanks to the foster families and the biological children of foster carers who gave their time to take part in this study and to *Lotterywest* for its generous financial support of the project.

References

- Australian Institute of Health and Welfare [AIHW]. (2014). *Child protection Australia: 2012–13*. Child Welfare series no. 58. Canberra, Australia: AIHW.
- Briggs, F., & Broadhurst, D. (2005). The abuse of foster carers in Australia. *Journal of the Home Economics Institute of Australia*, 12(1), 25–35.
- Bruce, C., & Bruce, P. (2002). *Summary of the relationship between foster children and the foster parents' own children: A unique entity*. Paper presented at the Foster Family-based Treatment Association's 16th Annual Conference on Treatment Foster Care, Nashville, Tennessee.
- Clare, M., Clare, B., & Peaty, A. (2006). Children who foster: The impact on the children of foster carers when foster children reside in foster families. Report of the Foster Care Association/University of WA project funded by Lotterywest.
- Clark, A., & Statham, J. (2005). Listening to young children: Experts in their lives. *Adoption & Fostering*, 29(1), 45–56.
- Cline, L. (2005). *Foster parent's children: Their thoughts on fostering and the role they wish to place*. Paper presented at the Foster Family-based Treatment Association's 19th Annual Conference on Treatment Foster Care, Atlanta, Georgia.
- Colton, M., Roberts, S., & Williams, M. (2008). The recruitment and retention of family foster-carers: An international and cross-cultural analysis. *British Journal of Social Work*, 38(5), 865–884.
- Corsaro, W. A. (1997). *The sociology of childhood*. London: Pine Forge Press.
- Ford, P. (2007). *A Review of the Department for Community Development*, Perth. Retrieved from http://www.merredin.com/merredin/d/Residents/Your_Community/Government_Portal/Department_for_Child_Protection/Downloads/FXQZZ639L6QKMTE12KI2P3UA9UC4CZ/0A2UICTV6IL2OM3.pdf/DCDRPTFordReview2007.pdf
- Heidbuurt, J. (2004). *All in the family home: The biological children of parents who foster*. Paper presented at the Foster Family-based Treatment Association's 18th Annual Conference on Treatment Foster Care, Nashville, Tennessee.
- Hoyer, I. (2005). Sons and daughters of foster carers and the impact of fostering on their everyday life. *Child and Family Social Work*, 12, 73–83.
- Jans, M. (2008). Children as citizens: Towards contemporary notion of child participation. *Childhood: A Global Journal of Child Research*, 11(1), 27–44.
- Jenks, C. (Ed.). (1982). *The sociology of childhood: Essential readings*. London: Batsford.
- Kaplan, C. (1988). The biological children of foster parents in the foster family. *Child and Adolescent Social Work*, 5(4), 281–299.
- Martin, G. (1993). Foster care: The protection and training of carers' children. *Child Abuse Review*, 2(1), 15–22.
- McKechnie, J. (2002). Children's voices and researching children. In B. Goldson, M. Lavalette and J. McKechnie (Eds.), *Children, welfare and the state* (pp. 42–58). London: Sage Publications.
- Moslehuddin, M. B. (1999). The impact of fostering on the biological children of foster carers: A review of literature. *Children Australia*, 24(4), 49–55.
- National Health and Medical Research Council. (2007). *National statement on ethical conduct in human research*. Canberra, Australia: Commonwealth of Australia.
- Noble-Carr, D., Farnham, J., & Dean, C. (2014). *Needs and experiences of biological children of foster carers: A scoping study*. Canberra: Institute of Child Protection Studies, ACU.
- Nuske, E. (2005). *Beyond the double-edged sword: The contradictory experiences of biological children in foster families*. Paper presented at the 2nd International Conference at the Centre for Research on Community and Children's Services, McKay, Queensland.
- Nuske, E. (2010). Balancing contradictions: The experiences of biological children of foster families. *Children Australia*, 35(3), 32–39.
- Part, D. (1993). Fostering as seen by carers' children. *Adoption and Fostering*, 17(1), 26–31.
- Patton, M. Q. (2002). *Qualitative evaluation and research methods*. (3rd ed.). Thousand Oaks, California: Sage Publications.
- Pugh, G. (1996). Seen but not heard? Addressing the needs of children who foster. *Adoption and Fostering*, 20(1), 35–41.
- Quortrup, J., Bardy, M., Sgritta, G., & Wintersberger, H. (Eds.). (1994). *Childhood matters*. Vienna: European Centre.
- Siminski, P., Chalmers, J., & McHugh, M. (2005). Foster carers in New South Wales: Profile and projections based on ABS Census data. *Children Australia*, 30(3), 17–24.
- Sinclair, I., Wilson, K., & Gibbs, I. (2005). *Foster placements: Why they succeed and why they fail*. London: Jessica Kingsley.
- Sutton, L., & Stack, N. (2013). Hearing quiet voices: Biological children's experiences of fostering. *British Journal of Social Work*, 43(3), 596–612.
- Tadros, L. (2003). Caring for children who care: Acknowledging the importance of the natural children of foster parents. *Children Australia*, 28(3), 17–21.
- Thomas, C., & Thomas, N. (2005). Ways forward: Guest Editorial. *Adoption and Fostering*, 29(1), 2–4.
- Thompson, H., & McPherson, S. (2011). The experience of living with a foster sibling, as described by the birth children of foster carers: A thematic analysis of the literature. *Adoption and Fostering*, 35(2), 49–60.
- Twigg, R., & Swan, T. (2003). *What about the kids? Looking at the effects of fostering on foster parents' children*. Paper presented at the Foster Family-based Treatment Association's 17th Annual Conference on Treatment Foster Care, Atlanta, Georgia.
- Twigg, R., & Swan, T. (2007). Inside the foster family: What research tells us about the experience of foster carers' children. *Adoption and Fostering*, 31(4), 49–61.

- United Nations. (1989). *Convention on the rights of the child*. Geneva: United Nations.
- Walsh, J., & Campbell, H. (2010). *To what extent does current policy and practice pay adequate attention to the needs of the sons and daughters of foster carers, particularly in the context of planned or unplanned placement endings?* Retrieved September 9, 2011, from http://www.cwdcouncil.org.uk/assets/0001/0532/Microsoft_Word_-_PLR0910103Walsh.pdf.
- Watson, A., & Jones, D. (2002). The impact of fostering on foster carers' own children. *Adoption and Fostering*, 26(1), 49–55.
- Whiting, J. B., & Lee, R. E. (2003). Voices from the system: A qualitative study of foster children's stories. *Family Relations*, 52(3), 288–296.
- Younes, M. N., & Harp, M. (2007). Addressing the impact of foster care on biological children and their families. *Child Welfare*, 86(4), 21–40.

