# Recruiting Out-of-Home Caregivers for Children with an Intellectual Disability in the Shared Family Care Program

Jill Volard, Christine Baxter and Cliff da Costa

Recruiting caregivers for children with an intellectual disability who require out-of-home respite or longer-term care is a problem which has challenged service providers for many years. This paper summarises findings of a recent evaluation of Shared Family Care, a foster care program in Victoria for children with intellectual disabilities/developmental delay. Current recruiting is not succeeding in meeting the demand for either respite, short term or long term care. Findings of the evaluation suggest that factors such as use of appropriate media, and running effective recruitment campaigns is only part of the answer. It is also important at every stage to address caregiver satisfaction with the job and employ strategies to find potential caregivers in the community.

ince the introduction of the principle of normalisation and the practice of integration, the number of children with an intellectual disability living at home with their families has steadily increased. In the year 1989, 63% of persons registered with the Office of Intellectual Disability Services in Victoria lived in private homes (CSV 1989).

Experience has demonstrated that these children often make a positive contribution to their families (Behr, 1990; Glidden, Valliere & Herbert, 1988; Wikler, Wasow & Hatfield, 1983).

However, it is widely recognised by service providers, in Australia and other industrialised societies that respite care is a critical need of families or other caregivers caring for a child with a disability within their

Jill Volard is a lecturer in social work at Royal Melbourne Institute of Technology. She has worked in the area of fostercare and respite care for children with an intellectual disability for many years.

Christine Baxter is a lecturer in the Department of Intellectual Disabilities at Deakin University and project manager of the Shared Family Care evaluation in the Disability Program Evaluation Unit.

Cliff da Costa is a senior lecturer in the Department of Mathematics and Computing at Royal Melbourne Institute of Technology.

Correspondence: Ms Jill Volard, Dept. of Social Work, RMIT, PO Box 71, Bundoora. 3083. own home (Cohen & Warren, 1985). In recognising the support needs of families, several family support services have emerged in Victoria.

One such program, Shared Family Care, provides respite care as well as short term and long term care for children with an intellectual disability/developmental delay. The program is funded through the Disability Services budget of Health and Community Services (H&CS) the State government policy and service agency, and administered by H&CS's Placement Support Branch. The service is generic rather than specialist and is delivered through general foster care agencies using foster caregivers who receive an allowance to cover expenses but are otherwise unpaid.

All workers in every agency carry some responsibility for children placed through the Shared Family Care program as well as their general foster care caseload, supported by a disability resource worker.

## Recruitment of Caregivers

The chronic shortage of appropriate foster homes and respite care homes for children in need is a problem shared by agencies the world over (Kahn, 1957; Petersen & Pearce, 1974;

Volard, 1983, Robinson, 1986). Although it has been demonstrated that it is possible to recruit caregivers in the community to support families requiring out-of-home respite or longer term care for their child (Donley, 1976; Sawbridge, 1979; Volard, 1982, 1983; Barnados Burwood, 1987), the task is not an easy one (Szwarc, 1989; Volard, 1982). As Robinson (1986) points out in relation to the Avon (UK) Short-term Respite Care scheme, 'The shortage of respite carers was probably the biggest single problem facing the service. Recruitment of carers did not keep pace with the demand.' This situation was corroborated by Volard (1982) and Szwarc (1989) in their studies of two Australian foster care programs.

The difficulties relate not only to attracting people to the task but also to the low number of people who follow through and actually become caregivers (Donley, 1976; Volard, 1983). Moreover, some recruits inevitably drop out of the program for various reasons or may be unavailable when needed.

In one program in the United States only about 25% of families who responded to recruiting efforts actually became carers (Donley 1976). A campaign in Brisbane yielded ninety enquiries, from which four placements were recruited (Volard, 1982). A recent joint campaign by Interchange, a Respite

Care Program in Victoria, and Shared Family Care resulted in 314 enquiries from which 48 volunteers were matched to particular families and 30 more were in training or awaiting matching, (Interchange, 1990).

Initial results of the authors' ongoing evaluation of the Shared Family Care program conducted by the members of the Disability Program Evaluation Unit (Baxter, Volard & da Costa 1991) indicate that a major challenge for further development of the program is attracting an adequate number of caregivers.

...a major challenge for further development of the program is attracting an adequate number of caregivers.

The rest of this paper will describe the relevant findings from the study, discuss some of the issues relating to recruiting which emerge from the findings and offer some suggestions for addressing them.

## The Study

The study comprises several interrelated investigations carried out in six foster care agencies initially funded to run the Shared Family Care program.

Qualitative and quantitative methods were incorporated within a multimethod design (Judd, Smith & Kidder 1991; Walker, 1985). Some investigations are still in progress. The data presented here are the result of two investigations carried out 1990 to 1991 to look at the early development of the program.

The first investigation used content analysis of policy documents, and indepth interviews with service providers, six senior officers and six disability resource workers in their agencies, and consumers (twelve caregivers and seven parents) to evaluate the early stages of policy implementation (Volard & Baxter, 1990). There was a simultaneous statistical monitoring of the program's first year, using data recorded by agency personnel (da Costa & Baxter, 1990).

The data described here relate to recruiting and specifically address recruitment strategies, the rate of response to recruiting efforts and the content of publicity including motivation of caregivers, caregiver characteristics and the agencies' approach to message content.

## The Findings

#### Recruitment strategies

To boost recruitment, there had been a statewide publicity campaign which covered Shared Family Care together with similar programs; a joint campaign with one other program; and a third level, with each of the foster care agencies engaged in their own publicity.

Strategies within each agency included advertisements and articles in newspapers and newsletters, as well as talks on radio and to local community groups. Brochures and posters were distributed to people in a variety of settings, for example, shopping centres, schools and at meetings. Public libraries and other community facilities hosted information displays. Some agencies advertised in Situations Vacant columns of local and metropolitan newspapers.

All the agencies recruited caregivers for the Shared Family Care program to place a particular child by direct approach to specific caregivers currently in the general pool of foster caregivers caring for children without disabilities. One agency sent letters about the Shared Family Care program to all current foster caregivers on their lists. All agencies used word-of-mouth to recruit.

Almost all caregivers in this study recruited to the Shared Family Care program at this time (10 out of 12) had already been part of the foster care program and had been recruited by direct approach by the agency.

These recruitment strategies are similar to those of other Australian programs, such as the Bayside Specialist Placement Scheme (Szwarc, 1989) and the W.R.Black program used in Queensland during the 1970's (Volard, 1982, 1983). They are also similar to those of the Macomb-Oakland Regional Centre in America (1984) and Barnados in the UK (1987).

Aggressive strategies were preferred, using classified newspaper advertisements, feature articles in local and metropolitan newspapers, radio and television publicity, brochures, displays in shopping centres and so on. In common with similar programs (Volard, 1982, 1983, Oughletree, 1967, Szwarc, 1989), a major campaign typically would use as many media as possible over several weeks, followed by steady continuous recruitment throughout the year.

#### The response rate

Agency staff generally perceived their recruiting efforts as disappointing. By far the most successful strategy was an article on a particular child. This generated inquiries from 29 people for one agency, although only three went on to train for the program.

Unfortunately there are no precise data to accurately source successes to specific strategies; or to distinguish between strategies geared to foster care in general and those geared specifically to Shared Family Care.

On the whole, the agencies viewed recruitment for Shared Family Care, as just one part of general foster care recruitment. Recruitment strategies provided intermittent focus on Shared Family care along with foster care for adolescents, long-term foster care and others.

One agency planned this as a deliberate strategy; they found it useful to first recruit into general foster care and then later on approach the caregiver with the possibility of caring for a child with a disability.

## Content of publicity

## Motivation of caregivers

Agency staff were asked about the potential caregivers' motivation which had been targeted by the publicity. Motivations cited included: community spirit, satisfaction from looking after children, the challenge and sense of achievement in supporting families with disabled.

The twelve caregivers did in fact demonstrate these motivations – an

enjoyment of children and caring for them (five); a belief that children with a disability and their families needed help and they themselves held no fear of intellectual disability (nine).

The reasons given by caregivers for their interest in Shared Family Care as recorded by the agencies for the statistical monitoring part of the study, included: a specific interest in disability; wanting to extend previous fostering experience to the special needs area; a desire to help families who needed support; and the greater challenge presented by children with a disability.

Caregivers also reported their interest was stimulated by items in newsletters and foster caregiver information sessions. These are responses which reflect the fact that nearly all the caregivers were recruited from the general foster caregiver pool.

## Caregiver characteristics

Agency staff indicated the various people they considered suitable to target for recruitment:

- had been exposed to and understood disability;
- were mature age people;
- were confident;
- were 'unflappable' and matter of fact. Staff also valued realistic expectations, flexibility; and good organising skills.

Many caregivers recruited already had contact with disability through a personal acquaintance or having previously done paid or voluntary work in the disability area. Several had been assistants in disability facilities and some were caregivers in the Interchange respite care program.

One had worked as a handcraft instructor, another as an integration aide.

Caregivers were most usually married with children. There were also couples without children and one single parent. Their ages ranged from then mid 20's to early 50's with two couples in their sixties. Most were between 30 and 45 years.

Other studies have indicated similar profiles of caregivers of children with a disability. One study found they were 'other directed' people who enjoyed

children and parenting tasks (Volard, 1983). Caregivers generally have had personal contact with people with a disability and worked in caring professions such as nursing, mothercraft nursing and teaching (Robinson, 1986; Upshur, 1982; Cohen & Warren, 1985).

The Macomb-Oakland training manual (1984) does not specify the target characteristics of caregivers but indicates the importance of gearing recruiting strategies to particular groups so coverage is not wasted. Volard (1983) also stresses that targeting groups with characteristics similar to current caregivers is likely to attract at least one group of caregivers.

## **Approach to Message Content**

Agencies were using several publicity approaches. The informative type focused on the establishment of the service or the nature of the caring task, possibly extending to the general needs of families and children with a disability.

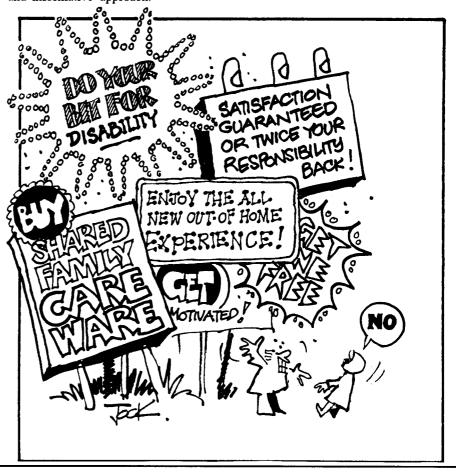
Another approach profiled a particular child in need of placement. Several agencies indicated that these kinds of 'human interest' stories generated a better response than the more didactic and informative approach.

Again this reflects previous experience in several similar programs (Oliver, 1971; Donley, 1976; Sawbridge, 1979). More recently the Bayside program in Victoria, as well as focusing on the challenge of special needs fostering, geared some recruitment to specific children (Szwarc 1989). Barnardos (1987) has taken a similar approach.

# Availability and Retention of the Caregivers Recruited

The statistical monitoring of the program showed that sixteen newly recruited caregivers withdrew. Their reasons were mostly retirement, job change or unemployment and illness or a death in the family. Other factors included a breakdown in the placement and a desire to return to regular foster care.

Every month during the year, long evaluation at least five caregivers in each of the six agencies were temporarily unavailable for personal reasons – hospitalisation of either the caregiver or a family member; holiday breaks through the year and overseas travel. One caregiver had a baby.



# Discussion and Issues for Recruiting

### **Strategies**

Overall, the study found strategies used in other programs: a wide range of media in more concentrated campaigns generally followed up with ongoing recruitment throughout the year. Articles and advertisements focused on a particular child or on the program in general. Program-based publicity tended to give information in a didactic manner about foster care, respite care and other aspects of the program. There was acknowledgment that potential caregivers did respond better to publicity with a particular child's profile. However, overall the results of publicity were disappointing and as with other programs, the number of caregivers is inadequate for the children requiring placement.

Two advantages of locating Shared Family Care in generic foster care agencies are: 1) that recruiting can be linked into an agency's well-established recruiting strategies and procedures; and 2) that caregivers can be recruited through the existing foster parent pool, a strategy widely used by these agencies.

However, although recruiting this way is an obvious place to start in any new program, it has limitations: there is a ceiling on the number of volunteers any existing foster caregiver pool can yield and real doubts about meeting long term demands.

With Shared Family Care recruitment incorporated into general foster care recruitment, the specific aspects of caring for a child with an intellectual disability becomes a focus of publicity only intermittently.

The experience of other programs indicates that even with strong and persistent strategies focusing specifically on a particular program, caregivers are difficult to find.

It is reasonable to suggest that more caregivers could be recruited if Shared Family Care were singled out for attention more often and perhaps separately from other aspects of foster care.

## Content of publicity

# Motivation and characteristics of caregivers

It is very important to understand why people are likely to take on the task of fostering which for some years has been stressed in the considerable literature on marketing (Kotler, 1975; Reed, 1992; Volard, 1982, 1983). In this study and others, the data indicate that current caregivers are likely to have altruistic or 'other directed' motivations, such as doing something useful in the community, helping families and children, as well as enjoying caring for children and parenting-type tasks.

In this context, publicity focusing on the individual child profile would more likely appeal to such altruism than didactic, information giving publicity about the program. In the same way, targeting those with the same socio-economic and other characteristics as current caregivers is likely to attract people similar to those already fostering children through the agency and therefore whom the agency deems appropriate for the task.

However, two issues need to be kept in mind, the messages of current publicity and targeting which is too narrow.

Media advertising normally targets specific motivations. The belief that caregiving is important and worth-while encourages its unquestioned use in foster care recruitment. Agencies need to be very clear about whether 'the means justifies the end' and also the nature of the task they are asking people to take on. Will caregiving actually fulfil the interests of the caregivers? Regular monitoring of the satisfaction of all parties is crucial so agencies can adapt their practice to consumer needs.

Other markets need to be found to increase caregivers to an adequate level. Resources should be directed to some basic market research to discover new markets for recruiting and what circumstances would attract them; and also to develop messages directed to raising community awareness of the program.

Financial circumstances are a likely issue. Currently caregivers in foster care and Shared Family Care programs receive nothing but an allowance to help defray costs. In the economic recession, many potential caregivers might be lost because they need to earn an income. This study found that payment is not a priority for caregivers who often express concern that a wage might attract the 'wrong kinds of caregivers'. However, most agencies have well established preparation procedures and selection criteria for screening applicants.

It could be argued that the focus be on expanding opportunities rather than focusing on the possibility of attracting the wrong people. Quality of care is essentially an issue of preparation and selection rather than recruitment. There is a strong likelihood that a large market segment exists which currently is missed in current recruitment targeting.

## The Program

The agencies' own concept of foster care has changed over the years from a welfare service providing substitute care, a last resort option when families could no longer cope with their child at home; to being seen as a community-based support service for families. The persistence of old images could have unfortunate consequences for Shared Family Care.

The program was conceived by the public as a program providing out-of-home care for a child with an intellectual disability/developmental delay whose family or regular carers require time out for a period, perhaps on a regular basis, perhaps for the rest of their lives.

Families requiring respite or longer term care are definitely not in need of 'welfare' but rather require access to a resource which most of us take for granted and build into our lives through helping networks or generic agencies such as babysitters or home help. This situation which can prove more difficult for families with a child with an intellectual disability.

The danger of confusion for potential caregivers because of this ambiguity could lead to fewer responses to

recruitment efforts than if the program were promoted differently. It is important that the support nature of foster care is promoted and any possible 'welfare' myths are dispelled. This could well attract a segment of the market who might otherwise not respond. For example, an invitation to treat yourself to a bonus weekend, to share the care, share the challenge and share the love (Interchange, 1990) could well provoke a response which an article focusing on information about the service, the needs of children with a disability and their families and how caregivers can help, may not.

It goes without saying that any change of image must reflect honestly the nature of the caregiving task and what caregivers can expect by way of service from the agency.

## Conclusion

Shared Family Care offers an important out-of-home care option for families with a child with an intellectual disability/developmental delay and can improve markedly the quality of life for both the child and the family. Finding enough caregivers to meet the demand is a problem which has faced agencies for many years. Meeting the challenge requires both time and resources. Several issues around recruiting strategies and the content of publicity need to be resolved. However, just changing the image of a service and utilising appropriate media or running an effective recruitment campaign is not enough. Caregivers must be retained and this requires practices which are both attractive and comfortable for both service users and caregivers, satisfying each of their needs. Marketing strategies have long recognised the need for consumer satisfaction and employ strategies to find out what these are and how they can be met. For recruiting of caregivers to be effective some of these strategies need to be adopted. •

## Note:

This study was conducted with funding from Health and Community Services in Victoria under the auspice of the Disability Program Evaluation Unit.

#### References

- Barnados Burwood (1987) Professional Careers Program, Burwood, UK
- Baxter C., Volard J., da Costa C. (1990) Evaluation of SFC Formative Report Number Two. Victoria College, Disability Program Evaluation Unit.
- Behr S. (1990) Literature Review: Positive Contributions Of Persons With Disabilities To Their Families. Lawrence: University of Kansas, Beach Center on Families and Disability.
- Cohen S. & Warren R. (1985) Respite Care Principles and Programs and Policies. Texas, Pro-Ed.
- da Costa C. & Baxter C. (1990) Broad Monitoring of the Shared Family Care Program. Report to Community Services Victoria on the Evaluation of Shared Family Care. Volume 4, Victoria College, Disability Program Evaluation Unit.
- Donley J. (1976) 'Children with special needs'. In Picton C. (ed.), Proceedings Of The First Australian Conference on Adoption. Committee of the First Australian Conference on Adoption, Australia: Brown Prior Anderson Pty Ltd.
- Glidden L.M., Valliere V.N. and Herbert S.L. (1988) 'Adopted children with mental retardation: Positive family impact'. *Mental Retardation* 26(3), 119–126.
- Intagliata J. (1986) 'Assessing the impact of respite care services: A review of outcome evaluation studies' in Sainsbury C.L. & Intagliata J. (eds.), Respite Care, Support for Persons with Developmental Disability and Their Families. Baltimore, Paul H Brooks.
- Interchange (1990) Brochure, Treat Yourself To A Bonus, Interchange Family Program of Victoria.
- Interchange (1991) Share in the Care. Details of the Results of the 1990/91 Joint Interchange and Shared Family Care Recruitment Campaign, Interchange Family Program of Victoria.
- Judd C.M., Smith E.R. & Kidder C.H. (1991) Research Methods in Social Relations, 6th Ed., London: Holt Rienhart & Winston.
- Kahn A.J. (1957) 'Socially and social work, challenge and invitation'. *Social Problems*, 4(3).
- Kotler P. (1975) Marketing for Non-Profit Organisations, Englewood Cliffs, N.J.: Prentice-Hall.
- Macomb-Oaklands (1984) Regional Centre Recruitment of Foster Homes. (1984) An Institutional Manual of Foster Home Recruitment Techniques. Can Good Homes Really be Found? Michigan Dept. of Mental Health, USA.
- Oliver C. (1971) 'Selling children's aid, a Canadian experience.' Social Work Today, 2(18).

- Opening New Doors, Finding Families for Older and Handicapped Children, based on talks given by K. Donley, The Association of British Adoption and Fostering Agencies, London, 1975.
- Patton M.Q. (1980) Qualitative Evaluation Methods, California Sage Publications.
- Petersen J.C. & Pierce A.D. (1974) 'Socioeconomic characteristics of foster parents'. Child Welfare, 53(5).
- Reed P. (1992) Marketing, Planning and Strategy, Sydney: Harcourt Brace Jovan-ovich, Publishers.
- Robinson C. (19186) Avon Short-term Respite Care Scheme: Evaluative Study Final Report, Parts I & II. UK Department of Mental Health, University of Bristol.
- Sawbridge P. (1979) 'Findings Homes for the Hardest to Place Children', in Picton C. (ed.), Proceedings of the Second Australian Conference on Adoption, The Committee of the Second Australian Conference on Adoption. Australia: Brown Prior Anderson Pty Ltd.
- State plan for the development of intellectual disability services 1989–1992; Community Services Victoria.
- Szwarc B. (1989), The Bayside Specialist Placement Scheme. An Overview of the 12 months Demonstration Project, Victorian Children's Aid Society, Melbourne.
- Upshur C. (1982) 'Respite Care for Mentally Retarded and Other Disabled Populations: Program Models and Family Needs'. Mental Retardation, 20(1), American Association on Mental Deficiency.
- Volard J. (1982) Recruiting Foster Parents for Intellectually Handicapped Children, Masters Thesis Uni. of Queensland, (unpublished).
- Volard J. (1983) 'Recruiting foster parents. Socio-economic characteristic of foster parents of intellectually handicapped and non-intellectually handicapped children in Queensland'. Australian Child and Family Welfare 8(2) pp.3-9.
- Volard J. & Baxter C. (1990) Service Provision and Policy Implementation in Formative Reports 1 and 2: Report to CSV/Disability Services on the Evaluation of Shared Family Care, Victoria College, Disability Program Evaluation Unit.
- Walker R. (1985) 'An Introduction to Applied Qualitative Research' in Walker R. Applied Qualitative Research, Vermont: Gower.
- Wikler L., Wasow M. & Hatfield E. (1983) 'Seeking strengths in families of developmentally disabled children'. *Social Work*, July-August, 313-315.