“Fitting a Square Peg into a Round Hole”—
Understanding Kinship Care Outside of the Foster Care Paradigm

by

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A thesis submitted in conformity with the requirements of the for the degree of PhD
Factor-Inwentash Faculty of Social Work
University of Toronto

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2010

Abstract

This exploratory grounded theory study is a comparative analysis of kinship and foster care in the province of Ontario. This study sought the perspective of three constituent groups—caregivers (N=22), workers (N=14) and youth (N=9)—from both kinship and foster care constituent populations. The total number of participants was 45.

This is one of the first comprehensive qualitative studies in the province of Ontario since the inception of the kinship model of practice implemented by the child welfare system in 2006. The study resonates with important practice, policy and research implications for Ontario and beyond.

Recruitment for the study was generated through various child welfare organizations and a kin grandparents support network. Findings from each of the three groups include the following: (1) specialized kin workers recognize the complexities and unique needs of kinship placements; (2) foster parents and kin caregivers have very different needs related to training, financial remuneration and support; and (3) youth experience feelings of loneliness and frustration when moving to different placements, but also acknowledge the importance of relationships, particularly to their assigned worker. The analysis of these
three group converges to a very simple but poignant conclusion: kinship programs are unique and require a level of intervention that is separate and discrete from the current foster care paradigm.
“Children will not remember you for the material things you provided but for the feeling that you cherished them.” Richard Evans, date unknown
Acknowledgements

I could never have achieved this goal without the support of family and friends. My greatest thanks are to my Mom who was, in her own way, a true feminist. She believed that women can do anything if they put their hearts and souls into it. To my Dad, who loved me and believed in me and always knew I would pass stats class. To Ruthie, my other “Mom,” who helped me to realize that laughing is the best way to triumph over adversity. And to all of my wonderful friends, who all believed in me despite everything.

I owe a huge thank you to Claudette, who helped to set me off on this journey and inspired me to do research on kinship care. Her love and commitment to vulnerable children has taught me so much in my life and career. To Alice, John, Shenur, Cathy, Julie, Liz and Jennifer for truly supporting me all the way through this journey. To my younger sister, Roberta, who was the angel on my shoulder throughout.

I want to provide a special thank you to Marion Bogo, who first taught me how to conduct qualitative research. She taught me how to write, think and do effective and important research. She is a cherished mentor to me.

To Rob MacFadden for always being there, and for pushing me to do better than I thought I could and sticking by me while I was writing the ethics protocol and many subsequent amendments.

To the Ontario child welfare community for their interest in and engagement with this study, and for providing invaluable feedback to me along the way.

I could never have achieved so much without the voices of the 45 participants who have shared their stories. These brave individuals have given such richness to a study that should contribute to clinical knowledge and practice in the child welfare field.

And finally a huge thank you to my committee: Dr. Rob MacFadden, Dr. Aron Shlonsky, Dr. Bob Flynn and Dr. Lynn McDonald.

And to countless others, who have kept me going through small and cherished ways.
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Foreword

This dissertation has been a journey physically, mentally and emotionally. I have reflected a great deal upon how the written representation of this study should look and I have decided to tell the story of how this research came to be a reality. I want to represent “the play within the play”; to represent the methodological challenges and findings from the study, but also to embody my personal and professional growth as a researcher and emerging academic.

Situating myself within the child welfare system

I decided that if I am to tell the stories of others, I should first begin by situating myself within the context of the child welfare system. To explain how I arrived where I am now, and how I decided to take on the task of completing a PhD about child welfare placements, I first need to tell my own story.

The evolution of this study did not occur overnight. My passion for teaching and research in child welfare has been formed over the course of a 22-year career that began in 1988.

During my first month as a child protection worker I carried a caseload of 35–40 intake and ongoing cases. Some cases remain indelibly imprinted in my memory: the suicide of an adolescent girl; three young boys who suffered from terrible emotional and physical neglect; and 13 children removed from one family home because of severe physical abuse and neglect. In 1996, I moved to Ottawa to work as a supervisor at the local child welfare agency and after two years became an intake supervisor. I was responsible for a team of five newly employed front-line child protection workers, none of whom had worked a day in her life as a child protection worker. Training new child welfare staff is where I first taught child welfare practice and my desire to further my education began to develop. In my final position prior to returning to school in 2004, I had the opportunity to work with Barbara MacKinnon, Executive Director at the Children’s Aid Society of Ottawa. In this role, Barbara taught me that making change is based on good solid working relationships with people…a theme that has stuck in my head (and heart) and surprisingly—or not—a pivotal theme that has emerged from this study.
Transitioning from practitioner to researcher

In 2000, I received the Bell Canada Child Welfare Research Fellowship. This innovative Fellowship gave me the opportunity to complete a Diploma in Social Work Research at the Factor-Inwentash Faculty of Social Work at the University of Toronto, a program designed to give social work professionals the skills to conduct research in their own organizations. I participated in the 2003 cycle of the Canadian Incidence Study and I have been a site researcher at the Ottawa and Lanark Children’s Aid Societies.

When I entered the doctoral program at the University of Toronto in 2004, I received the Royal Bank Fellowship—a program designed to further doctoral students’ research experience. Within the doctoral program I worked with Professor Marion Bogo on a grounded theory study that examined the concepts of clinical supervision in child welfare practice. This experience set in motion my desire to continue to learn how to conduct good, solid research. I am still learning, and through this growth I continue to develop.

My practical child welfare experience has become the genesis for this research. My emerging research skills are harnessing my previous clinical knowledge and taping into the vast terrain of child welfare issues that require more research and reflection.

I began my career interviewing children and families, and this level of comfort and expertise has created a capacity and framework for me to ask people questions in a way that both engages them and provides them with the opportunity to share their stories. I have what I believe is a talent in this area, and this capacity allows me to tap into the rich subjective experiences of others. This does not mean that it is easy. It is not. Throughout this thesis I will reflect on the emotions elicited by hearing these stories. However, I believe that without hearing these stories, we cannot truly understand the pain and hope that others have to share.

Linking research to practice

Currently, I hold the position of Executive Director of PART (Practice and Research Together: www.partontario.org). This knowledge-translation initiative seeks to promote and integrate the use of evidence-informed practice within the context of busy child
welfare organizations. This role allows me to connect with child welfare organizations in a unique way. I have the rare opportunity to engage child welfare organizations in research studies. What I have come to learn, however, is that even I—a well-connected individual within the system—cannot completely overcome the barriers to conducting child welfare research in Ontario. I hope to highlight these challenges and barriers throughout my writings.
Study purpose

This exploratory grounded theory study seeks to compare and contrast the similarities and differences between kinship and foster placements from the perspective of youth, caregivers and child protection workers. It incorporates many different perspectives related to the complex issue of child welfare placements from various regions and constituent groups across the province. The goal of the study is to expand our knowledge of these differing placement types so that we can better understand both the clinical and policy implications for kinship and foster placements. This study is informed by a multidimensional theoretical framework that includes resilience and attachment theory as well as the ecological framework, which views people within the context of their environments.

This study does not set out to prove a hypothesis, but rather to examine some fundamental issues within the realm of child welfare placements. The essential issues to be examined from the perspective of the three constituent groups are as follows:

- What are the essential differences between kinship and foster placements?
- What are the similarities?
- How do we try to improve these placements for children and youth?
- How do we strive to improve these placements and related supports for kin caregivers and foster parents?

Statement of the problem

Since 2006, practitioners in the field of child welfare in Ontario and beyond have been expressing increased interest in the growing utilization of kinship placements for children and youth in need of protection. Attention to kinship placements has increased because many child welfare practitioners consider family-based care to be a better arrangement for children or youth than foster homes or group care. In addition, recruiting foster parents has remained a challenge (Albert, Iaci, & Catlin, 2006; Barber & Delfabro, 2004;
This preference for kinship placements is rooted in the belief that these homes offer children a greater chance for continuity and stability than foster homes (Geen, 2003b; Gleeson & Hairston, 1999; Hegar & Scannapieco, 1999; Ministry of Children and Youth Services, 2006; Murphy, 2006; Scannapieco & Hegar, 2002).

In essence, there are three deeply entrenched assumptions about the benefits of kinship placements: (1) kinship placements have greater longevity than foster care situations; (2) kinship homes are more likely to accept sibling groups and thereby sustain these important relationships; and (3) most children and their parents would prefer that the children live with family members or friends than with strangers (Barth, Guo, Green, & McCrae, 2007).

Kinship care is a concept that has been utilized by North American and international child welfare systems for decades. The practice of using extended family or community members as placement options for children in need of protection has become a major trend in the Ontario child welfare system in recent years, primarily since the spring of 2006 (Ministry of Children and Youth Services, 2006). This development has occurred because of the ever-increasing number of children requiring homes and the decreasing number of foster placements available (Geen, 2003a, 2003b).

Ontario has a total in-care population of 18,763 children, representing .064% of the total population at large (Centre for Excellence in Child Welfare Website retrieved September 25, 2009, from http://www.cecw-cepb.ca). In 2007 there were 964 kinship (in-care) placements and 2,786 kinship services files (voluntary placements). In 2009 there were 1,042 kinship in-care placements (an increase of 3.9%) and 2,810 kinship services files (an increase of 1%) (Ontario Association of Children’s Aid Societies Children in Care, 2009). Therefore, formal kinship care placements represent 5% of the total population and kinship services placements represent 15% of the total in-care population. These statistics show modest gains in the use of kinship placements both voluntarily and in care for Ontario. A growing reliance on kinship care warrants an examination of the outcomes related to kinship and foster care. Hence, there is a need for a qualitative study that examines the intricate issues related to child welfare placements in Ontario.
In Ontario, the shift towards utilizing family and friends as placement options has generated some controversy in relation to the safety and well-being of the children involved (Lewis, 2005). These concerns surfaced particularly during a provincial inquest that examined the case of a young boy, Jeffrey Baldwin, who died of starvation while in the care of his maternal grandparents. At the time of his death, the family was being supervised by the Toronto Catholic Children’s Aid Society. On April 7, 2006, the Ontario courts found the grandparents guilty of second-degree murder (Marin, 2006). The case received much public scrutiny and highlighted the pressing need to understand the complex issues related to kin caregiving (see definition below). The case also exemplified the challenging issues involved in kinship care, and the need for child welfare authorities to ensure the protection of children by having a structure and screening system in place for kinship placements.

**Key definitions**

Three definitions apply to this study, namely kinship, kith and foster or non-related placements.

**Kinship care**

Kinship care is broadly defined as, “The full-time nurturing and protection of children who must be separated from their parents, by relatives, members of their tribes or clans, godparents, stepparents, or other adults who have a kinship bond with a child” (Winokur et al., 2009, p. 8; Child Welfare League of America, 1994, p. 2).

**Kith Care**

**Foster or non-related care**

Foster or non-related care assumes that these are placements with children with whom there is no blood relationship or pre-existing relationship.

**The Canadian perspective**

A review of the literature suggests that there is a striking lack of empirical and conceptual literature from the Canadian perspective on the subject of kinship care. Some research has been conducted regarding foster placements for children and youth in care (Flynn, 2004), but no specific analysis has been performed on the impact and outcomes of placements with kin family members. Researchers based in the USA have, however, conducted much research on this topic and have paved the way for defining some of the important issues that require analysis (Beeman & Boisen, 1999; Benedict, Zuravin, & Stallings, 1996; Chapman, Wall, & Barth, 2004; Ehrle & Geen, 2002; Sivright, 2004; Worrall, 2001). These American authors—who pioneered research regarding kin caregivers—have employed both qualitative and quantitative methodologies (Musil & Standing, 2006; Shlonsky & Berrick, 2004).

Canada has a diverse population with distinct social policy and clinical issues at play. Therefore, the development of a Canadian perspective requires an analysis of the demographics of the children and youth entering kinship care in this country, an exploration of outcomes in relation to placements and an assessment of intervention strategies that might help to support or hinder these placements. In contrast to researchers in some other nations of the developed world, Canadian researchers and agencies still have considerable ground to cover in the development of a policy framework that could be used to guide a child welfare system in the effective utilization of kinship, kith and foster care placements.

**A qualitative perspective is required**

A comprehensive literature review has determined that there is minimal qualitative research from any jurisdiction that has explored the perspectives of children and youth regarding their experiences of living in kinship or foster care homes (Chapman, Wall, &
Barth, 2004). Data gathering regarding the perspectives of children and youth is essential for the development of an initial understanding of the factors that influence the success or failure of such placements. The existing qualitative kinship care research, which has been exploratory in nature, has tended to focus on experiences reported by child welfare professionals or by adults who were in kinship care as children (Beeman & Boisen, 1999; Benedict, Zuravin, & Stallings, 1996; Harden, Clyman, Kriebel, & Lyons, 2004). Attention to the voices of children and youth who are currently residing in kinship and foster placements is essential if practitioners, policy makers and researchers are to understand the unique elements of such placements.

**Organization of this dissertation**

This dissertation is organized to carry the reader through the essential elements of the story that has unfolded while conducting this research study. The contents of the chapters are outlined as follows.

**Chapter 2 (literature review)** provides the reader with a comprehensive review of the literature as it relates to both kinship and foster care. Using the recent Campbell Review (Winokur et al., 2009) on kinship care as an authoritative treatise, this literature review incorporates outcomes related to kinship and foster care. The review extends beyond traditional literature to incorporate the grey literature on the subject, while also including emerging research that links to themes from the current study.

**Chapter 3 (theoretical framework)** explores the emerging concepts of the multidimensional theoretical framework, which incorporates resilience and attachment theories set against a backdrop of the ecological framework. This multidimensional framework provides a foundation for understanding the issues that unfold in the “findings” sections for all three constituent groups.

**Chapter 4 (study design)** outlines how the study progressed. This chapter explores the “play within a play,” whereby the reader is given an outline of the phases of the study evolution. It incorporates the complex elements of the study design and execution, particularly as it relates to the challenges and triumphs of the recruitment process.
**Chapter 5 (findings)** is the essence of the study, whereby the stories of 45 participants are shared and the emerging text is channelled into a comprehensive analysis of very complex child welfare issues.

**Chapter 6 (discussion)** moves the reader forward, taking the knowledge developed in Chapter 5 and channelling this information into a comprehensive understanding of the knowledge gained from this study, together with its limitations. This chapter explores the complexities of the study design and the challenge of creating an evolving and iterative recruitment strategy, while also balancing the ethical obligations of a complex study protocol intended to serve the needs of a vulnerable group.

**Chapter 7 (conclusion)** concludes the analysis of the study by providing the reader with next steps for research and policy development related to child welfare placements in Ontario and Canada. This chapter explores the implications for social work and child welfare practice and concludes with an overview of the researcher’s own learning journey from start to finish.

**Closing remarks**

It is hoped the reader will witness the evolution of this study through the written word. However, no words can completely express the thoughts, feelings and beliefs expressed during this study by so many workers, caregivers and youth across Ontario.
Chapter 2
Literature Review

Introduction

The goal of this chapter is to explore the similarities and differences between kinship and foster care placement options through a review of the literature. The review covers an array of subject areas, including: (1) The evolution of kinship care in the context of foster placements; (2) outcomes for children in kinship and foster placements; (3) safety; (4) permanence; (5) child welfare worker, caregiver and youth perspectives; (6) family relations; and (7) diversity issues. Finally, it offers conclusions and ideas from practice, policy and research standpoints. Using the Campbell Review by Winokur, Holtan and Valentine (2009) as an authoritative treatise and resource for many of the articles cited, this literature review attempts to provide the reader with substantive knowledge on the issues explored in this dissertation. Information from grey literature is included.

This literature review was constructed in two phases. Phase one began with an overview of the literature on topic areas that seemed relevant, such as permanency, safety and financial compensation. Phase two required a return to the literature following the emergence of key themes from study participants that required further analysis. This iterative process of returning to the literature throughout the course of the data analysis process is in keeping with the philosophical underpinnings of the grounded theory approach (Charmaz, 2006). During the process of data analysis, the researcher kept a journal of emerging themes that required more analysis in the literature.

An authoritative treatise

In January 2009, the Campbell Collaboration Systematic Review was published by Winokur et al. (2009). This comprehensive review analyzed 62 quantitative analyses of various facets of kinship care and practice. This review has direct and important relevance to this dissertation. The Campbell Review has provided a valuable “road map” for clearly understanding some of the confounding issues related to kinship practice. Winokur et al. devised a rating system for the inclusion of only high-quality studies in
their review. The following subject areas were covered:

- Behavioural development and issues
- Placement stability
- Permanence, including the areas of reunification, adoption, and guardianship
- Educational attainment
- Family relations
- Mental health
- Service utilization

**Limitations of Campbell Review**

Two important limitations of the Campbell Review are a stringent emphasis on quantitative research to the exclusion of important and relevant qualitative analyses and the lack of any Canadian research on the subject of kinship versus foster care. In fact, the Campbell Review is predominantly US in focus and so an emphasis on culturally relevant issues linked to the Canadian social policy framework is excluded. A third limitation is that the Campbell Review focuses specifically on outcome effectiveness with no analysis of the experience of children and youth in care.

Winokur et al. themselves explored the potential biases in the construction of their review. These include the following: (1) effect size calculations were not the same across all studies; (2) population samples varied across studies from small to large; and (3) potential publication bias means the reviewers themselves held innate biases towards certain research and study designs (quantitative instead of qualitative or mixed methods). An issue not raised by the reviewers is the possibility that grandparents care for higher-functioning children than foster parents, who, for the most part, are required by the system to take children with many different issues and challenges.

Research and research reviews require greater study rigor to compensate for these limitations listed above. The field requires high quality knowledge to make critical
decisions related to child welfare placements. The child welfare system embraces systematic reviews as a mechanism for making evidence-based decisions related to practice and so rigorous research methodology is essential (Dill & Shera, 2009). Some researchers posit that randomized control trials are the purest research design to be employed to extract exact differences between kinship and foster placements. Deciding which child should move to which placement on the basis of research design only can and should be viewed as unethical. That said other researchers have employed other statistical techniques to ascertain the differences between kinship and other placement types. Barth et al, (2008), employed a national probability sample \((n=727)\) of children who had been in care for about one year. The study employed a statistical analysis of probability sampling units (PSU), and the authors determined that kin placements do not differ significantly to foster care placements. This most recent comparative study was not included in the Winokur et al., review.

A longitudinal study by Koh & Testa (2008) used a similar statistical analysis (PSU)—and examined linked records for 21,914 kin children and 10,108 non-kin children. A randomized data set of 1,500 children in non-kinship care was matched to the kinship sample by using PSM. Children in non-kinship foster homes still show a higher risk for initial placement disruption after matching, but differences in placement stability for the two populations diminish after one year. The findings determined that children in non-kinship homes are at increased risk of initial placement disruption but following this, there are minimal differences. This study was not included in the Winokur Review. These two studies highlight that despite the limitations of the Winokur Review, researchers can still achieve design rigor without employing randomized control trials.
The evolution of kinship care in the context of foster placements

Over the past decade, child welfare practitioners have expressed increased interest in the growing use of kinship placements for children and youth in need of protection (Albert, Iaci, & Catlin, 2006; Berrick, 1997; Leschied, MacKay, Raghunandan, Sharpe, & Sookoor, 2007). Attention to kinship placements has expanded because many child welfare practitioners consider family-based care to be a better arrangement for children or youth than foster homes or group care, and there are increased numbers of children entering the system and limited numbers of foster placements (Albert et al., 2006; Barber & Delfabro, 2004; Ontario Association of Children’s Aid Societies, March, 2009). This is rooted in the belief that kinship placements offer children a greater opportunity for continuity and stability than foster homes (Geen, 2003a, 2003b, 2003c; Gleeson & Hairston, 1999; Hagar & Scannapieco, 1999).

In essence, there are three deeply entrenched assumptions about the benefits of kinship placements: (1) kinship placements have greater longevity than foster care situations; (2) kinship homes are more likely to accept sibling groups and sustain those relationships; and (3) most children and parents would prefer that children live with family members or friends than with strangers (Barth, Guo, Green, & McCrae, 2007).

The number of kinship placements rose dramatically over the past decade (2000’s), primarily because the need for child welfare placements exceeded the supply: there were too few foster placements and a burgeoning number of children requiring protective placements (Smith, Rudolph & Swords, 2002; Wells & Guo, 1999). In many respects, the evolution of kinship placements did not arise from an inherent belief that extended family and community members provide a better alternate placement—rather, there was a crushing need to find homes for children in light of an emerging shortage of traditional foster homes. Experts in the area of kinship practice emphasize that the utilization of kinship placements has outstripped the emerging evidence required to confirm if such
placements work for children and youth (Cuddeback, 2004; Gleeson, 1997).

Although there is a tradition of engaging family and community in the placement of children in need of protection, the formalized use of kinship placements is a relatively new phenomenon in the context of child welfare practice (Smith, Rudolph, & Swords, 2002). Child welfare organizations continue to grapple with how to create and implement programs that are unique to the needs of kin caregivers (Gleeson, 1997). The child welfare field has been required to develop a perspective and analysis of kinship homes that is distinctly different from the structures currently in place for traditional foster placements.

In an interesting analysis of the changing child welfare placement paradigm, Berrick (1998) highlighted the fact that large numbers of women have entered the labour force over the past several decades. Traditionally, foster care has been led by women who have remained at home to provide child care options. With women working outside of the home, the capacity to provide foster placements has diminished across North America (Berrick, 1998). This has increased the need to consider alternate placement options, which has frequently included exploring the use extended family members as placement options. However, demographics from the USA paint a picture of kin caregivers as predominantly black grandmothers living in considerable poverty (Geen, 2003a, 2003b, 2003c). In essence, the research depicts a kin caregiver population that is both financially and socially disenfranchised (Geen, 2003a, 2003b, 2003c; Gleeson & Hairston, 1999; Hegar & Scannapieco, 1999).

**Foster and kinship care in the Canadian context**

There has been no systematic calculation of the current kinship placements across Canada, but current census data note that kin arrangement, with grandparents caring for a child without the natural parent in the home, increased by 20% between 1991 and 2001 (Gough, 2006). The Northwest Territories, for example, has seen an increase in the number of kinship placements because of policy developments that encourage such placements (Gough, 2006).
In 2006, the Centre for Excellence in Child Welfare completed a review of kinship policy development related to four provinces and a territory across Canada: Alberta, British Columbia, the Northwest Territories, Ontario, and Saskatchewan (Gough, 2006). This provincial comparative review determined that, in all of the five areas, kinship placements are the first option to be explored by child welfare personnel when a child is in need of placement. Financial compensation and training vary from area to area, with the Northwest Territories leading the nation by instituting the same compensation, training and standards for kinship placements as for foster homes.

**The evolution of kinship care in Ontario**

In the province of Ontario, as in much of Canada, the child welfare system has experienced large changes and growth that have resulted in fewer available foster homes and an increased need for extended-family placements. Since the mid 1990s there has been a substantial increase in the number of children entering the child welfare system (Lescheid et al., 2007). This surge in the rate of children coming into care has resulted in an increased utilization of both in-care (with the same funding as foster placements) and voluntary kinship placements (Ontario Association of Children’s Aid Societies, 2008).

On April 29 and 30, 2008, PART (Practice and Research Together: a child welfare knowledge dissemination program; www.partontario.org) hosted a learning event (conference) with leading researchers presenting findings related to kinship practice. This event showcased emerging kinship models of practice at the Children’s Aid Society (CAS) of London and Middlesex and the Catholic Children’s Aid Society (CCAS) of Toronto. These organizations outlined their respective organizations’ structures and innovations related to kinship care (Pakalnis, 2008; Tansony, 2008). The London and Middlesex presentation highlighted the organization’s commitment to promoting evidence and how their kinship model of practice has been evaluated by researchers at the University of Western Ontario (Leisheid, 2007; Pakalnis, 2008). The CCAS highlighted their organization’s innovation and commitment to services for kin families, which include a kin caregivers’ support group and individual and group art therapy sessions for children living in kinship placements (Tansony, 2008). The CCAS did not present any evaluation findings for these innovative programs, but the organization is intent on
determining the efficacy of these support programs. Both of these organizations exemplify the emerging organizational specialization in the area of kinship practice and service delivery.

**Outcomes for children and youth**

A fundamental question is whether the outcomes of children placed in kinship homes are equivalent to, or surpass, or inferior to those of children in foster care. Research findings suggest that all children in substitute care tend to enter the child welfare system with many developmental delays and challenges (Leslie et al., 2000). It is vital for child welfare professionals to understand this information in order to create and implement effective program designs for kinship placements.

**Educational outcomes**

Canadian child welfare systems are making great strides in understanding the issues related to outcomes for children in care. “Looking After Children” (LAC) is an outcome measurement tool that examines children’s overall well-being from the perspective of seven dimensions: health, education, identity, family and social relationships, social presentation skills, emotional and behavioural development, and self-care skills. Using information from this outcome measurement tool, Kufeldt, Simard, Tite and Vachon (2003) examined outcomes for children and youth in child welfare placements. One of the researchers’ striking findings was that children and youth in care did considerably less well on educational outcomes compared to the general population. This study did not examine specific outcomes related to children in kinship placements.

The Campbell Review (2009) examined a total of four studies for this particular area. It examined whether more children in foster care as compared to kinship care repeated a grade, but no important difference between placement types was determined on this educational outcome (Winokur et al., 2009).

With access to the ever-emerging Looking After Children data compiled by each of the 53 child welfare agencies across the province, Ontario has the potential to provide substantive evidence related to educational outcomes for children in kinship and foster
placements.

**Behavioural outcomes**

An Ontario study has compared behavioural outcomes for children placed in kinship and foster care (Leschied et al., 2007). Children in kinship homes showed greater improvement on various different behavioural measures, including physical and verbal aggression, fire-setting, and hyperactivity. This study was conducted in one mid-sized agency \(N=1042\) and requires replication.

Timmer, Sedler and Urquiza (2004) performed a quantitative analysis of 102 kinship and 157 non-kinship foster parents with children and families at the Davis Children’s Hospital in California at a clinic that serves families involved in the child welfare system. They determined that foster parents’ ratings of the severity of the behavioural problems of the children in their care were much higher and more negative than those of kin caregivers. In addition, kin caregivers tended to follow through more consistently with mental health treatment for children and youth compared to their foster parent counterparts.

A more recent study by Rubin et al. (2008) compared kinship to foster care placements. The data were drawn from the US National Survey of Child and Adolescent Well-being between October 1999 and March 2004. Using a sample of 1,309 children in care \(n=710\) in foster care and \(n=599\) in kinship homes), this study determined that children who moved to kinship care, after a length of time in foster care, were more likely to demonstrate behavioural challenges than children who started their placement experience in a kinship home. The study did not elaborate on whether the children who began their placement journey in foster care, and then transitioned to kinship homes, demonstrated a reduction in behavioural challenges after this transition. If data on this issue had been examined, it might have helped in determining whether kinship placements have a moderating influence on the behavioural outcomes of children in care. Future research should examine this issue in more detail.
The Campbell Review examined 10 studies on behavioural outcomes for children placed in kin and foster homes (Winokur et al., 2009). The research suggests that children in kinship placements have “lower repeated levels of internalizing and externalizing behaviours than children did in foster care” (Winokur et al., 2009, p. 30). Again, the clinical implications for this issue are important to consider because the Campbell Review suggests that children in kinship placements have less behavioural challenges than those in foster homes. The challenge is to uncover the clinical complexity of such findings, which may include a greater acceptance on the part of kin to accept the behaviour of the child or the reality that foster parents may be better trained to recognize and report such challenges to child welfare professionals.

**Physical health outcomes**

In a rare study that examined the health outcomes of children in kinship homes, Dubowitz et al. (1992) found notable health problems among children placed in kinship homes, including poor visual acuity, hearing, and growth, obesity, and dental problems. More research is needed to assess health issues in both kinship and foster homes, as another study had contrasting findings. Engaging a retrospective study design, Carpenter and Clyman (2004) conducted a quantitative study of 8,760 subjects using secondary data from the National Survey of Family Growth in the USA, and compared this population to a sample of 471 adult women who were placed in kinship care in their childhood years. The findings suggested that women who were placed in kinship care as children were likely to have better physical outcomes—but worse emotional outcomes—than those who grew up in foster care. This information is important, but its clinical implications are unclear.

The Campbell Review did not include physical health, but did examine physician utilization (Winokur et al., 2009). No significant findings were related to this outcome variable.
**Children’s mental health**

One of the basic assumptions of child welfare professionals is that children who are placed in the child welfare system experience an elevation of reported mental health concerns compared to the population at large. One of the most prolific researchers in this area, as it relates to children’s mental health issues for in-care population, is Michael Tarren-Seeley. His body of research on this subject originates from Australia, and the findings are striking. In one instance, Tarren-Seeney (2008) conducted a study with a sample population of 347 children in New South Wales. Using a retrospective design, the research found that older children in care have higher rates of mental health issues. This, the author posited, may arise from the emerging emotional maturity of older children in care and the recognition that those who are caring for them are not their biological parents. It was hypothesized that, as children grow, their recognition of being placed in a unique situation is heightened and that there can be shame and stigma related to being placed in care. Unfortunately, this research did not provide a breakdown of kinship versus foster placements.

The Campbell Review examined a total of five empirical studies and determined that children in foster care are 2.2 times more likely to experience mental health problems than those kinship placements (Winokur et al., 2009). It is important to understand the clinical implications of this. There may be reluctance on the part of kin caregivers to bring concerns about their children forward or there may be emerging evidence that kinship placements provide a shield against possible mental health issues for children in care. This systematic review highlights important findings for kinship placements, but it is clear that more detailed research is required in this area.

**Safety**

One of the most salient issues to be addressed relates to the safety of children in kinship and foster care placements. Are children more at risk in substitute care in general? If so, are children more or less safe in foster versus kinship homes? This issue is always raised following the tragic death of any child who has been placed in care. Most evidence suggests that children in kinship homes are at less risk of further abuse than those in
foster placements (Winokur et al., 2009).

**Screening**

Screening kin and foster placements always becomes a predominant issue for the public following the death of a child. In fact, this became a very real issue of public scrutiny when the child advocate’s office of Ontario released a report highlighting the number of children who had died in the care of child welfare agencies; many of these children had been placed in substitute care (Toronto Star, February 26, 2009; Lewis, 2009). In the very same week, Saskatchewan was dealing with news reports that were comparing foster homes to “puppy mills” (Waterloo Region Record, February 26, 2009). It is evident that issues of screening and assessing any child welfare placement are paramount for the safety of the child. Despite negative media scrutiny, the fundamental concern is whether the child welfare system is able to adequately screen homes and thus protect vulnerable children placed in substitute care.

**Screening kin caregivers with a different lens**

Through a critical analysis of the literature, Shlonsky and Berrick (2001) built a framework for assessing kin care providers that extends beyond the physical safety of the home environment. These authors posited that assessments of kinship homes must include an analysis of the family in the context of its larger environment. Based on their review, the authors concluded that children in kinship care typically reside in homes with considerable poverty (Geen, 2003a, 2003c; Wyatt, Simms, & Horwitz, 1997). They also provided child welfare practitioners with the “blueprint” for a kinship assessment tool that is linked to the complexities of such placements. The authors gave a unique perspective on how to assess kinship homes that does not borrow from the “cookie-cutter” approach of traditional foster care assessment frameworks. This framework looks at domains of quality in kinship homes. These domains include: (1) child safety, addressing factors that include child maltreatment, physical safety, neighbourhood and medical and dental care; (2) educational support; (3) mental health and behavioural support; and (4) developmental factors. Other issues were also addressed, including positive reciprocal attachment, characteristics of quality caregivers and quality of life.
This differentiation between the assessment of kinship and foster care homes recognizes the distinctly different clinical issues that exist in kinship placements, and that may be overlooked if a foster family assessment framework is utilized.
Ontario child welfare screening

The Ontario child welfare system uses the SAFE (Structured Analysis Family Evaluation) tool to assess and evaluate foster and kinship in-care applicants. The organization that markets this tool states the following:

Structured Analysis Family Evaluation [SAFE] is a home study methodology that was designed to evaluate families for adoption, foster care licensure, concurrent planning, and relative placement. SAFE is built upon solid social work practice values that stress the importance of respectfully engaging families in a strength based, mutual evaluation process that strives to select families in, not out. (Consortium for Children, n.d. Retrieved August 25, 2009 from http://www.safehomestudy.org)

In a review of the literature, two publications were located in relation to the SAFE assessment tool. A publication by Crea, Barth and Chintapalli (2009) explored the application of the SAFE tool as a home study tool to screen foster and adoption applicants. The authors conducted key informant interviews with experts in the field of adoption about what constitutes an “ideal” home study. The SAFE tool was designed to screen adoptive families by focusing on the following four key goals and objectives: (1) create a standardized screening tool; (2) promote greater worker efficiency; (3) produce a psychosocial assessment of family functioning; and (4) produce an in-depth written assessment (Crea et al., 2009, p. 152). This paper highlights the application of the SAFE assessment tool with foster and adoptive families, but the authors fail to elaborate on whether this tool has any efficacy or applicability in screening and assessing kin families.

In another study completed by the same authors, the researchers measured the perceptions of child welfare workers and supervisors regarding the benefits of the SAFE tool versus conventional home-study methods (Crea, Barth, Chintapalli, & Buchanan, 2009). Using an online survey, 209 participants (low response rate: 27%) from 13 states and three provinces gave their perceptions of the applicability of the SAFE tool. The overall perception of workers was that the tool provides a more comprehensive review of
the family system. This study provides a beginning analysis of the empirical validity of the SAFE assessment tool, but the researchers failed to explore the applicability of this tool in relation to the screening of family systems. Exploring the same data source, the same researchers (Crea et al., 2009) indicated that the perception of child welfare practitioners is that the instrument adequately addresses risks and complex family system issues. One of the unique findings was that practitioners who had no formal social work education were more likely to rate the tool as favourable in comparison to staff members with such formal education.

**Maltreatment reports**

Winokur, Crawford, Longobardi and Valentine (2008) contrasted kinship and foster placements by examining critical elements of care, including permanency, safety and stability outcomes. A key finding from this study was the different reported rates of maltreatment between the two placements: 18% of foster children were reported to have been maltreated in their care home compared to 2.2% of children in kinship homes. These numbers indicate that children are nearly eight times more likely to report being maltreated in a foster home than in a kinship placement. The authors cautioned, however, that foster homes may have higher reported rates of maltreatment because they are subject to greater scrutiny than kinship placements. In a review of the literature, Hunt (2009) found that the risk of abuse in kinship placements was relatively low (between 2% and 10% of all kinship placements). These rates were identified as no higher than in foster care, although the rates of reported abuse in foster care were not specified.

The Campbell Review highlights the Benedict and Zuravin (1996) and Fuller (2005) studies to provide conflicting findings related to maltreatment in either placement option. Benedict and Zuravin (1996) determined that placement in foster care increases a child’s risk of maltreatment by 4.4 times. In contrast, Fuller (2005) reported that “Children whose initial placement was in kinship foster care were four times more likely to experience maltreatment recurrence, within 60 days of reunification, than those whose initial placement was family foster care” (Winokur et al., 2009, p. 80). It should be noted that the Benedict and Zuravin study used licensed kinship homes in their research, while Fuller used unlicensed placements. Therefore, the results of emerging studies in the area
of reported child maltreatment in kin and foster care continue to be tenuous. This issue requires further analysis, particularly as it relates to kinship and foster homes in Canada.

Despite the tenuous evidence, it remains unclear why some studies have demonstrated that kinship homes appear to be more of a protective factor against future maltreatment. One hypothesis is that the extended family relationship protects children from future harm, and that kin caregivers are simply more invested in terms of ensuring the overall safety and well-being of the children. The bonds and attachments that exist between kin caregivers and children may be the shield that protects these children from higher rates of reported maltreatment. This hypothesis requires further investigation, but the above-noted studies dispel the myth that children in extended-family placements are at high risk for future maltreatment.

**Permanence**

The Campbell Review divided the concept of permanence into four categories: guardianship, adoption, reunification and placement outcome. There were no statistically significant differences in outcome for reunification (Winokur et al., 2009), but a significant difference was determined on the three other outcomes. The concept of customary care was not included in the Campbell Review, but this subject is explored below because aboriginal or customary care placements are important in the context of Canadian child welfare placements.

**Guardianship/Adoption**

From a clinical and empirical perspective, the issue of permanence is viewed differently from the perspective of kinship versus foster care placements. In the USA, there has been a policy shift towards the use of subsidized legal guardianship (Testa & Slack, 2002).

The Campbell Review determined that children in foster placements were more likely to be adopted than children in kinship homes (Winokur et al., 2009) and children in kinship placements were more likely to have relatives assume legal guardianship than children in foster placements (Winokur et al., 2009). The clinical implications of these findings are important because practitioners need to identify and create permanency alternatives for
kin families that differ from those for foster care. Indeed, this is one of the fundamental issues that will be explored in the findings section, because all kin caregivers in this study opted for legal guardianship instead of adoption.

Testa and Slack (2002) examined the issue of permanence within the context of kinship placements in the state of Illinois. Employing multiple research methods that included participant interviews, surveys and administrative data, with a sample population of 1,211 children, the researchers conducted this study for the Illinois Subsidized Guardianship Project. Testa and Slack formulated their hypothesis based on the emerging theoretical framework of social capital of the “gift relationship,” whereby the authors viewed kin caregivers as providing an altruistic gift to the family by providing care to the child or children in need of protection.

The findings from this study included the following: (1) many older youth did not wish to relinquish their familial connections; (2) as many as 65% of the completed guardianships may have gone in the direction of adoption if legal guardianship was not put forward as an option; (3) children and youth living with family were three times more likely to feel part of a family than children and youth living in the care of strangers; and (4) kin carers who put forward an altruistic plan to care for a relative’s children that included no request for financial subsidy were more likely to experience a disruption than caregivers who received a financial allowance. Testa and Slack argued there is a need to consider subsidized legal guardianship as another option that can provide stability for children and youth.

In a more recent publication, Testa (2008) explored permanency issues for children in foster care and examined the complexity of subsidized legal guardianship by reviewing the debate of whether the state should intervene in providing financial compensation to kin families, or if the very act of having government-provided funds weakens the traditional extended family network. Many contend that if a child is placed with family then the family should step forward and provide financial support without the intrusion of government intervention. In the end, Testa continued to support the notion of subsidized legal guardianship.
Shlonsky, Dawson, Choi, Piccus, Cardona and Needell (2004) highlighted the findings of the KinGap program—a California-based program that provides funds to subsidize kin legal guardianship arrangements. The authors of the report found that many children left the foster care system to be placed in kinship homes under a guardianship arrangement (16,287 children from 2000 to 2006). The program also resulted in a reduction in child welfare caseloads (Shlonsky et al, 2009). No such program exists in Ontario.

**Reunification**

Using secondary data analysis, McIntosh (2002) examined the variables that influence reunification in kin and foster placements. Using a sample size of 43 children who were reunified with their parents and 50 children who were permanently placed in out-of-home care in the state of Massachusetts, the study determined that Caucasian children have a greater chance of reunifying with their parents than African-American children. Children who were in care for more than five years were also found to be more at risk of not reunifying with their biological parents. This study poses interesting questions related to race and ethnicity and the impact on children in care. The Canadian Incidence Study determined that Aboriginal children represented 25% of all children in care in Canada (Trocmé et al., 2005). Canadian research is required to analyze the reunification rates of children in care in Canada to determine emerging trends and set forth an evidence-informed social policy agenda for children in care, particularly as it relates to Aboriginal children.

A kinship study performed by Gleeson, O’Donnell and Bonecutter (2007) was carried out in two child welfare agencies in the state of Illinois. This mixed-methods study included interviews with Child Protection Services workers (N=41) and file reviews (N=91). One of the substantive issues that was reported in the study was the exploration of reunification rates. In the study, interviews with workers determined that of the children on their caseloads, 26% were expected to be reunified with their biological family. In a two-year follow-up, only three children (4%) had returned home. The substantive methodological issue with this study was having Child Protection Services workers report on case proceedings, instead of using first-hand administrative data.


**Customary care**

The Ontario Association of Children’s Aid Societies (OACAS) defines customary care as the following:

*Customary Care is part of the continuum of care options for Aboriginal children. Customary Care is a model of Aboriginal child welfare service that is culturally relevant and incorporates the unique traditions and customs of each First Nation. Customary Care is a traditional method of caring for children, premised on the belief that a child is a sacred gift from the Creator and as such is the collective responsibility of the community. Customary Care Agreements are utilized when protection concerns in a family require out-of-home placement. A Customary Care home must comply with all requirements of foster care licensing after 60 days, if that person is willing and able to continue providing a safe place for the child.* (OACAS, n.d. Retrieved August 29, 2009 from http://www.oacas.org)

Current children in care statistics collated by the OACAS indicate that the use of customary care has risen by 3.4% over the past three years (2006–2009) (OACAS, 2009).

There appears to be minimal published research on this subject. In a literature search on the University of Toronto library system and a review of the websites of the Child Welfare League of Canada and the Centre of Excellence for Child Welfare, no research could be located on this subject.

An innovative new journal has been developed that seeks to showcase research related to Aboriginal issues. The journal, *First Peoples Child & Family Review*, has published a literature review on emerging Aboriginal research and two publications were located on issues related to customary care. In one publication, Jourdain (2002) examined the elements of customary care programs. This conceptual publication urged child welfare organizations to become more familiar with all aspects of customary care. In the second report, by Menzies & Van de Sande (2003), the authors examined the customary care
program provided by First Nations Child and Family Services, but the articles failed to provide empirical evidence to support the delivery of such a program. It is apparent that little or no research exists that examines the concept of customary care within the context and framework of child welfare practice.

**Placement outcome**

The Campbell Review determined that children in kinship placements were more likely to remain in care than their counterparts in foster placements (Winokur et al., 2009). These findings are reinforced by a study performed by Smith et al., in which the researchers looked at an unequal sample population of 345 kinship and 36 non-kinship placements of infants. The study determined that the infants in kinship homes remained there for a total of 403 days as compared to 165 days for non-kinship placements.

In summary, Testa (2005) asserted that the issue of legal guardianship as compared to adoption is a non-issue. In the context of child welfare practice, practitioners are taught to believe that adoption is the “gold standard” of permanency outcomes. It is clear from the literature, however, that guardianship, as opposed to adoption, is the preferred permanency outcome for children in kinship homes. The underlying clinical implication for this is that many kin families see adoption as severing ties with the extended and biological family system, whereas legal guardianship assures greater fluidity of relationships between all family members.

**Placement stability**

In a seminal publication on permanency and foster care, Australian researchers Barber and Delfabro (2006) articulated the sometimes tragic consequences of a child’s entrance into the foster care system. Their study employed a diverse, mixed-methods design \((N=235 \text{ children in foster care over 12 months})\), exploring the quantitative and qualitative perspectives relating to these children. One of the key findings was that children who experienced a placement breakdown within the first four months of foster care went on to become members of what the authors termed the “serially evicted” cohort of children—children who were likely to face a large number of placement moves or disruptions.
The research related to placement stability for children placed in kinship homes appears positive. Webster, Barth and Needell (2000) conducted a large (\(N=15,517\) children), eight-year longitudinal study that highlighted the permanency outcomes for children in kinship care. The research found that children placed in kinship homes were less likely to experience placement disruption than those in foster placements. More recent research from Illinois found that 82% of children in kinship homes remained in their placement after one year compared to 65% of children in foster care (Rolock & Testa, 2007). Unfortunately, the statistics provided by Rolock and Testa do not identify whether the lower placement stability rates in foster homes is attributed to children returning to their birth homes. This could be a causative factor, because other studies (Geen, 2003a, 2003c; Rubin, Downes, O’Reilly, Mekonnen, Luan, & Localio, 2008; Scannapieco & Hegar, 1999) have suggested that children in kinship care are less likely to return home. In a study on kinship care in the UK, Farmer and Moyers (2008) determined that the average duration of a kinship placement is four years and nine months as compared to three years and 11 months for foster placements. The emerging evidence does therefore suggest that children in kinship placements are likely to attain greater placement stability than those living in foster care, and this is a most desirable outcome for vulnerable children.

Terling-Watt (2001) explored the barriers to permanency in kinship homes. The mixed-method study design employed a sample population of 2,515 family reunification cases in Texas. It included a qualitative analysis of interviews with 26 child welfare professionals to ascertain the factors that had contributed to placement disruption in kinship homes. Contributing factors identified were: (1) biological parents interfering with the kinship placements; (2) caregivers who are challenged with multidimensional issues, which included lack of social support and age and health limitations; and (3) the requirements of special-needs children extending beyond the capacity of aging kin caregivers.

An evaluation of the KEEP (Keeping Foster and Kin Parents Supported and Trained) program (Price et al., 2008)—situated in San Diego, California—included a sample population of 700 children in care placements (34% kinship and 66% non-relative). Using a randomized controlled trial design, 50% of the sample population entered the KEEP program, which is intended to mitigate the effects of placement disruption for
children who have entered child welfare care. The analysis of the program determined that KEEP reduces the impact of multiple moves on children in the system. This program is of note for the Ontario child welfare system, as so many of our children experience placement instability.

The Campbell Review’s findings on the issue of placement stability were striking (Winokur et al., 2009): children in foster care were 2.6 times more likely than those in kinship placements to experience three or more placement changes (Winokur et al, 2009). Child welfare agencies must be aware of this important statistic as this information alone causes us to pause and consider the placement stability factor for children entering the child welfare system.

**Worker stability**

One of the issues emerging in the qualitative interviews with participants was the perceived linkage between placement stability for children and youth and worker retention. In the literature on the subject of worker retention, there is minimal discussion of the perceived links between worker retention and placement stability. Current research on worker retention tends to focus on the individual and organizational characteristics of child welfare staff members (Depanfilis & Zlotnik, 2008; Glisson & Hemmelgarn, 1998; Yankeelov et al., 2009), yet none of the recent studies has focused on the links between worker stability and permanency outcomes for children in care. Despite this, the Crown ward reviewers in Ontario record the number of workers that children and youth have in their lifetimes. In this dissertation, youth were asked how many workers they had had since entering care, and worker turnover was an important theme that emerged in the data analysis of the three groups. The potential links between worker turnover and placement stability for children and youth is an interesting issue that could be explored in future studies.
Service utilization

The Campbell Review explored service utilization from the perspective of three specific variables: mental health, physical health and developmental services (Winokur et al., 2009). Of these three outcome variables only mental health services showed any significant differences, indicating that children in foster care were more likely to utilize mental health services as compared to children in kinship placements (Winokur et al., 2009). The Campbell Review did not include any speculation as to why service utilization by foster children is higher than by children in kinship homes, but underlying clinical hypotheses could be that foster families are better trained to recognize issues or that kin families are simply more accepting of children’s behaviour and less likely to seek support from professionals on issues related to mental health concerns.

Child welfare worker, caregiver and youth perspectives

Workers

Studies have examined child welfare professionals’ perspectives on kinship care. In a US study, Peters (2005) surveyed workers on their beliefs about kinship care using a content-analysis qualitative study with a sample size of 63 front-line child protection workers. On the positive side, workers indicated that kinship care helped to reduce the stigma for children entering care and kept them from being labelled “foster children.” These same professionals reported that the “fruit doesn’t fall far from the tree,” indicating a presumption on behalf of the workers that extended family networks will demonstrate the same types of maltreating behaviours that have been demonstrated by the biological parents. In another US study, Beeman and Boisen (1999) used quantitative measures in engaging a large population of 261 child protection workers from both urban and rural settings. The findings were intriguing: the authors determined that most child protection workers felt that kinship care was adequate, but a “second-class” option to the more desirable foster home placement. In addition, 42% of respondents felt that kinship care placements were more difficult to supervise. This highlights the need to educate child welfare professionals about the complexities of kinship placements.
Caregivers

The perceived role of caregivers appears to differ across cultures. In a qualitative study, researchers conducted a cross-cultural comparison of kin caregivers’ views of their roles (Hayslip et al., 2006). The sample population included 75 US-born and 54 Latino grandparents. The research examined the specific experiences of Caucasian and Latino grandparents from the USA, and found striking differences in the two groups’ understanding of their roles. Grandparents of Mexican origin saw caring for their grandchildren as an extension of their roles as parents. They did not view the role of a full-time caregiver as an imposition—rather, they saw their role in parenting their grandchildren as an extraordinary opportunity to positively impact the lives of these children. In contrast, Caucasian grandparents did not view their roles as kin caregivers as a normal part of their everyday experience, and regarded full-time caregiving as more of a burden. Although the authors did not provide a succinct section on directions for future research, this study does highlight the need to examine cross-cultural differences in perceptions about parenting and grandparenting.

One seminal Canadian qualitative study located in Ontario has provided an excellent perspective of both the grandparent caregiver and child protection worker (Gladstone & Brown, 2007). The study had a large population of 63 grandparents and 21 social workers. The study examined the factors that promote a positive working relationship between grandparents and child welfare personnel. The findings provided substantive idea generation for this dissertation and included an exploration of what constitutes a positive working relationship between grandparents and workers, which “can be viewed as an exchange of resources” (Gladstone & Brown, 2007, p. 1,439). This study has striking similarities to the study design of the current dissertation and can be used as a “blueprint” for the emerging conceptualization of this researcher’s data analysis.

Children and youth

Children’s perceptions are equally important to those of child protection workers and caregivers. Chapman, Wall and Barth (2004) employed quantitative methods to elicit information about the differences between the two distinct placement options of kinship
and foster care. This exploratory US study was based on a sample population of 727 children who had been in an out-of-home placement for one year at the time of the research. Children in kinship placements reported feeling closer to their caregivers than children placed in group care. In addition, children in kinship homes felt that their (kin) caregivers were more emotionally connected to them, as compared to children in foster placements. This study was unusual in the researchers’ capacity to analyze the unique perspectives of children and youth residing in out-of-home care.

In UK study by Broad, Hayes and Rushforth (2001), the researchers interviewed 50 youth residing in kinship homes. The positive themes that emerged included feeling safe, maintaining links with family and siblings, feeling settled and well cared for and maintaining their cultural or racial heritage. An interesting negative theme emerged from some youth who had brothers or sisters residing in parallel foster care placements. There was a perception that these siblings had greater access to material possessions because of their placement in foster care. The youth in kinship placements perceived foster care to be better subsidized than kinship homes. This study did not compare the perceptions of youth residing in kinship homes to those residing in foster homes. However, it does provide valuable insights into the unique attributes of these extended-family placements.

**Family relations**

**Maintaining sibling connections**

In research undertaken by Webster et al. (2000), there was a larger proportion of sibling placements in kinship homes as compared to foster or group care settings. Emerging research suggests that sibling placements create a protective “layer” for children entering care that results in a reduced likelihood of placement disruption. In a review of research on sibling relationships, Hegar (2005) provided important insights into the role of siblings in the context of child welfare practice. This review of the literature determined that some studies reported fewer placement disruptions for children who were placed together with their siblings (Boer & Spiering, 1992; Drapeau, Beaudry, & Charbonneau, 2000; Thorpe & Swart, 1992). Although evidence regarding the role of sibling placements in the context of placement stability for children is still lacking, particularly
within the context of kinship homes, the preponderance of research on child welfare placements in general suggests that siblings who are placed together stay together (Hegar, 2005). It is clear that sibling relationships are a foundational issue when discussing child welfare placements.

There is clearly a need for studies on sibling placements from the perspective of child well-being and Canadian child welfare placements. In a qualitative study, Shlonsky (2008) conducted two focus groups with 23 youth at one child welfare agency in southwestern Ontario. Many of the youth articulated a profound sense of loss at being separated from a sibling when entering care, and said that busy child welfare professionals often found it challenging to maintain access between siblings.

**Impact of caregiving on the biological family**

One of the emergent issues that study participants have addressed is the impact of fostering on the biological family of foster caregivers—more specifically, the biological children. This issue has been explored on a minimal level in the literature as it pertains to foster children, but literature have been sourced with respect to the impact of caregiving on biological children in kinship placements. The current literature exploring the impact of foster caregiving on biological children has found that considerable tension exists for foster parents aspiring to help vulnerable children in the world, while at the same time attempting to maintain a semblance of equilibrium for their own biological children (Younes and Harp, 2007). In another qualitative dissertation study, a researcher explored the impact of fostering on 21 biological children from 11 different families. The research found that these children reported higher levels of self-esteem and competence and, in many instances, a desire to foster children when they entered adulthood (Diepstra, 2007). There does not appear to be any recent research that has explored the impact of caregiving on kin biological children, and this is an area that requires more study.

**Visitation (access)**

In a study performed by Berrick, Barth and Needell (1994), the researchers found that kin families were more apt to promote visitation between the parents and extended family network as compared to foster family situations. The study explored many issues related
to foster and kinship placements and used a large population of 600 children (40% kin and 60% foster) from a large dataset overseen by the University of California at Berkeley-Foster Care Database. The response rate for this study was low at just 28%. A study conducted by Davis, Landsverk, Newton and Granger (1996) also engaged a large sample population of 925 children and case files, and found that more visiting occurred in kinship homes. The Davis et al. study failed to delineate the proportion of kin cases included in the research. Both studies are now dated. Visitation in kinship and foster homes was a repetitive theme in the current study findings. As a result, more reflection and research is required on this subject.

**Diverse perspectives**

**Aboriginal and First Nations children and families**

The Canadian Incidence Study of Reported Child Abuse and Neglect (Trocmé et al., 2005) determined that Aboriginal children are four to six times more likely to be taken into care than children in the general population. A pioneering study by Fuller-Thomson (2006) highlighted some important findings about Canadian Aboriginal grandparents caring for grandchildren. Using census data, the study concluded that, compared to the general population, these caregivers are more likely to be female (64% vs. 58% in the general population) and less likely to be employed (29% vs. 40% in the general population). In addition, 42% of First Nations caregiver grandparents had an income of less than $15,000 per annum. These findings correlate with similar research of American Indian grandparents by Minkler and Fuller-Thomson (2000). These two studies are striking in their parallel findings of kin grandparents caring for children in relative poverty.

A report by Wright, Hiebert-Murphy, Mirwaldt and Muswaggon (2008) examined a kinship care program located on a Cree reserve in northern Manitoba. Using a mixed-methods design, the research team interviewed children and youth (N=18), child protection staff members (N=22), kinship foster parents (N=15) and a community stakeholder. The researchers determined that 75% of children remained in their kinship homes four years after the initial placement. This study demonstrates the resilience of kin
families and the capacity of extended-family networks to provide stability for children requiring out-of-home placements.

**Summary and implications**

**Summary of research findings**

This literature review has covered a vast array of topics and evidence, but the most substantive findings suggest the following: (1) children in kinship homes experience fewer placement disruptions when compared to children in foster care (Farmer & Moyers, 2008; Webster et al., 2000); (2) behavioural, emotional and mental health outcomes are better for children in kinship homes than for those in foster care (Farmer & Moyers, 2008; Leischeld et al., 2007; Tarren-Seeley, 2008; Timmer et al., 2004), but overall physical well-being outcomes are unclear (Carpenter & Clyman, 2004; Dubowitz et al., 1992); (3) maltreatment rates are the same or lower in kinship homes as compared to foster care—however, future research is required to closely examine other potential confounding issues, such as higher levels of surveillance in foster homes, child behaviour and the training and support provided to caregivers, as these factors may affect maltreatment reports in both types of placements (Hunt, 2009; Winokur et al., 2008); (4) child protection workers believe that kinship homes reduce stigma for children, while potentially increasing the level of risk to the child placed in the home (Peters, 2005); (5) children report a greater sense of overall well-being when placed in kinship homes (Broad et al., 2001; Messing, 2006); and (6) we continue to know very little about the efficacy of screening tools (SAFE) in relation to kinship assessments.

Overall, the preponderance of evidence suggests that outcomes for children placed in kinship homes are fairly positive when compared to children in non-related care (Winokur et al., 2009). The authors of the Campbell Review echo these sentiments about positive outcomes related to kinship placements, but caution that many of the studies that explore such placements contain considerable methodological design flaws. Thus, the interpretation of results to date must be treated with caution and far more research on kinship care outcomes is required.
Implications for future research

This dissertation study has the potential to add knowledge to the Ontario child welfare field related to kinship and foster care placements from the following perspectives. First, this study adds to the body of qualitative research (which is currently minimal), particularly from the perspective of youth in care. Second, it adds to the emerging research on the subject of kinship care from a Canadian perspective. And third, it provides important linkages to clinical practice and policy, but also provides a framework for creating a body of Ontario research on the subject of kinship placements.
Chapter 3
Theoretical Framework

Introduction

This doctoral study examines three groups—caregivers, child protection workers and youth—in the context of child welfare services. A complex set of issues is at play for every study participant involved.

A set of interrelated theoretical perspectives frames the analysis for this study. This chapter provides the reader with a summary of each of the following subjects: (1) an outline of the multidimensional framework; (2) an overview of attachment theory; (3) a description of the ecological framework; (4) an overview of the foundational theory, resilience theory; and (5) an exploration of the researcher’s substantive epistemological perspective.

Attachment theory

Examination of child welfare placements in this study reveals the complexity of attachment issues from the perspective of the child—both within the context of the family of origin and also within the new placement, whether that is stranger or kinship care. One of the fundamental overarching questions to be addressed in this study is whether children in kinship homes develop stronger attachments with their caregivers than children in foster placements. This may be expected, given the relational attachment and ties of extended family that cause many to view kinship homes as superior to placements with strangers who have no pre-existing relationship with the child.

John Bowlby, the pioneer of attachment theory, saw the development of primary attachments within the context of a biological heritage—to seek a primary relationship ensures survival and adaptability within the context of the larger world (Bowlby, 1969, 1982, 1979, 1980; Haight, Kagle, & Black, 2003). Attachment theory, at its core, assumes that all children will form an attachment to their primary caregiver. Unique to the fundamental principles of attachment theory is the notion that “children are thought to become attached whether their parents are meeting their physiological needs or not”
(Cassidy, 2008, p. 5). Therefore, the caregiver need not meet all of the child’s needs, but simply the physical presence of this individual is required to promote an overall attachment. This is an important concept to grapple with: attachment theory does not presume a nurturing relationship; rather, the development of a relationship for better or worse. This has important relevance for the data set that is being examined in this dissertation.

Bowlby’s interest in attachment theory emerged from his work with very young institutionalized children, who appeared “affectionless.” Bowlby’s interest in these children was based upon their inability to relate or connect to others. The children had been emotionally deprived of any kind of primary caregiver, resulting in a diminished capacity to relate to the outside world (Bowly, 1998). In a way, these children would not or could not form relationships with anyone, including a primary caregiver, because of the emotional deprivation that they had been exposed to at a young age.

In 1978, Mary Ainsworth built upon our understanding of Bowlby’s attachment work by developing the “strange situation”—a framework for understanding attachment theory within the context of separation. Ainsworth developed four types of attachment frameworks. These included: (1) secure, where children demonstrate an optimal attachment (Neckoway et al., 2007); (2) anxious-avoidant, where children show a lack of marked response to the re-entry of the primary caregiver; (3) anxious-resistant or ambivalent, where children demonstrate little interest in exploring their environment; and (4) disorganized, where children show no cohesive orientation to the primary caregiver. The disorganized framework typically represents children who have been abused or neglected. Children with this type of attachment style are challenged to elicit comfort and attention from their caregivers (Haight et al., 2003). Children who are abused or neglected are at much higher risk of forming an attachment disorder, including disorganized attachment. Some of the children who participated in the current study demonstrated elements of disorganized attachment, probably due to considerable deprivation in their early years and subsequent moves to various different placements.
In the article “Attachment Beyond Infancy,” Ainsworth (1998) explored the relationship between the child and other emerging primary relationships over the life course. These include extended family networks, but also include sibling relationships. Ainsworth pointed out that in some situations older siblings may play the role of the primary caregiver, and indeed the older child may become the primary attachment for younger children in the home. This is an important point to understand for children and youth who may be separated from their siblings when entering substitute care. Separations from siblings can create a rupture in the primary attachment, and so great care must be given towards considering sibling placements in kinship or foster homes.

**Attachment theory in the context of child abuse and neglect**

Ann Masten provided a link between attachment theory and resilience, and posited that the two theories can be intertwined to provide a better understanding of a child’s emerging competence and mastery over his/her environment (Masten & Coatsworth, 1998; O'Connor & Masten, 1984). O’Connor and Masten (1984) detailed an intriguing case study of a young child who had been removed from her mother’s care because of the mother’s untreated schizophrenia. The child went on to be placed in a foster home that provided no security or attachment for this little girl. She began to exhibit signs of autism and was incapable of interacting with the world. She was removed from the foster mother and placed in a hospital setting for further observation, where she began to show signs of attachment to the primary nurse assigned to her case. From there, the child was placed in an adoptive home where she was seen to thrive, flourish and build a strong and healthy attachment to her adoptive parents. This case analysis provides the genesis of hope for many children who are severely abused or neglected. These same children can repair their relationships and move towards healthy attachments with substitute caregivers.

In a study conducted by Egeland and Sroufe (1981), the authors compared a sample of children (\(N=31\)) who had been abused or neglected to a sample of children (\(N=33\)) who had not been neglected. The subjective case histories demonstrated that maternal grandmothers or extended family members played a considerable role in altering the child’s ability to attach to a primary relationship in a secure way. In a review of the
Poelhmann (2003) examined the research related to grandparents raising very young children. The key finding from the review of the literature was that secure attachments are transmitted across generations, whereas this is not necessarily the case for insecure attachments. Poelhmann highlighted that it cannot be assumed that because one generation has failed to provide a secure attachment that this casts a shadow of poor attachment styles for generations to come. Therefore, the evidence dispels the preconceived notions of professionals that the “fruit doesn’t fall far from the tree”; an important argument related to the recruitment and retention of kin families.

Rycus and Hughes’ text *Field Guide to Child Welfare Practice* (Volume 1V) (1998) provides the reader with a framework for understanding the children served in child welfare practice with regard to the overarching theoretical framework of attachment theory. The authors offered a framework for understanding how, despite a potential rupture in the initial caregiving relationship, children and youth who have been abused or neglected can still go on to form healthy primary attachments. These children have the potential to recreate a strong and healthy attachment if they are provided with a stable and secure home environment with the new primary caregiver, whether that is a foster parent or kin caregiver. Rycus and Hughes provided a framework for child protection workers to assist caregivers in repairing ruptured attachments by promoting a stable, secure and loving home environment.

**Attachment theory and foster care**

Gauthier, Fortin and Jéliu (2004) provided an important case analysis of a Montreal clinic dedicated to assessing attachment disorders in children who have suffered maltreatment. The authors postulated that children and youth can develop strong psychological bonds with foster caregivers that, when ruptured, can create considerable trauma for the child. From their vantage point of observing many separations from foster parents as primary caregivers, the authors saw children suffering trauma because the separation was usually a result of a court decision. The authors saw the children or youth who reside in substitute care as having the potential to develop only a fragile attachment towards foster caregivers because of the potential lack of permanency and stability provided by such placements. Foster care is not seen as a permanent solution for children, and indeed children and
youth sense the temporary nature of such placements, thus creating potential frictions in attachments towards the primary caregivers. However, the authors did not explore the potential for extended family to create a stronger bond with children removed from the parental home.

In their book *Children in Foster Care* (2004), Barber and Delfabbro explored the concept of attachment theory in relation to parental visitation of children in foster care. Many child welfare practitioners have a strongly held belief that parental visitation strengthens the bond between the parent and child. In a review of the literature by this researcher, it was determined that there is contradictory evidence to suggest that visitation improves the overall attachment between parent and child (Barber & Delfabbro, 2004; Fanshel and Shinn, 1978; Poulin, 1985). Another longstanding view of practitioners is that the greater the number of visits, the more firmly entrenched the attachment will be between parent and child, which will eventually lead to reunification. Although some, albeit dated, evidence supports this clinical belief (Fanshel, 1975), Cantos, Gries and Slis (1997) highlighted that many other confounding factors can lead to reunification. The authors stated, “It could be that those parents who are visiting more frequently are better adjusted than those parents who visit less frequently…the relationship between visiting and discharge may not be a causal one” (Cantos, Gris, & Slis, 1997, p. 311). An exploration of how attachment theory can be situated in the context of child welfare visitation is a crucial aspect to be explored.

**Challenges to attachment theory**

The theoretical framework of attachment theory is not without controversy. The theoretical basis of attachment theory is based on a linear representation of mothers and nuclear families as the complete representation of family systems. There is a limitation to attachment theory in that it has the potential to dismiss the cultural norms and expectations of families from divergent backgrounds. Neckoway, Brownlee and Castellan (2007) explored attachment theory from the perspective of aboriginal culture. In this conceptual piece, the authors posited that the traditional conceptualization of attachment theory does not mesh with aboriginal culture, which views parenting from a community-based perspective instead of the traditional mother–child dyad. Indeed, much of
aboriginal parenting views the family system from a global and holistic perspective, with “parents” as individuals within the larger family system.

**Ecological framework**

The ecological framework is a longstanding theoretical paradigm that has been applied to the concept of family systems within the context of the overall social environment (Anderson, 1983; Arditti, 2005; Schweiger & O’Brien, 2005; Surbeck, 2000). Situated in the context of the current study, kinship and foster care placements must be positioned within the context of families and larger social networks. A kinship care family, for example, can include many different parties—such as the child, the kin caregiver, the biological parent, members of other extended family networks and external community resources. One must view the substitute caregiving family relationships as multifaceted systems situated within the context of a larger social network.

The ecological framework perceives the family as a social organism that interacts with the larger environment and community (Germain, 1980; Germain & Gitterman, 1996). In essence, this theoretical framework situates the family system as having the potential to grow and flourish within a social environment that nourishes the family and allows it to “create roots” and develop. If, however, the environment is such that the family does not “take root” then this can lead to many stressful individual and family adaptation difficulties. As a rose bush requires sunlight and soil that is full of nutrients, so too does the individual person or family system require an environment that is suitable for growth and development. This metaphor can apply to families who possess limited social supports that do not allow them to flourish within the context of the larger community setting. The ecological perspective provides a framework for viewing the individual and family within the larger social context. In essence, the ecological approach gives one the perspective to see the “big picture” for the individual and family. This perspective is essential if we are to truly understand and contextualize kinship and foster families.

Ecological perspectives are applicable to kinship and foster families because all children entering these families must in a sense “take root” and become grounded within their new family systems. Each and every child must be located within the context of the larger
family system—systems that shift and change depending on the various issues at play both within the family system and the larger environment. The evolution of the family system is seen as a dynamic and fluid process in which the individual and family are continuously changing. It is from this perspective that we must come to understand the ever-changing landscape of child welfare placements.

Bronfenbrenner, the pioneer of the ecological framework, identified four components of this theoretical paradigm: the microsystem, mesosystem, exosystem and macrosystem (Bronfenbrenner, 2005). Table 3.1 defines each term and suggests how it applies to the concept of child welfare placements.
**Table 3.1.** The four components of the ecological framework.

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
<th>Child welfare placements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Microsystem</td>
<td>Typically seen as the individual and the family system. Parental functioning is a considerable concern (Arditti, 2005).</td>
<td>Child welfare placements contain a multitude of various microsystems, such as the individual child, his/her caregiver, biological family members and other extended family members.</td>
</tr>
<tr>
<td>Mesosystem</td>
<td>Seen as the interrelationships among the individual, family members and their overall social system.</td>
<td>In terms of child welfare placements, the mesosystem may include the child protection worker, the local child welfare agency, the school and other recreational and social service agencies involved with the family.</td>
</tr>
<tr>
<td>Exosystem</td>
<td>The overall social system that may or may not contain issues related to the microsystem (child and family).</td>
<td>This construct involves the larger child welfare system and its interaction with placements on a large scale. An example of this is the interaction between kin families and child welfare agencies as a whole.</td>
</tr>
<tr>
<td>Macrosystem</td>
<td>Typically seen as involving social policy.</td>
<td>The macrosystem involves provincial and federal child welfare and social policies that affect child welfare placements.</td>
</tr>
</tbody>
</table>
The ecological framework is frequently employed in the identification and analysis of issues that have social relevance and that include child-welfare-related subjects (Anderson, 1983; Arditti, 2005; Schweiger & O’Brien, 2005). In a doctoral dissertation, Surbeck (2000) provided a conceptual framework for understanding child welfare placements within the context of the ecological approach. Specifically, Surbeck highlighted the flexibility of this theoretical approach in the process of understanding the unique clinical characteristics of the child, the family and the transactional nature of systems.

Employing the ecological perspective in relation to kinship and foster care has considerable benefits as these familial terms describe the composition of family members within the context of the broader social environment. The ecological matrix allows one to examine the transactional pattern of relationships between all individuals within the micro- and mesosystems (Gitterman, 2006). This transaction of relationships is an essential concept for analysis in the current dissertation in terms of the reciprocal relationships between workers, caregivers and children.

An underlying concept of the ecological perspective is the “person–environment fit.” This concept was examined by Claudia Coulton in her dissertation analysis, wherein she developed a social work intervention tool that explored the person–environment fit and tested this instrument with individuals who were being discharged from a hospital setting (Coulton, 1978). This landmark dissertation provided a framework for analyzing social work intervention practices that could, in turn, be applied to our understanding of children and their fit within the context of the child welfare placements—and, to a larger extent, the child welfare organization supervising the placement. These concepts will be applied later in the analysis and discussion of the findings.

A point to consider when utilizing the ecological perspective is the analysis of power and exclusion. This issue is not directly articulated in the literature. In the book *Generalist Social Work Practice: An Empowering Approach* (Miley, O’Melia, & DuBois, 2001), the authors highlight the structural elements of this perspective: “Hierarchy indicates which individuals and subsystems in a particular system have status, privilege and power” (p.
Implicit in this statement is the notion that some subsystems have greater power and authority than others. This power imbalance is not conceptualized in the literature, but it has considerable implications for understanding child welfare placements. It is essential to understand that the child welfare system has control over kin caregivers and foster parents with respect to the allocation of support funds. If kin caregivers are individuals who already feel financially, socially or personally oppressed then they may be unable to advocate for financial remuneration (Hayslip, Baird, Toledo, Toledo, & Emick, 2006; Henderson & Cook, 2006; McPhatter & Ganaway, 2003; Mederos & Woldegiorguis, 2003). The ecological framework provides a structure and foundation for understanding the elements of child welfare placements.

**Resilience theory**

Resilience theory has been chosen as the foundational theoretical framework for this research study because of its positive focus on why is it that certain individuals, particularly children, seem to develop and thrive despite conditions of severe abuse or neglect. This theoretical framework moves beyond the medical model, which diagnoses individuals and treats their characteristics as pathological. Instead, the framework views people (both children and adults) as having the capacity to overcome great adversity. This perspective is useful in efforts to understand issues related to the adversity and subsequent success experienced by some children and youth who have been raised in abusive or neglectful home environments. This theoretical framework can be extended to an understanding of how children and youth cope, grow and develop in out-of-home placements in either foster or kinship care.

In his book *What Works in Building Resilience?* Tony Newman (2002) posited that the concept of resilience is a very salient matter to be addressed in the context of child welfare practice. His supposition was that it is not sufficient merely to understand children and youth who have suffered and who continue the cycle of violence as they develop into adults. Instead, Newman viewed children and youth from a perspective that supposes that there are certain elements within individuals, and also within their environments, that allow them to grow and thrive despite high levels of stress, trauma and other adversities. This depiction of people within their environment links back to the
overarching concepts of the ecological framework. In essence, the field needs to evolve from its perspective on risk to a more strengths-based approach that considers why some children can continue to succeed despite great adversity.

**Defining resilience theory**

The literature highlights the concept of resilience not as an individual characteristic, but rather as a “two-dimensional construct that implies exposure to adversity and the manifestation of positive adjustment outcomes” (Luthar, Cicchetti, & Becker, 2000, p. 858). This notion of resilience as being a two-dimensional construct is a fundamental tenet of resilience theory. Newman (2004) extended our understanding of resilience as a process. Newman viewed resilience as a complex interaction between risk and vulnerability on the one hand and environmental protective factors on the other, eventually creating the “perfect storm” that generates a resilience process for an individual. The interaction does not involve the individual or the environment in isolation, but is rather a fluid interaction between the two. The word “resilient” is a term used to define individual characteristics, whereas resilience is a process that occurs between an individual and his/her environment.

Ann Masten, one of the most prolific thinkers and writers about the concept of resilience, has defined the concept as “A class of phenomenon characterized by good outcomes despite serious threats to adaptation or development…it is an inferential and contextual construct” (2001, p. 206). Masten argued that the concept of resilience includes very distinct properties: first, there is or has been a serious threat to the child’s development or “demonstrable risk” (Masten, 2001); and second, “the quality of adaptation is good” (Masten & Coatsworth, 1998) despite exposure to a considerable threat or adversity.

The definition by Masten highlights two key features of resilience: adversity or risk and positive adaptation. In their article “The Construct of Resilience: A Critical Evaluation and Guidelines for Future Work,” Luthar, Cicchetti and Becker (2000) highlighted the distinction between these two constructs. Adversity is seen as negative or challenging life circumstances and what Masten has also referred to as “risk,” whereas positive adaptation relates to “behaviourally manifested social competence or success at meeting stage-
salient developmental tasks” (Luthar et al., 2000, p. 858). Positive adaptation in a young child can be operationally defined as a secure attachment to an adult (Luthar et al., 2000, p. 858). Risk to children has the potential to influence their developmental gains. In turn, children, in the context of their surroundings, are able to embark upon a process of positive adaptation that allows them to develop normally despite previous adversity. These two elements, intertwined, allow the process of resilience to unfold.

Underlying this complex process of resilience are protective factors that mitigate the effects of the adversity. Vulnerability for children or youth can manifest in an unsafe or insecure living situation, poverty or even physical disability. Protective factors that can modify risk in a positive direction fall into three main categories: (1) community (e.g., a low-crime, highly engaged community); (2) family (e.g., good parenting skills by parents or kin/foster parents, supportive family networks and financial resources); and (3) individual (e.g., high intelligence, social charm) (Luthar et al., 2000, p. 859). Masten and Powell (2003) provided specific examples of protective factors that enhance the process of resilience, including good schools and close relationships with competent parents. Examples of individual characteristics that can influence resilience outcomes for children include self-perception and self-worth, temperament and personality (Masten & Powell, 2003, p.13).

In their book *Child Development for Child Care and Protection Workers*, Daniel, Wassell and Gilligan (1999) provided a working definition of resilience theory within the context of child welfare practice: (1) resilience is seen as normal development for a child who has been exposed to abuse or neglect; (2) adversity is seen as any threat, typically abuse or neglect, that poses a risk to the child’s normal development; and (3) a protective environment can be viewed as a way of ameliorating the damage caused by exposure to trauma. This possible amelioration is particularly important in relation to out-of-home placements (i.e., kinship or foster care placements).

Luthar, Cicchetti and Becker (2000) posited that the concept of resilience can be an elusive construct to define operationally within the context of study designs. A foundational article by these authors described the requirement that researchers clearly define the
construct of resilience within their research design prior to moving forward with data collection. The definition process involves the following tasks: the research design must state specifically what the concept of resilience means within the context of the study; and the researcher must be aware of the characteristic of resilience as a complex phenomenon that does not remain static as a child or youth grows and develops (Luthar et al., 2000). A third requirement is that the findings must be situated within the context of a well-defined theoretical framework that denotes the complexities of resilience and the accompanying protective factors that mitigate the adversity experienced by individual children or youth (Luthar et al., 2000).

**Developmental assets**

Upon further exploration of the complexities of resilience theory is the notion of developmental assets. Developmental assets are, “individual attributes, self processes, or ecological supports that have been consistently demonstrated to lessen risk and promote positive developmental outcomes (Filbert and Flynn, 2010, p. 5). Using a strengths-based approach, developmental assets view the young person as engaging in pro-social behaviour and relationship building to forge greater assets that result in more positive developmental outcomes (Scales, 1997, 2006).

The original concept of developmental assets was first constructed by Benson (1997, 1993, 1995), who conceptualized these assets as both internal and external in nature. Internal assets include: (1) commitment to learning, (2) positive values, (3) social competencies (planning and decision-making skills), and (4) positive identify. External assets include: (1) support (care and communication by caregivers), (2) empowerment, (3) boundaries, and (4) constructive use of time. Both internal and external assets link to the overarching and strengths based approach of resilience theory that view the individual within their environment as having and building the capacity both internally and externally to forge the core elements of resilience.

**Limitations to resilience theory**

Concerns about the limitations of resilience theory are valid, particularly in light of the needs of children in care. One limitation arises from the application of the theory: “The
question, however, remains as to whether children become resilient because they have been helped to cope better, or whether they cope better because they are inherently resilient” (Newman & Blackburn, 2002, p. 9). The essential dilemma is which comes first, “the chicken or the egg,” when it comes to understanding the complexities of resilient children. This is the main problem involved in application of the concepts of resilience theory, particularly in assessing the situations of families with whom children are residing.

An underlying but central tenet in child welfare practice is the need for permanency for children and youth. Within the realm of child welfare practice, this concept relates to placement stability, providing a secure and stable environment that facilitates a secure attachment between the child and the parental figure in the home (Cummings Speir et al., 2000). Robbie Gilligan (2006) used the concepts of resilience theory to explore the notion of permanence as a protective factor in a child’s life. The concept of permanence is explored in the findings and discussion chapters of this thesis.

**A resilience framework**

Luthar, Becker and Cicchetti (2000) argued that a resilience framework is required to conduct research or intervention programs using such a theoretical paradigm. The authors stated that a resilience framework contains the following key features. First, a focus on positive outcomes despite emerging behavioural issues or problems for the child; and second, a commitment to understanding the underlying effects of both vulnerability and protective factors. This framework is an important aspect to consider when developing interviews with caregivers, children and child protection workers. In particular, analysis needs to focus on the latter point—that is, to develop an understanding of the underlying effects of both vulnerability and protective factors.

The generation of data from the vantage points of caregivers and assigned workers has also contributed to an understanding of how resilience, adversity, protective factors and the types of placements play a part in shaping the individual characteristics of children and youth placed in either kinship or foster placements.
A multidimensional framework

It is important to understand how these three theoretical frameworks (attachment and resilience theories and the ecological framework) “hang together” to provide an overarching understanding of the complexity of issues at play in this study. At its core, vulnerable children and youth must attach to some significant other, whether it be their parent, substitute caregiver, or other adult individual in their life.

Through the perspective of attachment theory, we can appreciate the unique struggles and challenges that exist for children in care. Attachment theory provides an important contribution to our overall understanding of how kinship and foster placements contribute to a child’s sense of stability and attachment. Each and every child welfare placement is contained within the context of a larger family and community system—therefore, the study must be situated within the framework of the ecological framework. The ecological framework situates the child and family within the context of the broader community and society. Resilience theory situates our understanding of why it is that some children, and to an extent some caregivers, seem able to rise above adversity and continue to move forward. This study’s analysis of children-in-care interviews will demonstrate the challenge for youth who have been separated from their primary caregivers and required to move to different homes.

In the book *Promoting Resilience in Child Welfare*, Barber (2006) explored the intersection of resilience theory with the ecological perspective. He suggested that resilience must be examined from the perspective of the individual, but also within the context of the individual and his or her environment: “The ecological perspective forces us to recognize that the promotion of resilience is about much more than individuals; it is the product of the interaction between psychological traits, innate biological imperatives, and inconstant social forces” (p. 421).

In essence, one theory cannot totally explain the subsequent findings and analysis in the current dissertation. The myriad of issues are complex and, therefore, various perspectives must be applied to the divergent ideas, thoughts and issues that emerge from this analysis of three distinct but interconnected groups of workers, caregivers and youth.
The foundation of the multidimensional framework is the interplay between all three perspectives. The findings, discussion and conclusion chapters will provide greater delineation of how this multidimensional framework is operationalized.

Figure 3.1 depicts the theoretical framework that views attachment and resilience theory as being situated within the context of the larger community and society; hence, the desire to nest these two models within the context of the ecological framework.

**Figure 3.1.** A visual representation of the multidimensional framework.
**Epistemological stance**

The epistemological perspective used for this dissertation is social construction. In their book *The Social Construction of Reality: A Treatise in the Sociology of Knowledge*, Peter Berger and Thomas Luckmann (1966) explored the underlying tenets of social construction. The authors asserted that, “reality is socially constructed and that the sociology of knowledge must analyze the processes in which this occurs” (Berger & Luckmann, 1966, p. 1). In essence, these authors stipulate that individuals within society must follow institutionalized norms of how to behave and which rules to follow. Society, and in turn, institutions create frameworks by which organizations and institutions operate. In the case of this study, child welfare is socially constructed in Canada and within this societal influence, child welfare placements have come to evolve over time.

Social construction within the context of the current study is essential because this research has forced me, the researcher, to analyze the social construction of child welfare placements. Why are children removed from family homes and placed in stranger homes over extended networks? How has the system evolved to view foster care as the optimal placement situation for children, instead of extended family or kith placements? Although the system has shifted its thinking towards a more engaging approach to extended family placements, there continues to be a predominant theme in the child welfare system that views kinship as a second rate option for vulnerable children and youth. It is these issues that fascinate me, the researcher, in terms of how the system has constructed itself largely based on dated thinking and entrenched values and attitudes that suggest that extended family care is second rate option. One of the unusual experiences that I have experienced with doing such research is to stand on the outside and ask questions such as “Why does the system do things this way?” and “Why can’t we screen kinship placements ahead of time?”

In his book *The Social Construction of What?*, Ian Hacking (1999) explored the evolution of social construction and described societal issues, such as anorexia nervosa, as issues that are constructed in a large part by society—in the case of anorexia, by the media’s portrayal of women as obsessively thin. Rather than viewing anorexia as a mental illness,
the concept is set within the backdrop of larger societal norms and values. The same can be said for child welfare placements. In large part, the child system is constructed based on societal values that view child maltreatment as abhorrent and damaging to children and youth. It is the construction of these societal values that makes this particular research study so interesting.

This epistemological perspective of social construction allows me to think “outside the box” and examine ideas, thoughts and issues from a perspective that situates itself on the other side of the traditional patriarchal child welfare paradigm as espoused in the writings of Karen Swift (1995). Although not entirely working within the critical theorist lens of Swift, I do situate myself and this research within a perspective that places social structures at the forefront of my thinking and analysis.

**Summary**

The data set of caregivers, youth and workers requires a multidimensional perspective that encompasses several different theoretical constructs. It is the synergy between the different theories that provides an understanding of the complexities of the issues at play. The contributions of attachment, ecological and resilience frameworks provide a “blueprint” for understanding the unique challenges that exist within the complexity of the three different study participants. Although all three groups differ in their roles, they can all contribute to a unique and positive understanding of the challenges that exist within the context of kinship and foster care placements. My epistemological perspective affords me the opportunity to analyze the emerging data from a sociological and feminist perspective.
Chapter 4
Study Design

Introduction

This chapter outlines the following topic areas: (1) the historical background of grounded theory analysis; and (2) the grounded theory methodological framework. This section also outlines the steps of the research process for this doctoral dissertation. Highlighting the unique design features required to carry out a qualitative study that employs grounded theory methodology with rigor, this chapter describes the “journey” taken to complete this research study.

The chapter begins with an in-depth overview of the evolution and key concepts related to grounded theory analysis as a way of providing the reader with background information to adequately assess the efficacy of this study. The overarching research question to be addressed in this research study is how kinship (in-care) placements compare to foster care placements from the perspectives of youth, caregivers and child protection workers.

A study informed by the concepts of grounded theory

Historical evolution of grounded theory

Barney Glaser and Anselm Strauss are the pioneers of grounded theory as a perspective for developing qualitative research. These two authors began their quest as a way of developing a qualitative research method that was “scientific” in nature and rigor (Charmaz, 2006; Drisko, 2009; Glaser & Strauss, 2007; Morse et al., 2009). Glaser and Strauss sought to “ground” theory using an inductive approach that involves constructing the data to infer new meanings and ideas (Grinnell, 1997).

In 1992, Glaser and Strauss parted ways because they both developed different vantage points on the evolution of how to ground theory within the context of qualitative research (Drisko, 2009; Glaser, 1998). In his book Basics of Qualitative Research, Glaser (1998) asserts that Strauss had removed the essence of grounded theory as evolving from a
constellation of emerging ideas to a more rudimentary or “cookie cutter” way of analyzing data.

Following this “divorce” from his working relationship with Glaser, Strauss forged an alliance with qualitative researcher Julie Corbin, and this partnership further evolved our understanding of grounded theory methodology. Strauss and Corbin (1998) gave rise to terms such as open, axial, and selective coding. The authors contended that when one conducts grounded theory research, one must seek to find the delicate balance of remaining objective while also remaining sensitive to the emerging issues. Strauss and Corbin used the term “waving the red flag,” which means that one “recognizes when one’s beliefs are intruding on the analysis (and to ask the question) what is going on here?” (Strauss and Corbin, 1998, p. 97). The reflective process and analysis is a critical aspect of grounded theory research and requires considerable self-reflection and insight.

**Core concepts of grounded theory analysis**

Grounded theory is a research framework that moves away from the traditional quantitative approach of seeking to nullify an emerging hypothesis (Drisko, 2009; Glaser and Strauss, 2007). Instead the grounded theory pioneers, Glaser and Strauss, sought to create a qualitative typology that “grounds” the development of ideas and theory within the context of the emerging data. Grounded theory (Charmaz, 2006; Drisko, 2009; Glaser & Strauss, 2007; Morse et al., 2009) is a qualitative methodology that views the synergy between the researchers and their emerging data and analysis. This synergy and self-reflection recognizes the importance of understanding the essence of the stories that are brought forward and that one simple study design will never be appropriate. The reality is that conducting qualitative child welfare research is a complex process. From the perspective of Glaser and Strauss, the data forge the emerging concepts and theory.

The central tenet or philosophy behind grounded theory analysis is to see the study design and analysis as evolving—that one is constantly comparing, analyzing and returning to issues to determine if there is another facet to be considered. The process of analysis also relates to the researchers themselves—they are part of the emerging equation and cannot be seen as being entirely objective or divorced from the reality that they are exploring.
**Understanding grounded theory**

In order to conceptualize the basic tenets of the current study, it seems important to situate the study design within the fundamentals of what it means to conduct a grounded theory study. Grounded theory, as an overarching concept, views qualitative research as being iterative in nature. There is no predetermined hypothesis to be tested but, rather, an examination of an open-ended researcher query. It is from the development of the research findings that one can distil the emerging concepts and develop an overarching meta-theory and analysis.

*Theoretical sensitivity* is the intersection between the researchers and what they bring to the subject to be researched. Glaser and Strauss (2007) viewed *concept* as a way of understanding the lens and perspective of what researchers bring to the study from both a theoretical and personal perspective. In contrast, *reflexivity* is the actual self-reflection of researchers to better understand how their own personal experiences and social location can contribute to the overall meaning and construction of the study (Charmaz, 2006).

The sampling framework and approach in grounded theory is vastly different from the quantitative paradigm. Using an inductive rather than deductive approach, grounded theory uses a developing rather than prescribed sampling framework. There can be no set or prescribed data set because the emerging data give the researcher clues as to where to collect data that are rich in meaning and perspective. It is the single interview (*N*=1), not the number, that dictates the emerging issues and substantive themes. Iterative sampling, or theoretical sampling, is the process by which the researcher conducts interviews and discovers a potential theme or issue. The data lead the researcher to return to the field and collect more data that might not only confirm but also have the potential to disconfirm this potential “theoretical hunch” (Charmaz, 2006; Drisko, 2009; Glaser & Strauss, 1992). Glaser and Strauss (1992) viewed theoretical sampling as “collecting data based on emerging categories” (p. 61).

Glaser and Strauss have contended that the use of theoretical sampling includes the process of re-interviewing participants to further enhance the emerging themes that surface through the initial analysis of the interviews. The goal of this iterative approach
to sampling is to recruit a sufficient data set, but also to go through the process of redefining and testing theories. One of the foundational premises of the original Glaser and Strauss model was the belief that the researcher should obtain a diverse rather than homogeneous data set: “He goes out of his way to look for groups that stretch diversity of data as far as possible” (Glaser & Strauss, 1992, p. 61). Given the nature of qualitative research and the desire to understand and uncover issues of social relevance, this model of research is closely linked to the philosophical values of social work practice. In the current study the data set exemplifies diversity.

The process of data collection is not clearly defined within the context and framework of grounded theory (Drisko, 2009). In her book *Constructing Grounded Theory: A Practical Guide Through Qualitative Analysis*, Kathy Charmaz (2006) defined the use of memos in relation to grounded theory analysis. The process of writing memos is a means by which the researcher can begin to define emerging themes and categories. Charmaz maintained that memo writing is a tool and process for personal reflection (reflexivity) within the context of the data collection process. The essential question a researcher should ask when writing a memo is “what is going on here?” (Drisko, 2009). Glaser and Strauss did not pay much attention to the actual process of memo writing in their publications, but they did note that within the memo-writing process, the researcher can begin to observe substantive ideas and theories emerging from the data.

One of the key principles that Glaser and Strauss implored the researcher to consider is that of developing a rapport with the interviewee. Charmaz has expanded upon this and, in fact, she has spoken of not using an interview guide in the actual interview, but rather of eliciting emerging themes and ideas from the actual interview process itself. Charmaz has also spoken of debriefing with participants following the interview (Charmaz, 2006). This makes good sense because of the sensitive issues that may be touched upon and the need to draw closure in a healthy way for participants.
Data analysis

Glaser and Strauss viewed grounded theory as constantly comparing cases for themes and ideas; to look for meaning within the context of the emerging data. Comparison of data is a central theme in the grounded theory approach (Drisko, 2009; Glaser & Strauss 1992).

In essence, there are really three phases of data analysis (see Figure 4.1):

- **Open coding**, whereby the researcher goes through the data and develops emerging codes and ideas (Glaser & Strauss, 1992; Strauss & Corbin, 1998).

- **Axial coding**, which has been defined by Strauss and Corbin as “the process of relating categories to their subcategories, termed axial because coding occurs around the axis of a category, linking categories at the level of properties and dimensions” (1998, p. 123). At this point in the data analysis process, the data are divided into files with subcategories (Glaser & Strauss, 1998).

- **Selective coding**, which is the final step in the analysis process. Selective coding involves determining higher-order themes and ideas that become the substance of the overarching theoretical model or framework (Strauss & Corbin, 1998).

Grounded theory, in its essence, is the development of an emerging socially relevant theoretical framework. Glaser and Strauss (1998) have discussed the distinction between formal and substantive theory. They viewed a formal theory as something that requires testing and is more quantitative in nature, whereas a substantive theory arises out of the emerging data. A substantive theory is more closely and inextricably linked to the uncovering of data and emerging ideas.

*Reduction or parsimony of variables* is the fundamental process of analyzing the data. The researcher begins with many codes, say 200. Through the process of comparing and contrasting the ideas and themes, he/she will end up with only four or five meta ideas, or thematic analyses, that in turn feed into the conceptualization of an overarching substantive theory (Glaser & Strauss, 1992).
Learning from others

Using grounded theory

On July 31 and August 1, 2009, this researcher attended a qualitative data analysis workshop from the Institute for the Advancement of Social Work, which specializes in the development of grounded theory analysis in Washington, DC. This course, facilitated by Dr. Jim Drisko of Smith College, provided this doctoral candidate with considerable knowledge and understanding regarding how to carry out a grounded theory study.
Using NVivo software

Given the large proposed data set (N=36), it was clear from the beginning of this thesis journey that the researcher should apply herself to learning how to use the NVivo software program to manage the vast quantities of interview materials. The researcher hired a qualitative data analysis consultant, Dr. Olesya Falenchuk from the Ontario Institute for Studies in Education. Dr. Falenchuk provided individual tutorials on how to use NVivo, specifically as it relates to this dissertation project. These tutorials included matrix analysis, coding, annotating and creating memos and developing a code book. The development of the code book in NVivo allowed the researcher to track all of the demographic information for each and every participant, and then develop conceptual maps based on emerging themes.

Intersection of researcher and research

Reflexivity

The notion of reflexivity is an important concept to “unpack,” or deconstruct, in the context of qualitative interviewing. In essence, the process of reflexivity requires the individual researcher to reflect on his/her own perspective and issues in relation to the research within the context of a broader social context (Drisko, 2009). This self-reflection involves the researcher—usually through the use of memo writing—deconstructing the underlying issues that have occurred within the context of the interviewing process (Charmaz, 2006). Throughout the process of data collection, this researcher actively engaged in the process of reflexivity through the use of memo writing following each interview. Excerpts from these memos are included throughout this chapter.

Theoretical sensitivity

Glaser and Strauss emphasized the notion of theoretical sensitivity, a construct that is different to the notion of reflexivity. Reflexivity is seen as analyzing one’s perspectives as a researcher within the context of larger and broader social context, whereas theoretical sensitivity analyzes what the researcher brings to the interviewing process. Examples of theoretical sensitivity occurred several times during the course of study.
interviews, when child welfare workers and caregivers would say “You know, you’ve been there,” referring to the researcher’s previous role as a supervisor and front-line worker. This is a critical concept to understand and has direct relevance to this study, given the researcher’s intimate knowledge of the child welfare system, having worked within the system for more than 20 years.

**Issues of gender, race and social class**

As part of the reflexive process, the researcher was required to reflect upon her own social location within the research process. Being a white female who was raised in an upper middle-class family and is currently living a middle-class lifestyle, the researcher had to be aware of the systemic and macro issues of poverty and social exclusion because her background did not always provide her with the insights provided by study participants. One of the researcher’s greatest strengths and greatest weakness is a lived experience as a front-line child protection worker. This is a strength because it provides an in-depth understanding of and engagement with the subject matter, but a weakness because it may cause “blind spots” in terms of overlooking potential issues.

**Insider/outsider role**

In the researcher’s role as the Executive Director of PART (Practice and Research Together), she has had the opportunity to champion the importance of child welfare research as a means of improving outcomes for children and families. From this vantage point, the researcher has generated a level of credibility within the field about the need for research. She was therefore able to network and reach out to provincial child welfare leaders and organizations to participate in the study. As she moved forward in the research, however, with individual child welfare staff members with whom she had no prior relationship, her ability to move things forward diminished. As the findings bear out in this study, relationships are critical. The same reality held true for the researcher as she moved deeper within organizations and encountered road blocks and resistance to the research.
**Strategies for study rigor**

The following concepts help a researcher to ensure study quality and rigor (Padgett, 1998). Many of these concepts will later be delineated for each of the three data sets.

**Audit trail**

An audit trail for this study was constructed by using a research diary throughout the course of the study. This information allowed the researcher to review her notes and understand what decisions were made when and why. Given the longevity of the data-collection phase, it was imperative to keep effective notes.

**Memos**

Memos containing emerging ideas and themes were written following the interviews. These become an integral foundation for emerging codes, themes and subsequent analysis.

**Annotations**

An important feature in the NVivo software is the capacity to write notes in the “margins” of the page. These annotations allowed the researcher to review and encapsulate emerging themes from the data. Annotation examples include the following:

*Excerpt from an interview with a kin grandmother:* “This is really a key point here because what she is saying is she is truly invested in getting the child back to the mom because this is family and this is what family does. This is such a critical point here to take into consideration.”

*Excerpt from an interview with a kin worker:* “She (worker) makes a good point here about the stigma and the shame of the experience of being in care.”
**Research diary**

The researcher kept a research diary from September 2008 as she began the process of data collection. This diary contained various different elements, including challenges with recruitment, personal reflections and progress related to the ethics amendments.

An excerpt from the diary includes the following paragraphs:

- *February, 21, 2009, I am here at site XXX and spent the night as I was doing interviews back to back. Stayed at a friend’s house.*

- *So, this morning (Sat. office is closed with no receptionist at the front), I was scheduled to interview a 14-year-old girl. I went outside to look at about 10:20 am, and the van was parked outside. They thought I wasn't there but the volunteer driver didn't have my cell #, so just left even though I gave it to the foster mother. So, many phone calls later to foster mother, and we rearranged the drive so that this girl could come back at 3:30 pm today. Throughout these conversations, it was interesting how this foster mother was so left out of the loop. The EAHS (Emergency After Hours Worker) whom I called said, “Well the driver doesn’t call the foster mother with issues related to the drives.” So how did the foster mother know where to find the child? Well, it turns out the child was left at the swimming pool for 1.5 hours unsupervised and the driver returned to pick her up again and take her to see me for the interview, but not until 3:30 pm that afternoon. A delay of five hours.*

- *I was so entirely frustrated by the situation, but what it taught me again was the breakdown in communication and how we send children off with drivers who don’t know them. This is so incredibly artificial for children...placing them in stranger care, and sending them off with volunteer drivers who are strangers as well.*
February 22, 2009. I think an important thing to consider about site XXX is that they carry generic caseloads and don’t focus exclusively on kinship. How does this impact on the worker’s clinical knowledge of kinship practice?

**Code book**

NVivo allows researchers to capture all related demographic information. The code book can be exported to Excel, and quantitative analysis can be achieved on variables such as education, age, length of time in the placement and so on. These data will be integrated into the findings section of the thesis.

**Triangulation**

*Triangulation* is a concept that refers to a researcher’s attempts to gain perspectives from multiple sources (Cresswell, 1998; Padgett, 1998). Triangulation has been achieved in this qualitative study by ensuring that the perspectives of child welfare workers, caregivers and youth were incorporated into the foundation of the study design. The development of a three-dimensional study that provides the perspectives of differing but convergent groups ensures the depth and richness of the data being collected.

**External check on the inquiry process**

The ultimate goal of this, or any design, is to create a study that has merit for the field in which it is conducted (in this case, child welfare practice). The researcher has been asked to sit on the Provincial Kinship Services Advisory Group. Although this group focuses on children and youth placed in kinship homes on a voluntary basis, the findings of the current study have great interest for this group. The researcher met with this committee on July 21, 2009, to review the preliminary findings emerging from the worker data set. The group found the information useful and provided suggestions for further analysis and reflection.
Member checking

Member checking: participants

Embedded in the ethics consent form for all three groups was the question “Would you like to like to review your transcripts?” Having participants review their transcripts acts as a means of member checking and can provide valuable information. Twenty-two out of 45 participants asked to review their transcripts.

The researcher wrote up a summary of the research findings for each sub-group and emailed these summaries to all participants from each of the relevant groups. Feedback was collated into a chart format (see Appendix A). By far the greatest response emerged from the worker data set. The researcher received feedback from five workers (36%). This group provided important feedback by affirming the findings, but also adding more perspectives. These included: (1) questions regarding the next steps for the research; (2) points regarding the potential power imbalance between the kin and biological family; (3) issues related to kin access; and (4) the view that motivation for kin can be financial.

One foster father and one kin grandfather provided feedback (1%). The kin grandfather provided a more detailed perspective on his own experience as an aboriginal person intersecting with the child welfare system. There was no feedback from youth. Conducting such a thorough member-checking process with participants was important because it gave participants the message that what they said in the interviews was heard and valued and that the research is going somewhere—that the research is moving forward and will be disseminated and have an impact on the field.

Member checking: child welfare practitioners

The researcher is very fortunate to lead the research dissemination program for child welfare agencies in Ontario (www.partontario.org). In this role, she has been able to disseminate her preliminary findings at two child welfare agencies in the east of the province. Feedback from these two agencies included the following:

- Questions regarding differences between the types of kin caregivers (e.g., aunts and uncles versus grandparents) and between kin and kith caregivers.
• Interest in the concept of pre-screening kin caregivers.

The researcher also gave a webinar presentation to the field on March 9, 2010. This webinar was broadcast to 37 Children’s Aid Societies (CASs) across the province and provided a further opportunity for rich feedback from child welfare practitioners and community partners. Questions that emerged from this presentation included the following:

• Are you aware of any other CAS who have facilitated a support group for youth in kinship placements?
• Foster care and kinship care may differ in terms of investment potential for a CAS. Resources in foster care may pay many times for many different kids. Resources into kinship care may be very important for one child or family set, but likely the payback may be considerably less. Does this impact on agency’s policies/resources related to these two different caregiver [types].

These excellent questions will be further reflected upon in the discussion chapter.

Thesis review process

Another unique strategy for gaining feedback from participants is to elicit feedback from colleagues. This researcher asked a team of five child welfare colleagues to read sections of the thesis. This team included two current kinship supervisors, an adoption supervisor, one quality assurance manager who had previously been a kinship supervisor and a director of service from a northern Ontario agency. All individuals provided invaluable feedback related to the draft thesis. Their thoughts, ideas and perspectives have been captured in the writings and findings.

Peer debriefing and support

The peer debriefing came in the form of support from her doctoral thesis supervisor and other colleagues and peers both inside and outside of the doctoral program. The researcher is fortunate to have the support of many child welfare professionals across the province. There were many times when she would share and describe the emotional
complexity of the interviews. This support proved invaluable during the year-long data-collection phase.

**Data collection**

This study involved four data-collection processes: organizational recruitment, and then the recruitment of the three constituent groups of workers, caregivers and youth from both kinship and foster care. In essence, this study consists of six “mini” qualitative studies, because within each group there is an analysis of both the kinship and foster care streams (see Table 4.1).

**Table 4.1.** The three groups.

<table>
<thead>
<tr>
<th>Constituent group</th>
<th>Placement type</th>
<th>Placement type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Workers</td>
<td>Kinship</td>
<td>Foster care</td>
</tr>
<tr>
<td>Caregivers</td>
<td>Kinship</td>
<td>Foster care</td>
</tr>
<tr>
<td>Youth</td>
<td>Kinship</td>
<td>Foster care</td>
</tr>
</tbody>
</table>

**Preparing for the data-collection process**

**Recruitment flyer**

An effective recruitment flyer is an important tool to solicit interest in a study. Each study group had its own recruitment flyer. The youth flyer displayed pictures of youth from diverse backgrounds. A graphic design firm (Mouthmedia, Toronto, Ontario) was hired specifically to design the flyer in both high and low resolutions so that it could be mailed or printed in high-gloss colour (see Appendices B, C and D). The flyers were eye-catching and the researcher received positive comments from study participants about
how professional they looked.

The youth flyer was amended three times to reflect changing recruitment strategies. The caregiver flyer was amended once to reflect the recruitment strategies for both CAS and the National Grandparents Support Group group.

**Audio-recording equipment**

The researcher conducted two interviews at site 3 in which the digital recorder that was being used ran out of memory. Therefore, she purchased a back-up recorder that was switched on in case of any malfunction in the primary device. A speaker was also used to ensure adequate sound quality for transcription.

The researcher played the audio files and transcribed the material line by line, with no special transcribing equipment. The audio file often had to be rewound to hear the wording of the participant who was speaking. An external microphone was used during the interview, which heightened the quality of the audio recording. It took the researcher at least 2.5 to three hours to transcribe the bulk of each interview. Two transcribers were hired for seven of the interviews; this resulted in a cost of $1,800.00 and the quality of the typed material was not sufficient. Given the researcher’s limited funds and her desire to truly know and embrace her data, she took on the task of transcribing the remaining 35 interviews herself. This took a total of about 125 hours. This “labour of love” resulted in the researcher knowing her data inside and out, and there is no doubt that this added to the richness of the subsequent data analysis.

**Preparing for the study interviews**

It took a considerable amount of logistical planning to even get in the door of each organization to perform this study, let alone conduct the interviews. Staying organized during the data-collection process required forethought, given that so much of the research was completed at various sites across the province. The researcher maximized her time at each site by booking several interviews back to back, making it critically important to always have the tools and resources required to complete the interviews. She carried a “toolbox” of resource materials to each site. Inside the toolbox were batteries,
business cards, recruitment gift cards for each study group and extra copies of consent forms.

**Travel from site to site**

One of the challenges involved in conducting a provincial study was the requirement to travel from site to site. The researcher had to travel to sites repeatedly: to site 4 twice, site 3 four times, site 5 twice and site 6 twice. The researcher was fortunate to have access to a car and to be working full time, otherwise the cost of conducting such a study would have been prohibitive. For future studies, the researcher will be clear to include travel costs in the study budget.

**Organizational recruitment**

**Study sites**

A total of eight organizations were recruited for the study. One large metropolitan organization was dropped from the study, leaving seven sites. The process of convenience sampling was used to recruit these organizations, and all of the agencies were chosen based on the researcher’s knowledge of the organization and her working relationship with the executive director(s) of the program. The limitation of selection bias will be explored in the discussion section of this study. Table 4.2 lists the sites that were recruited. The children-in-care group is reported to represent the size of each organization, given that each child welfare agency reports varying statistics, with the in-care population the most consistent measure of organizational size.
### Table 4.2. Recruited sites.

<table>
<thead>
<tr>
<th>Study sites</th>
<th>Children-in-care population</th>
<th>Descriptor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Site 1</td>
<td>1,671</td>
<td>Urban</td>
</tr>
<tr>
<td>Site 2</td>
<td>907</td>
<td>Urban/rural</td>
</tr>
<tr>
<td>Site 3</td>
<td>838</td>
<td>Urban/rural</td>
</tr>
<tr>
<td>Site 4</td>
<td>191</td>
<td>Rural</td>
</tr>
<tr>
<td>Site 5</td>
<td>880</td>
<td>Urban</td>
</tr>
<tr>
<td>Site 6</td>
<td>527</td>
<td>Urban/rural</td>
</tr>
<tr>
<td>Site 7</td>
<td>Large metropolitan agency removed from the study at the beginning.</td>
<td>Urban</td>
</tr>
<tr>
<td>National Grandparents Support Group. Interviews held at the following locations: Hamilton, Mississauga and Jackson’s Point.</td>
<td>Not applicable</td>
<td>Canada-wide—urban and rural</td>
</tr>
</tbody>
</table>
A staggered organizational recruitment process

In the course of engaging site 7 to the study, it became evident this organization was seeking considerable changes to the study design to ensure that the research findings were aligned with their organizational principles and philosophies of practice. This led to site 7 asking for amendments to the study questions that were not in keeping with the overall design of this research study. The researcher and her supervisor, Dr. Rob MacFadden, reviewed site 7’s request and were concerned that these amendments could lead to considerable alterations to the overall study design. Therefore, an alternate agency was selected for the study: site 4. Therefore, the first three study sites were sites 3, 4 and 5. The change in study site location from site 7 to site 4 required an amendment to the ethics protocol. The first wave of the data-collection and recruitment process began with three child welfare agencies: sites 3, 5 and 7.

The first wave of organization’s recruited for the study were sites 1, 2 and 6. The first organization to become a data-collection site was site 3, which yielded the highest rate of study participants (N=15) (in comparison, site 4 was N=10 and site 5 was N=6). Site 3 had an electronic message board for both workers and caregivers, resulting in the highest rate of organizational response. Site 4 did not have this electronic capacity, and so the quality assurance manager mailed hard copies of the study flyers to all foster and kinship placements. Site 5 posted an outline of the study in its caregiver newsletter, and the recruitment flyers were displayed throughout the organization, outside workers’ cubicles and elsewhere. In their own way, each of these agencies demonstrated commitment to the study and a strong desire to help facilitate the research process.

More sites required

On May 8, 2009, the researcher met with her thesis committee, where it was determined that a richer data set of 10 more participants was required (kin caregivers N=5; kin youth N=5; and CAS workers (foster care stream) N=2). Therefore, the researcher returned to the field and was able to recruit three more sites: sites 1, 2 and 6. One of the difficulties in the recruitment process was that participants could not know each other. This posed a challenge at several sites, and so the recruitment process was revised and each of the
three additional study sites recruited one group each (see Table 4.3)

Table 4.3. Recruitment at sites 1, 2 and 6.

<table>
<thead>
<tr>
<th>Study site</th>
<th>Recruitment data set</th>
</tr>
</thead>
<tbody>
<tr>
<td>Site 1</td>
<td>Caregivers</td>
</tr>
<tr>
<td>Site 2</td>
<td>Youth</td>
</tr>
<tr>
<td>Site 6</td>
<td>Workers</td>
</tr>
</tbody>
</table>

These three additional organizations were swift to respond to the need for more study participants. Site 6 had recruited the worker data set \((N=2)\) within one week, and the two remaining organizations assigned the recruitment process to the kinship team supervisors. The recruitment of study participants from these two organizations resulted in three participants. This process will be detailed under the youth and caregiver data set.

**Creating the child welfare recruitment team**

One of the critical factors for success that emerged during the study was the recruitment of second- (senior managers) and third-tier (supervisors) child welfare personnel who were deemed responsible for recruiting study participants within their organizations. The third-tier or supervisory staff members were asked to facilitate the research, but this assignment is outside the normal purview of their regular duties. The executive director of each organization would assign recruitment to either the quality assurance staff member (site 4) or to the supervisor in charge of the unit (e.g. the kinship in-care team at sites 1, 2, 3 or 5). At site 5 for example, there is a research review committee. This research study was vetted by the committee, in line with ethical protocols approved the University Research Ethics Review Committee.
Engaging a divergent kinship data set

A plan was developed to recruit kin caregivers through the National Grandparents Support Group. This group is a voluntary support network for grandparent caregivers across Canada. This national kinship advocacy group views itself as an organization that empowers kin caregiver families who raise grandchildren. The organization’s mission statement is as follows:

*National Grandparents Support Group shall seek to and involve citizens as it identifies and work to overcome the inequalities and injustices which exist within society for kin caregiver families who are raising theirs or someone else’s children. National Grandparents Support Group shall advocate for equitable policies for kin caregiver families (National Grandparents Support Group, n.d.)*

This advocacy group can be viewed as providing alternate views and perspectives that are typically contrary to those held by child welfare organizations. Recruiting individuals from the National Grandparents Support Group network provides an example of theoretical sampling, whereby the researcher attempts to locate differing perspectives and study participants. The different views espoused by National Grandparents Support Group include advocating for government agencies to provide more economic and social supports to grandparents (National Grandparents Support Group, 2009).

**National Grandparents Support Group camp**

The researcher attended the National Grandparents Support Group Annual Conference and Camp Out for grandparents and children on Thursday August 27, 2009, as a means of recruiting kin caregiver study participants. Although the profile of a kin caregiver can include a wide range of extended family or individuals from the community (kith), the National Grandparents Support Group is comprised solely of kin grandparents.

The researcher was introduced as a “CAS employee,” and it was at this juncture that the presentation became challenging—a set of grandparents said that they did not know if they could trust the researcher, given her background with child welfare organizations in the province. This became one of the more demanding moments of the study, but the
researcher persevered and asked the group to trust her. B.G., Director of the National Grandparents Support Group, stood up and supported the researcher and, from there on in, the deluge of recipients asking to participate in the study was overwhelming. The researcher arrived at the camp at 2 pm and did not leave until 11 pm that night after conducting a total of four interviews. She left the camp with approximately eight more caregivers asking to participate in the research.

**Sampling framework**

This study used convenience sampling (Padgett, 1998), whereby participants who were interested in participating in the study contacted the researcher.

The planned and achieved study populations are shown in Tables 4.4 and 4.5, respectively.

**Table 4.4.** Planned data set.

<table>
<thead>
<tr>
<th>Data Set</th>
<th>Caregivers</th>
<th>Workers</th>
<th>Youth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kinship (in care)</td>
<td>6</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>Foster care</td>
<td>6</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>Total</td>
<td>12</td>
<td>12</td>
<td>12</td>
</tr>
<tr>
<td>Total population, N=36</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Table 4.5. Achieved data set.

<table>
<thead>
<tr>
<th>Data Set</th>
<th>Caregivers</th>
<th>Workers</th>
<th>Youth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kinship (in care)</td>
<td>12</td>
<td>5</td>
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</tr>
<tr>
<td>Foster care</td>
<td>10</td>
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<td>Total data set, (N=45)</td>
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Study participants

Inclusion criteria of study participants

The inclusion criteria for each of the three study groups were as follows:

- Worker data set: the inclusion of workers for each of the two streams was dependent upon the worker having worked with children and youth in either foster care or kinship (in care) placements.

- Caregiver data set: caregivers included foster parents or kin caregivers who had children and youth in placed in their care who currently or previously had an ‘in care’ status with a local CAS.

- Youth data set: youth in this study included youth placed in foster care or kinship care.

The entire data set consisted of kinship “in care,” meaning that the participants had to come from an in care kinship data set as compared to kinship service or voluntary placements. It was essential to use only kinship in care because of the comparative
population of foster care. Future research can address issues related to voluntary kinship placements.

As delineated in the ethics protocol, study participants involved in the research could not have a working or personal relationship with other participants in the study. The protocol stated, “I understand that Ms. Dill will not recruit people that I know from my CAS including other CAS workers, caregivers or youth” (REB appendices, p. 6). The challenge of this emerged when on two occasions, two participants arrived for the study interview and it became evident that they did have a working relationship with another party involved in the study. As a way of remedying this, this researcher returned to university ethics and recruited one child welfare agency per constituent group (caregiver, worker, youth) as recommended by Dr. Aron Shlonsky, thesis committee member, on May 7, 2009. These criteria presented as a considerable challenge in the study, because when the issue of a pre-existing relationship emerged, the individual had to be screened out. Two kin caregivers were eliminated from the study because of a pre-existing relationship.

**Writing up**

Much forethought was given to how to write this section up given the inherent challenges and opportunities of including the data-collection processes for each group, and then to capture the unique challenges of both the kinship and foster care groups. Therefore, each section related to each constituent group will include the following sub-headings: (1) participant profile; (2) recruitment; (3) pre-screening; (4) interview (location, guide, process); (5) post-interview debriefing; (6) transcripts; (7) study findings; (8) issues of theoretical sensitivity; (9) reflexivity; and (10) study incentives.

**Participants 1: child protection workers**

**Participant profile**

The worker group was divided into two sub-groups: those from the kinship stream and those from the foster care stream. Compared to the other two groups, this group was unique in its relative homogeneity. The vast majority of staff members who participated
in the research were individuals who had worked in many different roles within the child welfare organization. The fluidity of experiences provided a rich and diverse perspective on the issues examined. One could argue that rather than separating this group into distinct groupings of kinship and foster care, this constituent group represented one large amalgam of child welfare workers, all of whom had worked with children in care at some point in their careers.

**Recruitment**

Each child welfare agency emailed the study flyer to its staff members. Workers were told to contact the researcher directly in order to participate in the study.

**Pre-screening**

All participants were pre-screened on the telephone prior to the study. Each participant was emailed a copy of the study information letter and a consent form.

**Interview**

**Interview location**

All study interviews took place at local child welfare offices, including sites 3, 4, 5 and 6.

**Interview guide**

The same interview questions were used throughout all of the interviews with workers from the kinship and foster care streams. The questions were as follows:

1. What are the issues and challenges that children and youth encounter when entering the child welfare system?

2. What are the challenges for children and youth when they exit the child welfare system?

3. What are the similarities between kinship and foster placements?

4. What are the differences?
5. If you could change one thing about child welfare placements for children and youth, what would it be?

**Interview process**

The questions were purposefully open-ended and allowed participants to share what they felt was relevant and meaningful. In several situations, the participant shared an idea that required further probing and analysis by the researcher during the interview process. Probes included phrases such as “Can you tell me more about this?” The researcher was careful to ask for clarification on various issues. There were times, however, that issues that arose during the interview were not captured in the interview guide. An example of this would be a worker stating “I believe in resilience theory.” The researcher would then ask probing questions to ascertain what the worker meant by this statement.

Structured probes were not developed prior to the interviews. These probes would not have assisted the researcher during the interview process because participants went in many directions during the course of the interview. The researcher would sometimes go back and reframe or clarify a person’s response, which would then lead to interesting and emerging ideas and themes. Having a very rigid interview protocol would have impeded the researcher’s capacity to interview participants and hear their stories. Implicit in the development of a grounded theory study is the necessity to begin from the “ground up” in terms of hearing and listening to the emerging story line proposed by each participant. Conducting these study interviews was parallel to the social work value of starting where the client is at. In the interview, the researcher must begin where the participant is at.

**Post-interview debriefing**

Charmaz (2006) spoke of the need to spend time with participants following the interview to debrief and explore any feelings that have emerged from the interview. The researcher always spent time with the participant following the interview to debrief. Study participants opened up in very transparent, and in many instances, emotional ways when describing their experiences and so providing time to debrief allowed the individual to put some closure on the interview process.
Transcripts

Only one worker asked to see a copy of her transcript following the interview. The researcher emailed the study participant to re-confirm the email address and the individual’s desire to review the transcript, but received no response.

Study findings

All workers asked to see copies of the study findings. In the information letter, participants were told that the analysis of the study findings would be submitted for publication through the Ontario Association of Children’s Aid Society (OACAS) journal. Following the defence of this thesis, the researcher will submit each section (worker, caregiver and youth findings) to the journal.

Reflexivity

Memos were detailed following each and every interview.

A memo from an interview with a worker from the kinship stream included the following excerpt:

She (the kin worker) made a crucial point that we think that kin families create familiarity, but a lot of times this is not the case if the child is moving to a home where the relative or community caregiver is a stranger to the child and there is no pre-existing relationship. Good point. There are times when kin and kith care are similar to stranger care for children.

This excerpt highlights how the memos helped the researcher to construct emerging ideas and themes related to the study, and to ensure that these issues could be returned to in the analysis of the data.

A memo from an interview with a worker from the foster care stream included the following excerpt:

What is unique about this worker is her [the worker’s] articulation of the issues...her sense of passion and commitment to the work, which I didn’t
pick up from the other two workers [interviewed at the agency]. This worker, although fairly new to the work (3 years), she had picked up the essence of the issues and uses a theoretical framework to guide her work. She has used this framework of systems theory to help assist her with her work, which is foundational. Where does this come from? Does this come from the concepts of resilient workers? She seems more emotional, passionate and less burned out. More committed? I am not sure, but there is certainly something unique in her interview in comparison to the other two interviews [held at this agency].

This excerpt highlights the unique elements of this interview and perceptions that emerged from interviews with workers.

**Study incentive**

Workers were given $20.00 Tim Horton’s gift cards. All participants were very appreciative, and one worker responded “Tim was the first man I ever fell in love with!” Many commented that they would have participated in the study for nothing but, again, they all commented on how happy they were to receive the token of appreciation.

**Participants 2: caregivers**

**Participant profile**

**Foster care**

This data set included individuals who are foster parents for local child welfare agencies.

**Kinship care**

This group included individuals who are kinship (in-care) caregivers for local CASs. In some instances, caregivers included individuals who had since applied for legal custody of the children in their care and were no longer supervised by a child welfare agency. They had, however, maintained a status as a kin caregiver in the recent past and were able to fully articulate their perspectives on the issues at hand.
Recruitment

In the initial phase of the data-collection process, sites 3, 4 and 5 recruited caregivers for the study. However, by May 2009 only two kinship participants had come forward. The thesis committee directed the researcher to engage another child welfare agency to recruit more kin caregiver participants. Site 1 was selected to recruit kin caregivers, but, despite phone calls, emails and leaving 50 colour copies of the caregiver recruitment flyer with the site, there was no response from the kin supervisor in charge of recruitment. In the end, the researcher approached the National Grandparents Support Group as an alternate recruitment site, as described previously. This lack of engagement by the kin supervisor was surprising and it is unclear what her lack of communication represented. On September 9, 2009, the researcher reported to the kin supervisor that she had terminated the recruitment process at her agency, and this still resulted in no response. This process highlights the critical importance of engaging supervisors in the study process. When the researcher had a pre-existing relationship with other supervisors, such as at site 2, the individual supervisor was more apt to promote the research. The researcher had no relationship with the site 1 supervisor and this lack of engagement resulted in little or no response.

An interesting aspect of the recruitment process was uncovered. A kin caregiver from site 5 participated in the study and, although this grandparent was served by this site, he reported never having seen the recruitment flyer through this agency. Yet when the flyer was disseminated through National Grandparents Support Group, the caregiver was most interested in participating in the research. This was an intriguing observation and it could be hypothesized that recruiting participants through CASs can be challenging, as many individuals may feel threatened about sharing their true experiences for fear of reprisal by the child welfare organization. Alternatively, the flyer may simply have never been disseminated to this group of participants. After the flyer had been distributed to the organizations, the researcher had very little control over how the information flowed to potential study participants.

When the flyer went out through the National Grandparents Support Group, there were many requests from caregivers across Canada and the USA asking to participate. This
researcher received requests to participate from Michigan, British Columbia and Alberta. It would seem that the study struck a chord with caregivers because it was seen to give caregivers a rare opportunity to share their stories in a way that they saw as contributing to knowledge and hopefully to the greater good.

It should be noted that the caregivers group resulted in the recruitment of three couples: one foster parent couple and two kin caregiver couples. The contribution of involving couples in the study will be highlighted in the findings section. The recruitment flyer clearly indicated that caregivers could include partners in the study interview. The impact of hearing two voices in an interview will be clarified in the caregivers’ findings section.

Twelve kin caregivers were included in the study, nine of whom were recruited from the National Grandparents Support Network. This is a group that, by its very nature, advocates for change related to the financial and social supports currently provided to grandparents raising grandchildren. The concern in recruiting from this group was that any participants would have an “axe to grind.” The grandparents group presents as a group that is dissatisfied and as such, this network had to the potential to skew the findings in a negative way. Having said that, as detailed previously, the researcher used various different means to engage and recruit kin caregivers through the different child welfare organizations to no avail. This network became the only possible venue for recruiting the kin caregiver population.

**Pre-screening**

Pre-screening foster parents for the interviews was a very simple process because their role is defined within the organization, but it was not always such a simple process when trying to screen kin caregivers. Kin caregivers had to be screened in order to ensure that these participants had or currently have involvement with a CAS worker and the child was deemed to be in care. In two separate instances, two caregivers had to be screened out because they had had minimal involvement with a child welfare agency (kinship services) and were served by the organization on a voluntary, rather than court-ordered, basis.
**Interview**

**Interview location**

The interviews with foster parents took place in the selected CAS offices recruited for the study. The interviews with kin caregivers took place at the Site Three, caregivers’ homes and the National Grandparents Support Group Camp (located at the Salvation Army Camp at Jackson’s Point on Lake Simcoe). The interviews at the camp were conducted wherever the researcher could find a quiet space. The researcher is familiar with conducting interviews in unique locations, given her background as a child protection worker. She made certain that all of the participants felt comfortable and that, as far as possible, the interview environment was quiet and confidential.

**Interview guide**

The same interview questions were used throughout all of the interviews with caregivers. None of the interview questions was piloted with a select group of individuals. The interview questions were as follows:

6. As a caregiver, what kind of experiences have you had with Children’s Aid Societies?

7. If you were asked to name one thing that helps children and youth when they enter the child welfare system, what would it be?

8. What types of things need to change when children and youth come into care?

9. If you could change one thing about your experience as a caregiver within the child welfare system, what would it be?

10. What is the most important thing that child welfare professionals need to understand about kinship or foster placements?

11. What are the similarities between kinship and foster placements?

12. What are the differences?
Interview process

All of the participants presented as fully engaged in the interview process. Many participants shared personal issues, pain, sadness and joy related to their experiences with caregiving. They also shared their love of, compassion for and commitment to the children placed in their care. Some of the stories of commitment to children were extraordinary and are captured in the findings section.

In all of the kin caregiving interviews, the majority of the interview was spent discussing previous experiences with child welfare agencies; interviews with foster parents, on the other hand, tended to focus on the similarities and differences between kinship and foster care. There was a very subtle and different perspective provided by each of the study groups.

One challenge that emerged during the study was that one of the kin grandparents was illiterate. The researcher spent a considerable amount of time reading the consent form aloud to her so that she fully comprehended what the study was about and what structures were in place to ensure her confidentiality. This incident was a reminder that issues of illiteracy must be taken into consideration when recruiting potential study participants.

One kin grandparent critiqued the consent form, stating to her husband, “You see, she must be a CAS worker, look at her big long form.” As previously mentioned, this comment parallels the researcher’s own discomfort with the administrative and risk-focused consent form that was developed for youth. The administrative burden of the consent forms and its impact on study interviews will be reviewed in the discussion section.

Post-interview debriefing

The researcher always spent time following the interview to help participants disengage. The kin caregiver group seemed more emotionally fragile than the foster parents and, as a result, it seemed important to give these individuals time to reflect on how their story had unfolded. Many of the kin caregivers wept openly, and shared many painful stories of financial and social hardship and despair.
Transcripts

Six foster parents asked to review their transcripts following the interview. Feedback from the participants was as follows:

Thank you so much, Katharine…I hope that what I said makes some kind of sense to you!!! It is pretty difficult to understand when you read it word by word as I said it like that!!! (Email correspondence, August 28, 2009, permission granted to publish content of email.)

Study findings

All of the caregivers requested to see the study findings.

Participants 3: youth

Participant profile

In comparison to the worker group, this constituent group had uniquely different attributes and issues. The group was divided into those in foster care and those in kinship care.

Foster care

Youth who had been or currently were in foster care were included in the study. All of the study participants were currently residing in foster placements, with the exception of one young woman who had recently moved from a foster placement to a group home.

Kinship care

Youth who participated in this study had been or were in a kinship placement with an in-care status.

Recruitment

Recruitment for this data set was challenging to say the least. It was always known that it would be difficult for youth to call the researcher to arrange a study interview on their own volition. It takes courage to call someone you do not know and to share your story, and that challenge is magnified when one is a young person in care who is being asked to
share a very emotional story.

The recruitment process was complex and involved recruitment flyers being sent out to youth via hard-copy mailings or through online postings to foster and kinship placements.

In July, the researcher revised the recruitment strategy to engage more kin youth. She changed the recruitment flyer to ask potential participants to text the researcher, and the study incentive for movie passes or iTunes gift cards was increased from $20.00 to $30.00. This revised recruitment process led to no further referrals. Given the considerable success of recruiting kin caregivers through National Grandparents Support Group, it seemed equally plausible that youth could be recruited through this same network. Therefore, a return to the Research Ethics Board and a revised recruitment flyer resulted in the researcher being given full permission to recruit youth through the National Grandparents Support Group and conduct study interviews in participants’ homes.

B.G., Director of National Grandparents Support Group, was approached to see if she would agree to assist with recruiting kin youth. Her response was as follows:

This can be done and as you learnt our kin families are trusting and willing with my o.k.! Thanks again for coming and for all you do for kinship! (Email correspondence from B.G., National Grandparents Support Group Director, dated August 30, 2009, permission given to publish email content.)

This researcher still believed that making another attempt to engage this group of youth was critical to the overall success of the study. On September 20, the researcher emailed the kinship supervisor at XXX CAS and asked if she (the researcher) could attend a team meeting in the near future as a strategy for encouraging workers to recruit kin youth to the study. The supervisor of this team invited this researcher to come to a team meeting on October 21, 2009, to talk about recruiting youth. In the meantime, the supervisor at the site 2 agency committed to contact youth personally to encourage them to contact this researcher directly. This supervisor has made a considerable commitment to the
successful outcome of this study because she recognizes that the knowledge will further our knowledge and understanding of kinship placements. Much effort and consideration has been given to the recruitment of the kin youth group of participants.

The challenges of recruiting youth through traditional means are elaborated on in the discussion section. In today’s society, youth are engaged with social networking sites, and to consider that youth would even hear about this study through traditional means of communication is unrealistic. In future studies with youth, recruitment through social networking sites such as Facebook should be considered. This is clearly the way of the future, for some situations, but ethical consideration and challenges must be considered. These concerns will be detailed in the final chapter.

Pre-screening

Youth were asked to telephone the researcher for a pre-screening interview. One youth who called had to be screened out because he had only ever lived in a group home and had never resided in a kinship or foster placement.

The pre-screening was important for youth because it set the tone for the interview process. The researcher used her skills of engagement to help youth feel at ease and to walk individuals through the interview process, including what was entailed and how the research would be used to inform key professionals about child welfare placements.

Pre-screening challenge

There was one challenge during the course of the pre-screening process, whereby a foster mother became very angry with the researcher for speaking with the youth prior to speaking with her, despite the ethics protocol requiring this course of action. This conversation caught the researcher off guard, because not only was the foster mother obviously upset with the researcher, but she was also very upset with the youth for initiating the contact. Despite the “best laid plans” of the ethics protocol, in this situation the required course of action actually caused more stress for the youth involved. There was likely more going on in this home that did not relate to the research, but it was a perplexing scenario. The researcher captured the essence of this challenge in her research journal. The youth did not speak of the incident in the actual interview and, in fact, was
adamant that he felt attached to his foster mother. This example highlights the challenges of involving very vulnerable youth in a research study.

**Piloting interview questions**

For this constituent group, the interview questions were piloted with two youth at site 3 and included the following questions:

1. Can you describe the different places that you lived in before coming to this home?
2. What was it like living with your own family before coming to this home?
3. What is your relationship like with your family? Did you have any challenges?
4. Do you see your family?
5. Do you have any contact with your sisters or brothers and, if so, how often?
6. What is it like now, living with your current family (foster or kin)?
7. If you have some challenges in your life, how were you able to overcome them? Can you provide some examples?
8. Before coming to this home, were there things about yourself that you found challenging—like feeling sad or depressed, having difficulties at school or getting into trouble?
9. Have things changed since you moved to this home? If so, in what way? Can you describe how things have changed?

Through the piloting process it was found that these questions did not always yield substantive information. The researcher therefore returned to Research Ethics Board to amend the ethics protocol to allow two additional questions to be asked:

10. If you could change one thing about your experience in care, what would that be?
11. What things do you think CAS workers and caregivers need to understand about what it is like for children and youth to come into care (kinship and/or foster and/or group care)?

**Interview**

**Interview location**

Interviews with youth occurred at sites 3 and 4. One youth was being supervised by sites 2 and 5 and so the interview took place at the site 2 office. The final interview with a kin youth took place in her grandmother’s home in Mississauga.

**Interview process**

The Research Ethics Board required that the researcher begin the interview process with a review of the study information letter and consent form, followed by the researcher asking the youth a series of questions that were used to test whether he/she understood the consent form. In all cases, the youth passed this “test” with flying colours and it was evident that all participants understood a great deal about the study before beginning. This process, however, often took longer than the actual interview itself. The researcher actually felt embarrassed at spending so long reviewing the administrative requirements of the study interview. The youth consent form was, in the researcher’s opinion, far too onerous. The form was risk focused and had the potential to scare youth away from the process because of attention and detail to possible risk factors. In a way, this process mirrors the emphasis on risk that exists in child welfare systems (Dill & Bogo, 2009). Emphasis on risk can create an environment that diminishes the collaborative relationship between the researcher and participant or child welfare worker and client.

The majority of the interviews lasted no longer than 45 minutes, not including the time spent reviewing the consent form. This group is young and it can be difficult for them to spend time expanding on issues. Therefore, most of the interviews were relatively short. The exception was the interview with one young woman who is in extended care and maintenance, and was able to illustrate her journey through various placements, both foster and kinship care.

In one instance, a young girl began to open up about her mother’s ongoing mental health
problems, which have resulted in the child never being able to return home to live. She started to cry, reliving this pain. It was evident that by sharing her story, she was also working through much of her own pain and trauma.

In another situation, a young girl—who portrayed herself as a young woman who was angry with the world and unwilling to connect to anyone—called the researcher months after the interview to “check in” (see excerpt from memo in the reflexivity section, below). The researcher did not encourage ongoing contact and, in fact, dissuaded the young girl from such contact. However, it was probable that the girl had attachment issues and was looking for someone to connect with. The interviews explored complicated emotional terrain and so it made sense that youth felt connected to the researcher in a way that was different to their relationship with a social worker.

**Post-interview debriefing**

The post-interview debriefing with youth was critically important because, for all of these young people, sharing their stories was courageous. Indeed, some time was required to debrief following the interview process. Often, the researcher would simply sit in the waiting area with the youth until his/her ride arrived. In those moments, the youth would continue to share his/her stories, which often involved great loss and trauma.

**Transcripts**

All youth who participated in the study asked to view their transcripts. Each was emailed to confirm his/her desire to view the transcripts but, to date, no youth has followed-up on this request and two had email addresses that were not valid.

**Study findings**

All youth asked to receive a copy of the study findings.

**Theoretical sensitivity**

When interviewing youth, the researcher was reminded of her previous role as a child protection worker at site 5 for eight years. The researcher’s background with youth certainly played a considerable role in terms of engaging these young people and gaining
their trust to share their stories.

**Reflexivity**

The interviews were often filled with sadness and loss. In one interview the young person was asked how many placements he had had. He replied, “Nine as far as I can remember.” He was 13 years old at the time. Given the emotional aspect of the study interviews, it was important to capture some of the reflexive moments in study memos. When transcribing the interviews, the researcher felt the emotion and trauma of these young people. She could only transcribe and listen to the tapes for so long because the emotion and sadness that resonated from some of these youth was very powerful.

A memo from an interview with a foster youth included the following excerpt:

*March 12, 2009. A. attended interview at Site Two. It was a short interview as she did not elaborate on much of the questions asked...It was clear from this interview that this is a young woman who is very angry with the world. She spoke of hating her CAS worker and anyone else that makes her angry. So very angry with the world and said, “CAS sucks.” Themes included:*

1. Don’t move me so much, tell workers to get back to kids (return phone calls).

2. Do “develop a relationship with kids.”

3. Way more rules in group homes than in foster homes.

4. Because there was no relationship with worker, there was no communication about things like sibling visits, etc.

*May 8, 2009, A. called me yesterday. Just wanted to talk. Reaching out to someone. Sad, as it seems she is so not connected to any significant adult in her life. I can reflect upon this in terms of resilience theory. Important concept here.*
**Study incentive**

The recruitment incentive was increased from $20.00 to $30.00 for either an iTunes gift card or movie pass. All of the youth wanted the movie pass, probably because they can either download music for free or do not possess a computer. The movie pass seemed to be a “big hit” with the youth. Finding the right recruitment incentive for youth is important.

**Theoretical sensitivity**

The researcher used her knowledge and skills as a social worker to engage the grandparents group from the National Grandparents Support Group and alleviate their concerns by reviewing issues related to the study protocol that included confidentiality and that no information would be released to their CAS worker. Engaging the trust of the group was central to the recruitment of potential study participants and, once trust was built, individuals came forward. It seems very relevant to reflect upon this with respect to theoretical sensitivity because the researcher brought her clinical skills to bear when engaging an initially very untrusting group of kin grandparents.

**Reflexivity**

A memo from an interview with a caregiver from the foster care stream included the following excerpt:

*This interview certainly evolved into something different. This is a foster mother, who was herself was placed in a kinship home when she was growing up and talks about being moved from family member to family member. Her own parents died when she was young—both drug addicted.*

*Interview themes:*

- *She spoke over and over again about the need to advocate for children and youth and that she didn’t have anyone to advocate for her when she was growing up.*
• Need to build relationships with workers and parents, as this is critical to build a relationship with the child.

• She spoke of authenticity—being real, fighting for what you believe in.

A memo from an interview with a caregiver from the kinship care stream included the following excerpt:

Interview with B and C. This interview went on for quite some time: 2.5 hours. I could have stayed on the first interview question, tell me about your experience with CAS, and we could have remained there forever, in fact, I really didn’t cover the interview guide questions sequentially at all. There was a lot of emotion and pain there, and this is a couple that really felt ill treated, and not treated with dignity by child welfare professionals. They were served by the (unnamed site not part of research study) but kept saying that no one knew what the Catholic values were.

Children were initially brought into foster care and placed separately so the trauma of being removed, but also the trauma of being separated from siblings must have been profound.

B. talked about pouring their life savings into legal bills and building a new addition onto the house to house the three grandchildren. Not prepared to change their lives around but did so anyway.

No one advocating for them.

When I asked them what three things need to change for kin families from the perspective of CAS they said:

• Follow the law: don’t let emotions get in the way.

• Someone over top of CAS needs to advocate for kin families.
Training for workers: teach them not to lump all kin families into the same pile.

Workers need to know what services are available for kin families.

Themes that came up in the interview:

Legal barriers.

Financial responsibility.

Pick sides (felt mother was more supported than them).

Walking tightrope between CAS and parents.

Worker competency.

Advocacy.

Part of the family.

For myself, this was a long and emotional interview.

Study incentive

The initial study incentive was a $20.00 Wal-Mart gift card. The incentive was increased to a $30.00 Wal-Mart gift card when it became clear that kin participants were not coming forward. It must be said that all participants welcomed the gift card, but the participants from National Grandparents Support Group were elated to receive it. A substantial number of the interviews with kin caregivers took place a week before children returned to school and many of the caregivers reported wanting to use the funds for back-to-school shopping.
**Ethics review process**

The development of the study protocol was a detailed process because of the vulnerable nature of the groups of individuals being studied. The development of the initial protocol required a clear set of procedures for each of the three study groups, including an information letter and consent form.

The process for developing the protocol required several revisions and reviews by the Research Ethics Board. In total, the development of the ethics protocol took approximately nine months to complete because not only was this group potentially vulnerable, but the study required a separate and discrete protocol for each of the three constituent groups: workers, caregivers and youth (REB protocol Appendix E, cover letter and consent forms Appendix F, REB approval Appendix G). A further analysis of the ethical considerations for each group is incorporated into the discussion.

As noted in the recruitment section, it was difficult to obtain participants from the kin youth and kin caregiver groups. This researcher returned to the research ethics board for a total of six study amendments (ethic protocol, information letters and attached approval letters). Table 4.6 describes the premise behind each subsequent amendment.
**Table 4.6.** The premise behind study amendments.

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<th>Rationale for required amendment</th>
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<td>Three new sites recruited for study: sites 1, 2 and 6.</td>
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<td>3</td>
<td>Conduct study interviews with kin caregivers outside of the office location.</td>
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<td>Study incentive increased to $30 per participant.</td>
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<td>Kin youth recruited through the National Grandparents Support Group.</td>
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</tr>
<tr>
<td>6</td>
<td>Kin youth to be contacted by site 2’s kinship supervisor, who would then ask the youth’s permission to be contacted directly by K. Dill.</td>
<td>October 6, 2009</td>
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</table>
The researcher obviously moved through a learning curve following the completion of the detailed protocol, because the following amendments were approved each time without any changes from the REB. The development of the protocol, although enormously challenging, provided the researcher with a very comprehensive learning experience.

**Data analysis framework for study**

The concept of data analysis will be explored in this chapter, but the actual analysis will be incorporated in the findings section. Although there are three data sets or groupings in this research study (workers, caregivers and youth), the same process of analysis has been used for each of the three data sets.

**Open codes**

Open or line-by-line coding involves going through all of the text and analyzing each of the study interviews. In the overall analysis of each group, a listing of all of the open codes is provided. Open coding allows the researcher to cull the essential elements of the interview and generate a substantive number of themes and ideas.

**Axial codes**

Axial codes are a higher-order process for coding. Using NVivo software, this is the process whereby the open codes are situated within larger themes called tree nodes. For example, a number of open codes with reference to the word “relationship” emerged throughout. These themes were then “filed” under the umbrella tree node called “relationship.”

**Focused codes or themes**

This is this highest order process of data analysis and provides substantive themes related to each of the three sub-groups. For example, the worker group may generate four or five meta themes, which could include relationships, stigma/shame of being in care and clinical knowledge.
**Matrix analysis**

Matrix analysis in NVivo allows the researcher to compare pairs of items and display the results in a table or matrix. This analysis provides the capacity to compare and contrast kin caregivers to foster parents, while at the same time removing the other data sets from the analysis.

**Demographics**

Demographics for each of the data sets are provided at the beginning of each section.

**Analysis write-up**

Wolcott divided the analysis of qualitative data into three categories (Wolcott, 1994):

1. **Description**: the author addresses the question of “what is going on here?” This part of the analysis includes observations made by the researcher.

2. **Analysis**: the researcher explores the interrelationship of various themes.

3. **Interpretation**: this part of the analysis makes sense of the emerging themes and issues.

**Summary**

This chapter has outlined the complex array of steps required to carry out this qualitative study. In essence, this study contains three studies in one. Within the three main groups there was a requirement to carry out a separate recruitment strategy for each stream of kinship versus foster care, resulting in a data-collection process for six different groups:

1. Workers: kinship

2. Workers: foster care

3. Kin caregivers

4. Foster parents
5. Kin youth

6. Foster youth

The study involved a rigorous ethics protocol and data collection process, and the learning throughout the process has been rich and rewarding. The rewards will be detailed in the chapters to follow.
Chapter 5
Findings

Introduction

This part of the thesis outlines the findings related to each of the three groups: workers, youth and caregivers. The chapter begins with an overarching analysis of the total data set from a demographic and data analysis perspective.

The examination of each group will follow sequentially, beginning with workers, then youth, then caregivers. This section required considerable forethought to construct. It contains the findings of essentially three studies in one. Many important and relevant themes emerged from the data. Given the breadth of the study, it has not been possible to delve into a deep analysis of each of the themes. Therefore, some of the more striking themes have been highlighted with a richer and more in-depth analysis.

The chapter concludes with an overarching analysis of the interrelationship between all three data sets.
Worker findings

Demographics

The gender distribution of workers is shown in Figure 5.1.

![Gender Distribution of Workers](image-url)

**Figure 5.1.** The gender distribution of the worker participants.

Overarching themes

The following are the overarching themes that exist for the worker findings. These ten substantive themes provide a framework for understanding the complexities of emerging issues drawn from the data analysis.

1. Training.

2. Stigma and shame.

3. Similarities between kinship and foster placements.

4. Differences between kinship and foster placements.
5. Screening.


7. Entering the child welfare system.

8. Organizational factors.


10. Access.

**Training caregivers**

Throughout the interviews, both groups of child protection workers—kin and non-kin—were unanimous that kin families have different sets of training needs compared to foster parents. Workers described a training model developed for foster parents that is predominated upon the belief that the child is entering a stranger’s home (foster placement), which is not usually the case with kinship placements. The sense from workers was that this training system dismisses the reality for kin caregivers, who already have the child placed in their home and typically have a pre-existing relationship with the child.

*In foster care you are building a relationship with that child, because a good part of the [PRIDE] training is having an understanding of, even though the child is in care, they still love their parents, they still miss their parents. You know, when you’re [a] foster mom and you have no relationship to the biological parents at all and you’re dealing with this child, sometimes it’s hard to understand. Whereas kin, because there is a relationship somehow to the child and they know the biological parents in some capacity, they have a better understanding of “You know what, I understand that even though mom’s not a good mom, that my child still loves her.” (Kin worker)*

These workers articulated how kin caregivers do not require a training model that helps them to understand the emotional complexities of the situation because they already
know and understand many of the challenges and issues that the child faces when entering into care. Instead, these workers highlighted the need for a training model that provides kin caregivers with support for and understanding of issues such as divided loyalties, sadness about their own adult child’s challenges in life and possible fear regarding the intrusion of the child welfare system.

**Engaging kin caregivers in training**

Workers spoke of the challenge of engaging kin families with the current training model.

> All my kin have never done any extra training. [They] never have asked me. They get the mail-outs, but I have never had a kin ask for anything extra, nothing. I don’t know why, I’ve asked them, I have suggested training but [they reply], “No it is okay” and I wonder if it is because they think they know the kid more. (Kin/foster-care worker)

As the worker above states, it may be that by the time the child arrives, the kin caregiver feels that they already know the child and so training seems irrelevant. There was minimal discussion with both kin and non-kin workers, however, of the possibility that kin caregivers find that the PRIDE curriculum lacks a specific focus on the challenges of kinship placements. This issue was explored further in interviews with kin caregivers (see later). These caregivers reported feeling alienated in PRIDE training sessions and described how the curriculum does not meet their specific needs.

**Training foster parents**

Workers reported that the PRIDE training for foster parents provides these individuals with considerable depth of understanding of how to manage and provide support to traumatized children.

> We have had foster parents who left fostering and came back to it and are now doing the PRIDE training again…they have reported to me, if they had had the PRIDE training 10 years ago, [the training would have given them a better understanding of the child’s placement]. (Foster worker)

There was a sense that the PRIDE training gives foster parents an understanding of what
issues are faced by the child. In contrast, this level of understanding and tacit wisdom about the child’s circumstances and context already exists for kin caregivers. Workers understood that, in many respects, kin caregivers have an innate sense of the needs of the children placed in their care. Workers articulated how the PRIDE training provides foster parents with tools that kin caregivers already possess—an in-depth understanding of the complex issues for children removed from their parents’ care, which can encompass grief, loss, sadness and relief at being removed from a potentially unsafe situation.

**Stigma and shame**

The notions of stigma and shame were explored in relation to kin caregivers and children removed from their parents’ care. Workers discussed their feelings of sadness when it came to children experiencing a sense of shame and sadness for being placed within the child welfare system. These workers related their appreciation for being able to place children in kin families as a way of removing the label of being a “Children’s Aid Society [CAS] kid,” rather a child who is simply living with grandma.

**Stigma towards kinship placements**

Some workers related their own underlying perceptions of and stigma towards kinship placements. Such perceptions suggest that these workers believe kinship placements to be another type of protection case in which, as the old adage would suggest, “The fruit doesn’t fall far from the tree.” This term is used to express the belief held by some CAS workers that caregivers are clients themselves, who have issues that limit their capacity to parent extended family members. Although no worker overtly said “extended family should not be caring for children,” underlying sentiments shared by some clearly demonstrated opinions that kin caregivers have challenges or issues that place them in the same realm as the protection families that these workers are serving.

This is an issue that required great contemplation and consideration by the researcher because, on the one hand, as is illustrated in the analysis of the caregiver findings, kin grandparents felt to a large extent labelled as “bad parents” by the system. In contrast, from a worker’s perspective, there can be times when these same caregivers do pose a risk to the child. It is crucial, but no easy task, for workers to find a balance. It was clear
from the interviews, however, that some workers held firmly to the believe that kin caregivers are seen as “second-class options.” Others, on the other hand, challenged this belief system and maintained that when kinship works, it is the best option for vulnerable children and youth.

**Non-kin workers stigmatize kin families**

Workers who expressed a level of stigma or shame towards kin families were individuals who did not possess a specialization in working with kin families. As one non-kin worker said, “I always liken my kinship placement to family services placements, the issues they have are like family service families.” Another worker went on to state, “You gotta remember those grandparents raised those parents.” In one interview with a non-kin worker, the worker’s voice lowered and she whispered to the researcher, “What I am seeing is that, we are accepting people as foster parents…otherwise [voice lowers] they might not get accepted [as caregivers for the child].” The perception by some workers is that standards are lower for acceptance of kin families, and that some kin families are being accepted as carers when they should not be.

Kin workers who possessed a specialization in working with kin families echoed time and again their concern that child welfare workers who do not work with kin families on a regular basis do not understand the unique issues and challenges faced by these families. Workers with a specialization in working with kin families highlighted the stigma that non-kin workers hold towards kin families.

*I think the other big difference is some people in the agency, some workers, see kinship...as clients. They are not clients, you know what, they are like a foster family, a foster family is not a client...they work with us to make sure children are safe. With a lot of times in kinship, because there is a relationship to the client, they will view the kinship family as a client.*

(Kin worker)

These workers commented on how they view their role in terms of educating staff members on the unique challenges faced by kin families. In fact, several kin workers expressed that some of their greatest frustration is not related to working with kin
families, but rather with the perceptions of others in the organization who do not understand the complexities and commitment of kin families. Those frustrations cause considerable stress for these workers, who see themselves as advocates for kin families.

### Stigma towards children in care

The notions of stigma and shame take on different meanings when it comes to children in care. Many kin and non-kin workers described the challenges that they perceive for children entering care and taking on the label of being a “CAS kid.” This issue arose because when workers spoke of kinship placements, being placed with a kin family was perceived to lessen that sense of stigma and shame. It was felt to be much easier, for example, to go to school and say, “I am living with my grandmother” than to say, “I am living in a CAS group home.” One kin worker spoke of how the public perceives child welfare with a continued sense of stigma and shame:

> I think there is still a stigma being involved with the CAS. And when you go to cocktail parties and stuff and you don't really want to say where you work because they have their own stereotype of [CAS work] and I think that's very difficult for families as well as for children...I think there is a stigma on the child themselves especially youth especially if they come into care [like a group home]. They [the public] automatically assume that the child is bad and I think that is very difficult.

This worker highlighted her own reluctance to speak of the work she does in child welfare, but then went on to articulate how the public perceives youth placed in group care as “bad kids.” The placement label carries a great deal of weight with the public. Kinship placements provide a stark contrast, because in many circumstances children who reside with an extended family member never have to tell others (i.e., school, friends) that CAS is involved with their case.

The next worker spoke of how children and youth sometimes experience internal conflict about being placed in a foster or group home. The child or youth often views their living situation as a place of safety and a refuge away from an unsafe home environment. At the same time, however, the placement can also be viewed as a source of shame, with the
child not wanting to admit that he/she is living in a foster or group home:

There’s still, as much as we wish it were not so, there is still the stigma attached to being in care. I think that the kids that are being, the kids that see CAS as a support, even they are still a little conflicted having to be in care, their families, still some embarrassment and shame, [being in care] is definitely a two-sided thing for kids. It can be a help and support and a healthy thing for them, but bottom line, they wish they didn’t have to have [it]. (Kin worker)

As one non-kin worker stated, “In kinship placements, they don’t see themselves as the foster child.” This is an important concept to understand—the kinship placement provides the child or youth with a different type of self-perception that does not include being labelled as a “CAS kid.” In the analysis of the data, not one worker stated that a child or youth who enters a kinship placement may experience stigma or shame. This is important to consider for future research and, indeed, it would be worth asking these same children in kinship homes if they indeed see themselves as foster children or “part of the family.”

**Similarities between kinship and foster placements**

During the course of the interviews, each worker was asked to reflect upon what he/she saw to be the similarities and differences between kinship and foster placements. The “similarities” part of the interview was typically very short, as many workers really wanted to jump forward and describe their perceptions of the differences that exist between these two types of placements. As one kin worker said, “I have more difficulty talking about the similarities than I do the differences, can I go to the differences?” Despite this desire to explore the differences between the placements, two themes did emerge from the interviews with kin and non-kin workers.

**Safe haven**

The responses for this section were unanimous, in that kin and non-kin workers saw kin and foster families as being able to provide a safe haven for children in need of protection. As one non-kin worker said, “The kids are in a safe spot, for sure, well, the children are out of harm’s way.”
All workers recognized that kin and foster families are similar in their desire and capacity to remove the child from an unsafe circumstance, and to hopefully provide a safe and nurturing environment. In a sense, this finding contradicts the belief of some workers that kinship homes can be sub-standard. Despite this, workers believed that kin and foster placements provide a safe refuge from the risky situations that children are often removed from.

**Policies and standards**

Workers from both streams also commented on the other striking similarity between these two placements types. This is, of course, the emphasis on following the same ministry standards.

*Similarities, of course the kinship families still have to abide by the same standard policies and procedures that the foster carer [does]. The money is not different, the fact that they have to come to looking-after-children training, like they have to do all the same stuff like foster care placements.* (Kin worker)

*The similarities [are] the responsibilities in providing for the basic needs of the children, that they each have regulations that they have they have to follow. [Although there] may be differences between them there, there’s some ministry requirements [and] agency requirements that they need to fulfil. So those are the major similarities that I see between kinship and foster placements.* (Non-kin worker)

These two themes were the extent of what kin and non-kin workers perceived to be the similarities between kinship and foster placements.

**Differences between kinship and foster placements**

All workers from both the kin and non-kin streams were asked to elaborate upon their perceptions of the differences that exist between kinship and foster placements. Workers explored both the subtle and not so subtle differences between these two types of placements.
**Level of support**

One of the themes that came out time and again in the interviews was the perception that kin families require either more support or a different kind of support. The following excerpt from an interview with a kin worker identifies her perception that kin families require more support. She outlined how she believes kin families can become enmeshed with the biological parents and their issues, and hence requires more intensive intervention:

> You know what, in some cases it is a good thing, but in some cases they get caught up in the one family [biological family]…They really get enmeshed. I find the kin families need a lot more support. (Kin worker)

**Kinship placements are a known entity**

Several workers identified the perception that when children move to a kinship home, they are typically moving to a known entity, a place that is safe and comfortable and where relationships already exist.

> Obviously a kinship placement would be an ideal situation for a child because it’s family. Everyone looks for a sense of belonging and if it’s something that’s familiar and known to them [then there is] better success at a permanent solution for that child. (Non-kin worker)

This next quote from a kin worker demonstrates the complexities of providing a child or youth with a home environment that is known to them:

> [In kinship placements] they are going to be with people hopefully they are familiar with and comfortable with because they have known them all their lives. That sense of familiarity, that comfort level is already there, they are not dealing with strangers, and they are not feeling like they have to get to know somebody. But [foster parents] have to get to know them, that is one of the biggest things that youth say, “You don’t even know me.” That’s what you get back, when you tell them they can’t have what they want or why things aren’t going the way they think they ought and we say,
“We think this is a better thing for you.” Lack of a better way to say it right now, but they say, “You don’t even know me.” [With kinship placements] that aspect of intimacy or knowledge is already there.

This quote from a kin worker states that when children are placed in stranger care, they may begin to see the world as not understanding who they are. Kinship placements provide children with an innate sense of grounding related to their identity, which is linked to a sense of family and community.

**Kinship placements provide normalcy**

Although discussed in the context of access visits, workers expressed the view that kinship placements could provide greater links to the child’s existing world. Workers viewed kin families as having an intricate knowledge of the protection issues that led to the removal of the child or sibling group from the home.

*They have long-term relational information about the bio parents, can see where the bio parents are at. For example with the addictions families, they have an understanding of the recovery stage where the mother and father are at, as compared to the foster families who may never have really had any personal experience with addiction [and] just see the parents as a “drug addict.” Um, so I think kinship placements for kids normalize life for them. [The children and their parents] can have access in the community, at their home or in the kinship home, as compared to kids in foster, [where] a higher parentage have to have visits in a program, and so that is more normal. (Kin worker)*

This quote highlights the in-depth knowledge that kin families possess. This provides a greater understanding and context for where the child and biological family are coming from.

**Screening placements**

The subject of screening kinship placements was an important theme that emerged from the interviews with both kin and non-kin workers. This theme illustrates the importance
of ensuring that both kin and foster homes are safe placements for children. Underlying this theme of security for children, however, were issues of clinical complexity that explain some of the essential differences that exist when trying to screen and assess kinship versus foster placements.

**Screening kinship placements**

Although all workers use the SAFE (Structured Analysis Family Evaluation) tool to assess kinship and foster placements, there was a perception that greater emphasis was placed on child-specific issues when assessing kinship homes. This makes sense because the child is already placed in the home, so issues related to the child in the placement take up a greater focus and emphasis. In comparison, a foster home is being assessed for the placement of a child or children who have yet to arrive.

One kin worker articulated how kin families do not understand why they must go through such a rigorous screening process, given they are already family and implicit in this role is the right to care for children:

> With kinship, it’s like “Why do I have to go through this whole thing,” you know on the grandpa, on the grandma, on the aunt, on the uncle, on the best friend, like “I have raised children, my children are good, why do I have to go through all this paper work and all the things I have to do, I just want to take care of my grandbaby,” or my niece, my nephew, whatever the case may be. So right away you have someone who is very defensive because they don’t understand why we are involved and why we have to assess them.

This is an important issue for further consideration because kin families have different needs and requirements. They already have the child placed in their care, and so the system needs to adapt any screening mechanisms to this unique form of placement, which differs from the traditional foster placement.
Kin families: shades of grey

Other workers talked about having a different criteria for how they screen kin families. They spoke of rigorously following ministry standards when assessing foster and adoptive homes. When it comes to kin families, however, the assessment criteria and requirements are seen as more fluid and flexible. One foster/kin worker stated the following:

So we will go out and do the five interviews, so all that is the same for foster care and kin, but the kin it is more child-specific, so there we have a lot more room to expand and really hit on the strengths and skills of kinship care providers.

 Implicit in this statement is the belief, held by this worker, that screening kinship placements is more strengths-based as a way of ensuring that the kin family is screened in versus screened out. This focus on strengths and what is perceived to be less rigorous screening was articulated by a kin worker:

That [foster parent applicant] makes it or they don’t. There is no grey area. It’s black and it’s white. You either pass or you don’t pass. Whereas in kinship, there is a grey area. And sometimes we let things slide, not awful things, but things that probably they wouldn’t pass as a foster parent, because there is a relationship to that child.

Another kin/foster worker spoke of her unique response to screening kin families versus foster families. She identified smoking as an example of how she may negotiate the rules differently with kin families:

There are a number of different issues that, for example, they may be smokers. So with an adoptive home, we tell them you can’t have a placement until you stop smoking, whereas with a kin home I am more apt to say okay, give me your smoking cessation program, which is very different than what we do with an adoptive placement. If that is lowering
the bar a bit, [and] I don’t think that it is, I am still getting the same outcome, what is in the best interest of my child.

It is clear that these workers do not view these differential methods of screening kin families as substandard, but, rather, as simply working within the system to produce the same outcome for the child.

**Screening out kin families**

An interesting theme that emerged in the interviews with kin workers was the perception that if one has to screen a kin family out, this results in greater upset and emotional turmoil for the family and potentially for the child. The kinship home has a perceived emotional investment in the child that can result in greater challenges, as compared to screening out a potential foster parent applicant. This sentiment was articulated by a kin worker:

> [If we say to a foster carer] that child is not for you, you know it’s not a good placement for the child and we need to find somewhere else, they’re like “OK.” But when you say that to a kin family, that we’re not placing your biological relative with you, emotions are extremely high.

This is an important point for consideration because if this is the case, do workers unconsciously try harder to retain kin families and not screen these individuals out, because of the emotional investment that these individuals possess in caring for these children? Many of the kin caregivers spoke at length of the pain of being denied the ability to care for the child and how this denial creates great emotional anguish. Workers sense this anguish and to say no to a family who loves a child but cannot care for him/her can create much emotional angst and turmoil. It is the subterranean and emotional complexities that are often not considered when thinking these issues through. Screening out kin families is not a “black and white” decision and requires real consideration by the worker, the supervisor and the organization as a whole.
**Relationships**

One of the fascinating issues that has emerged with respect to this study is the complex interplay of relationships between all participants. Throughout the findings section, it is clear that the overarching notion of relationships is a critical issue to consider in relation to the sub-groups of workers, caregivers and youth. The worker section demonstrates this constituent group’s deep concern with creating positive working relationships with caregivers and youth. The worker interviews highlight the consequences, both intended and unintended, of not forging strong and resilient relationships between all three parties. At a recent conference, coordinated by the researcher in her role as the PART Executive Director, Dr. Robbie Gilligan from Trinity College, Ireland, spoke of the capacity of the relationships of professionals to impact the enduring resilience of children and youth who have experienced the child welfare system.

**Relationships between workers and caregivers**

One of the issues that emerged throughout the course of the interviews was the complex relationship that exists between workers and the caregiver group. The interviews demonstrate this relationship, but underlying it is a very subtle difference in how workers perceive their relationships with kin caregivers versus foster parents.

**Workers relationships with foster parents: making the right match**

The following quote show workers’ perceptions that both kin caregivers and foster parents require support and guidance in their role in caring for children. This non-kin worker points out the need to have policies and procedures in place to guide workers’ interactions with and ongoing support of foster parents:

*The agency does acknowledge the effect on the foster parents, but there could be some room for better supporting foster parents. I don’t know if there is an agency-wide protocol towards supporting foster parents, in that way. It could be more at the discretion of the worker, depend[ing] on the relationship with the foster parent and with personalities. [The foster parent may have] a relationship with a worker, whereas with another worker the foster parent may not feel as comfortable.*
The underlying subtlety of this statement demonstrates the worker’s perception that foster parents need to have a worker who is the right “fit” for them; that not all workers are a good match in terms of working with, connecting to and forging a relationship with all individuals. This is an important point, because this worker is suggesting that workers should be matched to foster parents to ensure that there is a positive working relationship—much like children need to be matched and placed in the right home, so, too, must foster parents be matched to the “right” worker.

This issue was further explored in the interviews with foster parents (see the next section). These caregivers reiterated that the goodness of fit between themselves and the worker is critically important as a means of fostering an enduring and effective relationship with and for the child.

**Workers and kin caregivers: moving beyond the label of “protection client”**

When workers spoke of their relationships with kin caregivers, there was, at times, an underlying tone of “I have to trust you first, and then I will treat you more like a professional.” The following quote from a kin worker demonstrates a belief that workers are less trusting of kin caregivers:

> I wondered if I wasn’t giving them enough support because they start getting that, do they really know, are they doing something sneaky, are they giving access and not telling us [...] And just realizing that, I just kind of let it go, I left it up to them. If there were any appointments, I left it up to them [...] I just kind of backed off and, as a worker, you think this [engaging in a trusting relationship] is what you have to do, but I just backed off.

This quote suggests a gradual evolution of the working relationship between the kin worker and kin caregiver. This worker demonstrates her mistrust of the caregivers and the worry that they might do something “sneaky” (i.e., provide access to the parents unbeknownst to the worker). Over time, the worker appeared to sense that the child was safe and the mistrust gradually moved into a more trusting and collaborative relationship.
A subtle difference: CAS workers’ relationships with kin caregivers and foster parents

Although not overt, a subtle difference exists in the relationship between workers and kin caregivers and workers and foster parents. The underlying theme appears to be one of a more formal, collaborative working relationship between workers and foster parents that is quasi-professional. Workers view foster parents in a formal, more structured role in their interactions with children in care. In contrast, a worker’s initial relationship with a kin caregiver is sometimes based on mistrust, feeling that the kin caregiver may place the child at risk. Workers may on the surface appear to articulate that all working relationships between caregivers and workers are the same, but underneath the surface there appears to be a sense that kin caregivers may not offer a child a safe or nurturing environment. Therefore, the initial working relationship between the worker and kin caregiver appears to be fundamental as the two parties work through some of the possible issues of mistrust and challenges in their working relationships. The caregiver findings section (see next) shows the parallel level of mistrust that exists between the kin caregiver and worker.

Relationships between workers and children in care

Another underlying feature of the concept of “relationship” is the one that is forged between the worker and the child in care. As the kin worker below illustrates, some children and youth seem to connect to particular workers, and these relationship can exist and sustain themselves over time. The worker describes how he was able to create a working relationship with some children and youth and that, in one circumstance, this relationship endured over the course of time:

There are just always some kids, there is something about them, you can get a little closer to, or more open or receptive to, while they are in care, not say let go of their family, but [it] allows them to better connect to someone else, I ran into one girl at the court house, she was a Crown ward and now she is a grandmother, so, uh, and she was fortunately only supporting a friend whose youth was at court because it was youth court, and she has called me a few times, every five years or so give or take, and
um, because she wants me to take her out for lunch. How old is she now? She is in her 40s. I hate to say it, but you always have your favourites and you are just able to connect with some better than others.

Underlying this concept of relationships is the notion that there are some children and youth who workers feel they can connect with. In child welfare practice, there is often the sense that all workers should be able to connect with all children and youth. And yet, as in all aspects of life, the ability to forge meaningful relationships with all individuals is not always possible or even realistic. Just as there is a need to create a meaningful fit between workers and caregivers, there is also a need to forge good working relationships between workers and children in care.

The following quote from a non-kin worker demonstrates this need for a goodness of fit between workers and children in care. This worker highlighted how in many circumstances, if a child in care does not have this working relationship, the situation can fall apart:

Every once in a while, we will hear from the older kids, and they will call back occasionally, “Just want to let you know how I am doing.” But that points out how important it is for these kids to do something like that, and all of them don’t do that, weren’t as engaged with their workers. They lose out on that connection to their past, rootedness, they may be able to re-involve themselves or connect with birth families.

This finding is important to consider because there may be times when workers are unaware of the impact they can have on children and youth. The worker can provide a sense of history and connectedness for the child or youth, particularly as the individual moves towards adulthood.

**Relationships between caregivers and the biological family**

Workers held interesting perspectives on the subtle differences that exist between caregivers and biological parents. All workers spoke of the more complex interaction between kin caregivers and biological parents because of their pre-existing relationship:
Foster care, you may never ever meet the biological parent. You know you are caring for a child, have really no idea if you saw [the parents] on the street if that was them, because it is protection, they come here for their visits. Whereas in kinship, you have a relationship to the biological parents. So it’s trying to care for the child and protect the child at the same time, which I find is very difficult.

In contrast, workers demonstrated the relationship that exists between foster parents and biological parents. Workers from both the kin and non-kin streams highlighted the distance that exists between foster parents and biological parents and how this relationship can sometimes be built upon fear. Workers expressed how foster parents often see biological parents in a negative light, which is based on protection issues. The following is an excerpt from an interview with a non-kin worker:

Foster parents are afraid of bio parents. I can give you one example, of a dad came to [the foster parents’] house when he was quite high and that happened because one day, their car was broken and he said, “Well, I will just drop them off [at the home].” And course he is high and that frightened the foster parents, so it is really hard sometimes. But that creates some difficulties when the kids are transitioning back home.

This quote shows an interesting issue that exists between foster parents and biological parents—there are times when the working relationship between the foster caregivers and the biological parents is predicated upon fear, and this fear can have an impact on outcomes for children in care. If the foster parent is afraid of the biological parent, this can result in them not assisting the child when he/she returns to the family. The transition back to the home environment is critical. If a child does not have a sense that the foster parent can forge an enduring relationship beyond the child’s return home, this may lead to challenges for the child’s transition back to the home environment.

Workers articulated how children who continue to have enduring relationships with foster parents have a sense of stability and comfort after they return to the home environment. In interviews with youth, these young people expressed divided loyalties over returning
home to one parent and not the other. In some respect, the child or youth may also feel a sense of disloyalty to their birth parents by continuing to retain a relationship with the foster parent. If the foster and biological parent do not have a relationship, the child may be challenged to continue a relationship with the foster parent. The child or youth may view the decision to continue calling or seeing the foster parent as disloyal to the biological parent. This is an important clinical issue for workers to consider—that the maintenance of an ongoing relationship between the child and the foster parent is predicated upon a relationship between the caregiver and the parent. If this relationship is based on fear, this creates the potential for triangulation for the child and has may diminish his/her safety net upon returning home. The cultivation of this relationship between the foster parent and biological parent is an essential foundation for the child’s smooth transition back home.

**Relationships between caregivers and children in care**

Workers from both streams articulated the belief that kin caregivers, because of the pre-existing relationship, have a much greater appreciation of and commitment to the child placed in their care. The quote below shows the perception that kin caregivers are more committed to the plan for the child. Foster parents, on the other hand, are seen as unwilling to continue a long-term interaction and relationship with the biological parent, which is viewed as pivotal to maintaining stability for the child both in the short- and long-term:

> [The] kinship home, they are actually part of the plan, they are a member of the plan, which is the goal to return the child back home and seen more as a, um, plan to interact with both the parent and the society, whereas foster parents don’t and [prefer not to].

Workers felt that foster parents tend to have the capacity to remove themselves from the “high emotion” of the pre-existing relationship that exists between kin caregivers and biological parents. Instead, workers spoke of how the focus of foster parents is on carving a relationship with the child that is exclusively focused on the child’s needs, as compared to being torn by other relationships with the biological parents. In some respects, workers
seemed to see this situation as preferable for children—this exclusive emphasis on the child’s needs, instead of situating the child within the context of the larger family system, was seen as preferential.

**Pre-existing relationship between kin caregivers and children in care**

One of the most important findings that emerged in the interviews with kin and non-kin workers was the innate belief that the pre-existing relationship between kin caregivers and the child can reap real benefits for the child. The kin caregiver already knows and understands the complex needs of the child:

> I guess, the similarities, the parents, the school, the benefits, if you have a pre-existing relationship, hopefully you have visited these people and you know the house, you know the community, you feel comfortable. I really advocate for kinship.

This pre-existing relationship seems to give kin caregivers the capacity to overcome and persevere with children in their care:

> It’s just like with your own children, they do something really stupid and you forgive them, and move on and I think in some situations, it can be kind of stressful. It can be so stressful to the caregiver, [with] no connection to that child to forgive and forget and to move on and so, um, I don’t know. If you actually, [if] you love the kid, it is easier and to accept them, with their frailties and flaws.

In contrast, kin workers who had supervised kin families where there was no pre-existing relationship viewed these homes as more similar to foster placements:

> I just found in a number of my kin homes, where there was no existing relationship, they were much like foster parents. Where the [child’s] behaviours get to them, they [the kin caregivers] feel more rejected, they get upset when the child doesn’t do what they are supposed to have done. They are harsher I find, um, on kids and behaviours.
When workers were asked if they screened and assessed kin caregivers who did not possess a pre-existing relationship differently than kin caregivers with a pre-existing relationship, the response was no:

*I think we note it but I don’t know if we do anything differently to screen relationships. Sometimes I wonder even about that, should we screen a bit more, maybe we need longer pre-placement visits, and then you know sometimes, it is a honeymoon...I don’t know, it’s something I’ve talked to my supervisor, “It’s my daughter’s best friend,” and I have had a few of those that have not worked.*

This worker demonstrated her clinical belief that workers do not pre-screen kinship placements with the focus on the pre-existing relationship. She articulated the belief that without this pre-existing relationship, these types of placement are more apt to fail. This is an important issue to consider for all child welfare workers who are working with kin families and assessing their capacity to make a commitment to the child in both the short- and long-term.

Another kin worker reiterated this concern that without a pre-existing relationship with the child, the placement is more subject to fail:

*It was the cousin’s daughter’s kids. They stepped forward, it really wasn’t successful and we had to move them. And I had another situation, same thing—couple had one daughter, they are kin, they are cousins, I think they were cousins of these kids. Never seen the kids before, and got to know these kids and all hunky dory, and then it just fell apart. And this particular family, they were pretty rigid and it didn’t work, we had to move them to foster as well.*

Workers viewed this pre-existing relationship between the child and caregiver as pivotal and based on an innate attachment to the child. In contrast, workers viewed fostering as a “job” that, over time, lacks commitment and loyalty to the child and family:
Many times in a kin placement, there is that pre-existing relationship of some sort, and in foster home[s], it is a strange environment, and most times in kinship, not necessarily stranger care, but in the situations I have been involved with it is mostly family or grandparents aunt and uncle, not always biological but known to the child. Kinship provides, um, I wouldn’t say a different level of love, but fostering is a job.

**Entering the child welfare system**

The interviewer asked all workers, kin and non-kin, what they perceive to be the challenges of entering and exiting the child welfare system. Most participants viewed the first question about “entering the child welfare system” to mean entering a child welfare placement. Various themes emerged in relation to children and youth entering the child welfare system.

**Experiencing separation**

All workers expressed their concern that children entering a substitute placement can experience separation and loss on many different levels—from parents, siblings, friends, school, pets and extended family. One non-kin worker expressed this complexity of separation and the desire to give the child information, particularly as it relates to the long-term plan. However, workers typically do not know what the long-term plan will be for the child:

Certainly when children first enter care, it is very upsetting, emotionally traumatic, having been separated from their family. I always try to keep siblings together, [but] that is not always possible and that can significantly impact on a child as well. If a child doesn’t have a lot of information, [that] can also lead to some anxiety for the child. A lot of unknowns, even on the part of the worker. [The child] needs a lot of support, they need a lot of skills from foster parents, and workers, working together as soon as possible to plan for the child and for their return home, but even the day-to-day challenges are tied in with the practical stuff. Most times they can’t remain there with their old school, and they
are transferring and can’t remain with their old friends, so the day-to-day stuff.

Another non-kin worker articulated the success of providing children and youth with the opportunity to visit a placement ahead of time (a pre-placement visit) as a way of providing them with a sense of what the home will be like. The worker demonstrates how the pre-placement visit is beneficial to the child and biological family:

Pre-placement visits can look different, but I have had some situations where it was helpful to the child and the bio family because the child had the opportunity to meet with the family. What we have done before is a respite placement, so going for respite and then plan a permanent placement and that seemed to be more successful. What I try to do is to draw upon my experience as a child care worker to shape my work. I think of questions, for children, so keeping that in the back of my mind to draw upon this, any kind of information that can be provided to the child to help reduce their anxiety.

This is an issue that will be explored further in the analysis of the caregiver and youth groups.

**Organizational factors**

**Organizational philosophy**

Worker interviews were held at four different child welfare agencies across the province. Engaging several different sites provided this researcher with the opportunity to witness how different agencies are organized with respect to placements for children and, in particular, how different organizations provide services to kin families. Although 53 agencies have the same mandate of protecting and serving vulnerable children and families, there appears to be a divergence in terms of how services are provided to foster families and, more specifically, to kin families. The following quote illustrates how one particular agency ensures that even during after-hours, children are still placed in kinship homes:
I used to do after-hours service. I think one of the things that makes us stand out from some of the other agencies is that we, even on after-hours, we are very very quick to make sure children and youth stay with families. We would do a place-of-safety application and other agencies would place in foster care wherever possible. We would explore this at night and this is what is good about us.

This quote depicts a sense of pride that this worker has with respect to placing children with kin families, even in the midst of emergency situations.

Another worker spoke of her agency’s philosophy with respect to returning children home:

I would find workers from other agencies, the child went home and no family work [was] done, and it just seemed [that] the agency makes this decision without the child having some input, and I used to go to bat for the kids and I found that really difficult. Our agency doesn’t do that. We do a gradual return home. It may take a while. We take our time, it is not immediate, you are moving, it is very distressing for the kids.

It is clear from the interviews that workers view their own agencies as possessing a certain philosophy in terms of working with children in care. There is a measure of pride and a sense that, in their own way, they are providing the best service possible to these children.

Organizational compartmentalization or ‘working in silos’

Although workers spoke of their pride in the work that they do with children in care, there also seemed to be an understanding that not all of the elements within an organization work together to promote cohesion of service delivery to vulnerable children. In some of the larger agencies there were several workers assigned to a child’s case. It was felt that having multiple service providers could lead to complications for the child and caregivers, whether kin or foster parents.
You come into our department [and] they have an A worker who is the one who goes out and does the initial stuff, they have the B worker, which is the parents’ worker, and the C worker, which is the child’s worker. I come in and I assess and then I move it over to ongoing. So by the time it’s all finished, they would have been dealt with [by] five or six workers.

(Kin/non-worker)

In one interview, a kin/foster care worker spoke of how her role is to study the kinship or foster placement, but at no time is she required to meet the child being placed in the foster home environment. When assessing a kinship placement, however, the requirements are different and it is seen as necessary to interview and engage with the children in the home environment:

*In the home-study worker role, unless I am doing a kinship assessment, I don’t speak with the children. When I am doing a regular foster home study, I am meeting with the applicant and meet with their children, but not [with the] children in care. I had a home study, kinship in-care. It was nice. They [the children] were older, they were already in the home, they were able to express what is working for them…that was the only instance, to have the interaction.*

This quote is quite telling in that it speaks to a greater compartmentalization when assessing foster families. The child placed in the foster situation is not seen as part of the “equation” when completing the assessment. In contrast, the child in the kinship home is seen as an integral element of understanding the placement and how it will be sustained and supported over time. This is a critical issue to consider—the system focuses exclusively in foster caregivers when completing the home study; in sharp contrast, the child in the kinship placement is included in the analysis. This exclusion of the child from the analysis of the placement requires more analysis and forethought by the system. When this researcher was a front-line worker and supervisor, she noted many times that foster placements were referred to as “beds” instead of placements for children.
Organizational kinship specialization

An important finding that emerged in interviews with kin workers was the sense that some organizations—two of the four participating agencies—had forged specializations in the area of kinship placements. This level of specialization leads to a different way of engaging and working with families, which sometimes involves reduced case loads:

*I think in resources, [foster care workers] had 21 or 22 and I had 15, but I was working [part-time] so three assessments. [The case load] is smaller. The idea was, [kin families] didn’t have the training, they have a ton of questions about agencies and policies and court, and how they feel about access. That whole triad thing, to debrief through that, it is different. I think a lot of kin who are grandparents, aunts, uncles have known the parents for such a long time, there is a relationship regarding how the family member’s feeling, why are you doing that [caring for the child] and dealing with other family members judging them. It’s interesting. I quite enjoy it, I enjoy more than just resources, I think it is really beneficial.*

(Kin worker)

This worker demonstrates the need to provide specialization to kinship teams because of the organization’s belief that these families require more support and intervention because of the level of clinical complexity. In contrast, another worker at a different mid-size child welfare organization felt that the agency requires a specialization in the area of kinship practice and assessment:

*I think we should have a team that only devotes itself to kinship assessments, we don’t have that…um, I think that, uh, we are going to see more of kinship services, and we need to have knowledge of how to deal with this, and we often have difficulties with them [kin families]. (Kin worker)*

This worker clearly felt that kin families are more complex to work with and that a specialization in this area would result in better understanding and case management of these unique families and situations.
System bureaucracy

The workers showed, over and again, their own sense of issues related to system bureaucracy. Themes related to this issue were elaborated upon from the perspective of children in care and services to kin families.

System bureaucracy: children in care

The quote below speaks of how the non-kin worker wishes she could do more for children but, in a way, feels helpless to provide a concrete plan for children when they first enter care:

You want to provide the child with a concrete plan as to what is going to happen. You want to be honest, don’t to make any promises that you can’t deliver on, so that’s a challenge and it is a challenge working in the bigger system.

This worker reiterated how it is challenging working within the context of a bigger system and how planning for children in care is often out of workers’ control.

Another non-kin worker spoke of her anguish watching children sit and drift in care:

I don’t want to see kids sit. There is no permanence for them. They can’t be adopted. They can’t be returned home. I have one child, she is now six years of age, in an adoptive home [since birth] and she has still been sitting [for three years] and you think it doesn’t affect these kids, of course it does, of course it does. When I have to come in every month, I have one child now, he is eight, and he has been in this home for 1.5 [years], and he asks, “Do I get to stay here?” and I think, I hope so, and they know when we are still walking around they know that there is a risk, that we are going to move them again and we can’t get around that. We can say you are going to stay here forever, but we don’t have that kind of control.

Parents and caregivers can become frustrated with workers for not providing a concrete plan, but the reality is that workers themselves are often unsure of what the short- and
long-term plan will be. There is a need to push for permanency but, in many cases, the worker also lacks control over what the outcome will be for the child. This anguish is reflected in the voices of workers in this study, who themselves wished that they could provide more concrete answers and push for permanency sooner than later.

**System bureaucracy: kinship**

Workers spoke of the level of system bureaucracy placed on kin families. Although kin caregivers spoke eloquently of the same concerns over these issues, workers themselves described finding the level of intrusion into family members’ lives equally as challenging and frustrating.

*It is a lot and I think when you are doing this in kinship care and people complain about [it] and you tell them, “You have to go for a parenting course” and they say, “Excuse me, I have raised three kids, what are you doing making me go for a parenting course?”* (Kin worker)

This kin worker expressed his frustration at a system that constantly focuses on risk instead of engagement with families:

*You know, no matter what we do, no matter how humanly possible you try to do everything perfect, crap is going to hit the fan at some point. It’s life, it’s gonna happen and I think a lot of the stuff that is put into place is for the politicians to say well, we’ve got all these standards, you obviously didn’t meet the standards, so point the finger somewhere else. Oh, that’s pretty cynical, I know that, but I do think that the vast majority of the time there is sound reason why it is there, but sometimes it just feels like overkill, and you just, and everything takes so long, to do the assessments and do the approvals, and this goes across the board with court proceedings. It’s just a shame that it has to take as long as it does and people are left up in the air not knowing.*

Another kin worker demonstrated what she perceives to be the challenge for kin families: having to tell one’s story repeatedly to different workers at different points in time:
Well they are telling their story over and over, you know they’ve dealt with so many people, and again because the child is placed on an emergency basis or coming on an emergency basis. They are not prepared for all that.

This repeating of intimate family details time and again to complete strangers can be very challenging or seen as a violation of privacy for some kin families.

**Motivation**

The concept of motivation came up as a theme several times during the course of interviews with workers from both the kin and non-kin streams.

**Motivation of caregivers**

A foundational theme that emerged over and again was the sense that kin caregivers are more highly motivated and committed to parenting children in their care, in comparison to foster parents, because of familial ties and a pre-existing relationship with the child(ren).

A kin worker compared the role of being a kin caregiver to a sense of duty:

*Like it’s a duty that they do this. Like I think of my friend who took his grandson, he took it as a duty. You know, he needs to do this—while he is not prepared, he needs to do this. Whilst [with] foster care it’s not their duty, they make a decision, this is what they want to do. When they get the child it is their duty to take care of them, but it’s not their duty to take that child.*

This quote seems foundational in terms of understanding the essential differences, drive and motivations behind kinship and foster placements. This quote has many layers of meaning, which include the reality that kin caregivers can view their role as a duty but, underlying that, foster parents offer a commitment to providing placements, but not necessarily to a specific child.
Motivation: financial

One of the surprising themes that emerged was the concept of financial motivation. A number of workers from the kin and non-kin streams expressed almost a sense of sadness regarding what they perceived to be the sole motivation for foster parents to care for children: financial gain.

This series of quotes illustrates the perception that while kin caregivers are motivated by the common good of caring for children, foster parents are motivated by financial gain:

*We match the child to the foster home. The foster parents will say, “Do you have kids for us” and they will say, “We need the money” and I have had discussions with foster parents. This isn’t a set income. When you do fostering, this can’t be your set income, and a lot of times they put me in my place. We do matching, we match the child to the foster home and we look at the best placement for this child, and I have had discussions with foster parents that this isn’t a set income, you have to realize that when you do fostering, it is not supposed to be a means of income.* (Kin/non-kin worker)

*Well, I talked a little bit about it because some foster caregivers are motivated by money. They know what the per diem rates are and know that in our system, we go on a point system—we give out more money for more behavioural kids, you make more money, which is why they probably want more training because training is connected to this. Whereas with the kin family, they want to do what it is best for the child.* (Kin/non-kin worker)

*I have some concerns about this. I thought every foster parent does this because they love children, I really thought that, and I happened to be [in] a cluster meeting and I made a comment about that, and this foster parent went all over and this foster parent said, “M., we do this for the money.” I [was] like whoa, it really set me for a loop, it really burst my bubble…it really had an impact [on] me, you obviously don’t do this because you love kids.* (Kin/non-kin worker)
Counterbalancing these concerns, many foster parents shared their perspectives on what motivates them to care for these vulnerable children (see the next section), which at times differed from the perspectives of the workers. The issue of perceived financial motivation by foster parents was a surprising theme from workers that appeared to evoke a sense of anger from these individuals. There seemed to be a sense from workers that some foster parents were “greedy” and not caring for children for altruistic reasons. This interesting theme is an important issue to consider because if workers hold this belief, one wonders how this value plays out in the working relationship between workers and foster parents. Parallel to the underlying belief that kin caregivers are “second-rate foster parents,” workers may also harbour resentment towards foster parents for not being selfless in their commitment to vulnerable children. This surprising theme left the researcher questioning the emotional terrain of child welfare placements and how, if workers harbour resentments and such beliefs, these may play a large role in the disconnect between workers and caregivers—to the detriment of children.

**Access**

The issue of access visits within the context of kinship and foster placements was raised by workers on numerous occasions. An interesting finding that emerged in the interviews with kin and non-kin workers was the existence of differing perspectives on the role that kin caregivers can play in terms of supervised visits. One non-kin worker saw the kin caregiver as someone who could more easily facilitate visits:

> In a lot of kinship situations, we have a built-in supervisor that can be easily used. So in situations where supervised access is deemed necessary...someone that the parent feels more comfortable with, instead of the stranger...

In contrast, a kin worker felt resistance from kin families who were not given the role of supervisor of access visits:

> The other thing is that foster parents know that you know [that] the visits have to be supervised. They’re supervised at the agency, they come, they...
drop [the children] off, they leave, [then] they come back and get them. 
Kin don’t understand why they can’t supervise...in their own home. Why 
[do] I have to bring the child to CAS and my daughter, son or sister gets 
to see them there and then they come home...like they have a lot...a lot of 
the stuff they have to do they didn’t bank on doing.

Different workers appeared to place different levels of expectation or understanding on 
kin families in terms of providing supervision. The subject of supervised access visits is 
an important theme that will be analyzed in the caregiver findings section.

**Caregiver findings**

**Demographics**

The gender distribution of caregivers is shown in Figure 5.2.

![Gender Distribution of Caregivers](image)

**Figure 5.2.** The gender distribution of the caregiver participants.
Overarching themes

This section has the most substantive overarching themes because this was the largest data set and this group had the most divergent points of view.

1. Access
2. Advocacy
3. Attachment
4. Caught in the middle (kin)
5. Communication
6. Compartmentalization
7. Similarities between kinship and foster care
8. Differences between kinship and foster care
9. Culture and diversity
10. Entering the child welfare system
11. Foster parenting
12. Kinship
13. Motivation
14. Organizational perspectives
15. Powerlessness
16. Caregiving relationships
17. Stigma towards kinship placements
Access

Access between biological parents and their children was a theme that emerged throughout several of the interviews with kin caregivers and foster parents.

Access in foster homes

In interviews with foster parents, there seemed to be an emergent understanding of the need to provide continuous and collaborative access for biological parents and children, which at times could even include access in the foster home. This new way of engaging with the biological parents was viewed by one foster parent as a direct result of the PRIDE training for caregivers. This training places considerable emphasis on the engagement of parents and caregivers for the benefit of children in care:

We are trying to do more in-home access, so the newer people, they learn how to deal with contact with bio families, whereas the older timers don’t want any contact. (Foster parent)

This quote highlights a shift in the perception of foster parents, suggesting that caregivers who were trained in an earlier era shun the notion of contact with biological parents. This new model of engagement is obviously being translated into more fluid access between caregivers and biological parents.

Access in kinship homes

Kin caregivers presented different experiences related to access between biological parents and children. On the one hand, there were caregivers who were not allowing any access between the parent and child because of considerable protection concerns. In the following excerpt, this grandmother had adopted her grandson:

And until just recently, I actually met her [the mother] again, but the grandson doesn’t know, there is no access. But now again it is email, she is up in Saskatchewan now. (Kin grandmother)
Throughout her interview, this grandmother spoke of the complex nature of trying to protect her grandson from his biological mother, but at the same time trying to negotiate a relationship with her daughter. The emotional complexity runs so much deeper than in the typical foster/biological parent interaction, where there is no pre-existing relationship.

In other circumstances, kin caregivers expressed deep concern that biological parents were provided with access visits to the child when these grandparents had knowledge that the parents were using drugs and the child was entering an unsafe situation during visits. In one interview with a kin grandmother, she expressed her concern about allowing her granddaughter to go on visits, knowing that her granddaughter would be unsafe:

*My daughter was given [her] supervised access right back and no explanation. [We] had a meeting [with the] manager for that area, they explained no proof of drug use, and I said, “You don’t have proof of drug use but they don’t have proof of being clean either…and everything he is doing, he must be doing”…So they said yeah, but no police reports, no police incidents, so right now we have a tough time getting CAS to do something. The more he loses control, the more they give him, it seems let’s keep him happy, not set off, it is just so frustrating… I report things; they still don’t listen to me… (Kin grandmother)*

In this excerpt from another interview with a kin caregiver, the caregiver expresses dismay over feeling exploited and being asked to supervise too many visits:

*Aunt L. [speaking about herself] will do this, and where are you [the worker] in this? I am supervising four visits a week, and [being] asked for information about access visits, and my observations about how she [the mother] is doing and I am working full-time. (Kin caregiver)*

In this statement by the kin caregiver, she makes the valid point that she is the only one observing the visits. In the wider interview, she described how the visits were not proceeding too well, and how she feels torn because the weight of evidence for the child being placed in her care is based solely on her observations. Given her complicated role
as aunt to the biological mother, she expressed concern about being placed in a precarious position.

The subject of access was an important theme throughout the kin caregiver interviews because these individuals have an emotional investment not only with the child, but also with the biological parents and family. In quote above, the aunt clearly articulates being “caught in the middle” and being asked to provide a considerable amount of information about the access visits, supervise the visits and hold a full-time job. This aunt suggested that her role as kin caregiver and supervising the access is exploitive and she questioned the place of the worker in this situation—why is the worker not assisting her in facilitating these visits? The themes in this segment suggest that kin caregivers lack a voice in expressing protection concerns but, in some situations, such as with this aunt, they are being exploited and asked to do more than a traditional foster parent. The question remains: are kin caregivers asked to commit to more tasks and activities, such as access, than their foster parent counterparts?

**Advocacy**

**Foster parents**

The theme of advocacy with foster parents was subtle, but clearly an issue. Several foster parents spoke of the challenge of simply getting workers to “pay attention” to the needs of children. One foster parent spoke of workers who did not use the seven-day visit as an opportunity to learn about the needs of the child and subsequently advocate for those needs:

> They come back in again for the seven days visits; it is pretty quick, in and out of your house in 10 minutes. In my opinion, the seven-day visit is huge. I have had a week to see if there is anything I have suspected. These are the behaviours, any health updates, is there anything you have from the parents that I need to know to get the necessary medical. There’s not a lot of information sharing at the beginning of placement—the information sharing becomes important to the worker when they are going to court, for
more than just five-day court, moving on to Crown wardship, six months.
(Foster parent)

This example demonstrates how foster parents know the child and see the worker as the conduit for advocating for the needs of the child through various systems, including the court process. This foster parent highlighted her level of frustration with workers who come to see children and do not take the opportunity to learn about the needs and progress of the child. Instead, this example demonstrates situations where workers are simply “ticking” off the administrative requirement of a seven-day visit, without engaging and delving into the needs of a child. Other fosters commented that workers say to children, “I am here for the seven-day visit” but in reality, would a child know what a “seven-day visit” represents? The above quote demonstrates the need for workers to embrace the time with children and foster parents to understand the challenges and opportunities faced by children who have entered a new placement situation. Foster parents possess a detailed knowledge of children, which should be embraced by workers visiting the placement.

Kin caregivers

An important theme throughout all of the interviews with kin caregivers, in particular, was the imperative to advocate for the needs of children no matter how much this may cause conflict with CAS staff members.

“I became the trouble-maker”

In a lengthy interview with a set of kin grandparents, they spoke of how child welfare staff members are unused to this strong capacity for kin caregivers to communicate and advocate for the needs of the child:

_I think they are used to people who kowtow [to the demands of CAS staff members]. (Kin grandparent)_
Another kin grandmother, who is aboriginal, spoke of her fearless ability to advocate for the needs of her family:

*I am mouthy and if you have something to say to me, you better back that up. I know the games; I know my rights.* (Kin grandmother)

One kin grandfather, who is also aboriginal, spoke of his and his wife’s need to advocate against a system that he believes can hold racist and biased views towards aboriginal families by placing children in non-aboriginal homes:

*We bring up the term “racist.” CAS and native people would say there isn’t racism, but not that we shouldn’t bring up the term racism but discount that people don’t know they are racist. The um, foster mother was raising him and they said all of her friends are all white and when he goes out to play, he doesn’t want to play with Indian kids, he wants to play with white kids. Because this is what he has been used to, he has been brought up in a racist environment. It was the environment in which he was brought up.* (Kin grandfather)

This couple spoke of the need to advocate strongly for the needs of extended family members. This kin grandfather spoke eloquently of how many aboriginal people are not used to being assertive and are typically quiet by nature, further complicating their capacity to speak up for their needs and those of their family:

*Aboriginals are of that nature, quiet and shy...* (Kin grandfather)

This is a critical issue: on the one hand kin families need and desire to advocate strongly for the children placed in their care, but, at the same time, because of cultural differences or language barriers, this capacity to advocate becomes challenging.

Another kin grandfather indicated that he took on extraordinary legal bills to help support his adult son retain partial custody of the grandchildren:
Every time it was costing us $300/$400/$500, in total [it] cost us nearly $20,000 for a lawyer. (Kin grandfather)

These quotes are from a group of grandparents from a grandparents support group who are seeking more financial assistance from child welfare and other government authorities. One could argue that this group has skewed the results with respect to feelings of alienation and lack of support, including financial support, from child welfare organizations. This point must be qualified, but, in the same vein, it is important to comment that this is a group who requires someone to advocate for them, someone from within the system who can translate their issues and concerns. It is important to point out that this group requires some form of representation.

**Attachment**

The issue of attachment took on a different perspective when related by foster parents in comparison to the kin caregiver group. They highlighted their perspectives on the plight of children who are forced to endure multiple moves in care, thereby resulting in possible attachment issues:

*I know that there is a provincial rule, one year before a permanent plan [is] in place, something has to be on paper, but nothing really gets done. I think we really need to think about getting these children to where they need to belong as opposed to five years and three years [later], like really and truly, make it happen. We know that child isn’t going to be able to come home, let’s find an aunt and uncle, do concurrent planning right off the get go. As I have said, I believe children are resilient but children do develop psychological damage being too long in foster care. How many times can a child attach to a primary caregiver? ...And I believe it develops into attachment disorders, so the quicker is better [finding a permanent home for a child]. (Foster mother)*

Foster parents spoke of witnessing the plight and trauma of children who endured multiple moves and, as a result, experienced challenges with attachments to others.
Attachment to kin caregivers

Foster parents spoke of their attachment to the child; conversely, kin caregivers spoke of the tricky emotional terrain of knowing how traumatized, in some circumstances, the child is in their attachment to the primary caregiver. This is depicted in this quote from a kin caregiver:

_I had to call the worker and tell them, I can’t do this anymore, she didn’t want to go [on visits] and she would be like, take me back, take me back, she would have breathing difficulties._ (Kin grandmother)

This quote is from a kin grandmother whose granddaughter has been living with her family since birth; the parent is the grandmother’s adult child. This added to the emotional complexity and pain of the situation.

In another interview with a kin caregiver, the caregiver spoke eloquently of the challenges of not knowing if the child will be remaining with her and the realization that if he is removed from her care, she will still be connected to him in some way through her family:

_I still see myself as temporary, I am not going fully [embrace] being his parent because I need to save a little bit of myself, and whereas a foster child, that child would go and you would never see that child, but I would maintain the relationship with [the child] so really trying to keep that little space. My name is Aunt L., Aunt L., Aunt L., that is my mantra. She can still be his mother and I am not trying to be his mother._ (Kin caregiver)

This quote shows the complexity of the situation whereby this kin caregiver still wants the mother to be able to parent, and she wants to “save a little bit of herself” and not fully attach to the child for fear of losing him. In a sense, this sentiment is shared by foster parents. Foster parents also invest emotionally in a child only to lose contact, sometimes forever, following the child’s return home or to another placement. The notion of “saving a bit one of oneself” is an issue that foster parents also experience.
Caught in the middle (kin)

The theme of being “caught in the middle” was not an overt or definitive theme for foster parents, but was clearly a striking issue for kin caregivers, as supported by the literature (Geen, 2003b).

The powerful emotions of kin caregivers who felt caught in the middle between child welfare workers and the biological parents were a recurring theme throughout several of the interviews:

I don’t think they understand the daily pressures, or the impacts, if a decision is made and trickles down and I have to let my own family know how that trickles down, “Oh, she has signed another TCA.” And I feel I have to answer the question and sometimes I feel I have to justify the [Children’s Aid ] Society’s plan for L. and B. [children placed in kin care] and again, that is a lot of pressure. Although the workers say all the time, “Tell them to give me a call [when there are problems], I will explain everything to them,” they don’t call [back], so I feel like a spokesperson, a conduit of information [between the worker and the biological parent].
(Kin caregiver)

In this quote, the kin caregiver demonstrates how she is caught between the needs of her niece (the child’s mother) and the demands of the child welfare system. In the interview with this kin caregiver, her sense of frustration, anger and isolation were palpable and she seemed on the verge of tears throughout much of the interview. Foster parents must also navigate the needs of the child with the demands of the system, but, for kin caregivers, the emotional connectedness to the biological family and in some cases the extended family network amplify the emotional challenges of caring for the child or children. This kin caregiver stated that she feels like the “spokesperson” for the child, the parent and the worker. This quote demonstrates the child welfare system’s obligation to educate kin caregivers about their challenging role as a family member caring for a child. In this circumstance, the kin caregiver did not appear to have any support from the worker in terms of navigating this complex role of spokes person and conduit for information.
This next quote eloquently demonstrates the powerful emotions held by a kin grandmother who is caring for a special needs grandson. The grandson is himself feeling rejected by his mother, the daughter of the grandmother:

Hold [him] and cry about his mom and I say, that’s my little girl [his mother] and I love her, that’s my little girl and he cries and we cry together. (Kin grandmother)

This short but powerful quote contains the complex element of kinship placements that, in a sense, both the caregiver and child are experiencing the loss of the parent—a parent they once knew, or a parent who could not sustain his/her life in order to care for the child. The sadness and loss are palpable in this quote from this kin grandmother. In the role of foster parent this issue is irrelevant, but in the case of this kin grandmother, not only is the child experiencing the loss of his mother, but so too is the kin grandmother. This parallel loss for both the child and caregiver can be seen as both a challenge and an opportunity. The caregiver has the ability to empathize with the child on a powerful emotional level, but if these feelings are not resolved then the caregiver may not assist the child in moving forward with his/her grief.

**Communication**

**Communicating the needs of the child: foster parents**

Time and again, foster parents highlighted the lack of information that was relayed to them by the social worker assigned to their case about the specific needs of the child:

We don’t have information, for instance, allergies, and it doesn’t come to us. I don’t want to put a child at risk if he/she has a peanut allergy, so it becomes very difficult, open communication. (Foster mother)

In another interview with a foster mother, she highlighted important examples of having been excluded from information about the children:
We had three Muslim children come in at night, and they had no idea why they were apprehended, just “Your mom’s not feeling well.” (Foster mother)

Another example of a foster parent not being provided with information occurred when photographs of two children placed in her foster home were put on an adoption website without her being notified:

They put a picture of S. and S. on the Winning Kids website, without telling us or asking for the kids’ consent. I just happened to find it going through the website. Nobody even told me that Crown wardship was complete, so someone had surfed the site and called in and said they were interested. We were never contacted [about] what the needs would be, if the family would be appropriate because we know the child. (Foster parent)

This striking example given by a foster parent details the perception by some that they are excluded from participating in collaborative planning for the child, despite an intimate knowledge of the needs of the child gained by living with the child 24/7.

There were times when foster parents believed their extraordinary efforts to communicate about the needs of children were viewed as a negative by the worker assigned to their foster home. In one agency, the issue of foster home reassessments and evaluative processes came up time and again. This process of evaluating the foster parent was viewed by several caregivers as unfair because there seemed to be an ongoing process of highlighting deficits that the foster parents themselves viewed as strengths. One foster parent stated that she sends emails as a way of tracking the progress of the child in her placement and that many workers like this method of documentation as email correspondence can be printed out and placed in the file. However, this foster parent was reprimanded for this level of communication.

What I got was I was sending too many emails from the child’s worker, and [from] the parents’ workers, don’t stop sending them, they help me,
don’t stop. And in my reassessment, it ended up in my reassessment, it
didn’t come out as communicating too much, [it] came out as a negative.
(Foster parent)

This issue demonstrates how foster parents, despite their best efforts, can be dismissed as important contributors to the child’s progress in the placement. This example demonstrates the potential for foster parents to feel disengaged from planning for the needs of the child and providing an important source of information about the child’s progress in placement.

**Communicating the needs of the child: kin caregivers**

Kin caregivers spoke of situations in which the working relationship and communication process with CAS workers was challenging. One caregiver made the following statement:

> Instead of being there to help us to help the kids, they [CAS workers] did everything they could to prevent us from helping the kids. It was a war...and it started from day one. (Kin grandmother)

This negative process of communication creates considerable barriers to moving forward with the needs of children and supporting the requirements of caregivers.

**Compartmentalization**

Compartmentalization is a theme that recurred in the interviews with caregivers, both kin and foster parents. This notion of compartmentalization is an essential theme, but in a sense the “left hand doesn’t know what the right hand is doing.” The following section explores how this concept unfolds within the context of the relationship between worker and caregiver.

The “telephone game” is a group process, whereby one person whispers a message to the next person. By the time the message gets all the way around the group, it has become completely distorted. The following excerpt from an interview with a foster parent demonstrates this fragmenting of communication that results because of a multitude of different workers assigned to the case:
It is because the family worker because they are not associated with the foster home, which is phenomenal, but how can he or she represent the child in court and all that is happening in the home? ... I write it down, I tell the worker, who then tells the family worker, who then tells the lawyer, who then tells the judge. So I am firm a believer that the child’s representation needs to talk to the child. Again, I refer to the game of telephone when we were children, of how it gets to the judge or whoever makes the decision, there are too many hands in the pot. (Foster mother)

Building on the theme of compartmentalization the following quote from a foster parent highlights the challenge of having too many workers assigned to the case. This structure of assigning different workers to different components of a case is viewed by caregivers as detrimental to the child because no one is truly forming an in-depth relationship with the child:

*It would be the three-worker system, “number of worker” system, not an effective system for the child or anyone sort of involved. That “number of worker” system leaves a lot of things up in the air. The child’s worker comes into the home, but they don’t know a lot of the file and so there is a lot of miscommunication for everybody, including the child. And I believe the family worker is representing the child they have never met. How can they represent what is going on in the child’s life without knowing and hearing first hand from the caregiver? It is like by the time you get to the last man on the totem pole the whole message has changed. Again, my opinion, but I find that it is a really huge missing piece. (Foster parent)*

Kin caregivers also spoke of the confusion of having so many workers assigned to a case:

*So the A worker is the intake worker I never saw, B worker is the protection, carrying the file, and the C worker is the family worker. And I have a worker, who works with me, and, um, last a referral because a protection file was closed, because I got moved on to an adoption worker. (Kin caregiver)*
Kin caregivers spoke of how challenging it is for them to understand the assignment of so many workers, particularly when they are struggling to understand the process and requirements of the overarching child welfare system.

**Similarities between kinship and foster care**

There was, again, a subtlety to the responses given by kin and foster parents. When caregivers were asked to describe the similarities that exist between kinship and foster placements, the vast majority were challenged to find any similarities. On another level, there was an underlying sense by foster parents that they were being asked which placement type is better. The following response typifies some of the statements made by foster parents that could be viewed as perhaps demonstrating a feeling of being threatened by the emerging formalization of family-based placements:

> So the differences, but I don’t think kinship is more loving than a foster home... (Foster parent)

One foster mother stated that she believed her agency provided a unique support group for kin families, which was not actually the case. She went on to examine an idea that perhaps kin families could join the foster parent cluster group as a way of forging an alliance between the two groups and facilitating an examination of the similarities that may exist between them (e.g., behavioural challenges of the child, facilitating access, working with child welfare workers):

> We have a meeting every month with the cluster groups, and I understand that there is a meeting every month for the kinship families. I understand the issues are different for kinship, I know very briefly, the differences, but if we are all doing the same job, we should all be working together, and we could be a great support to them and them for us...knowledge as well. So if we are all working together and sitting around the same table, what it is like for kinship and what it is like for foster. (Foster mother)

This is a unique idea that will be more fully explored in the discussion chapter of this thesis.
When kin caregivers were asked to respond to this question, there seemed to be less of a concern about or threat from foster placements. Kin caregivers reported that the similarities were based on instrumental and administrative tasks:

*I mean with kinship and foster care, same responsibilities, sports, make appointments, take them [to] counselling if they need it, in that way, it is similar, [but] the differences are vast. (Kin caregiver)*

**Differences between kinship and foster care**

In all of the interviews with kin and foster caregivers, the question was asked, “What do you view as the differences between kinship and foster placements?” The responses were interesting and required a subtle understanding of what each constituent group was stating. In this excerpt from an interview with a foster mother, she highlights how she sees kinship as potentially a weaker option for children. At times, there was an underlying sense from foster parents that kin families are more of a “second-class option” that could potentially be rife with problems, such as the age of the caregiver, health concerns and a longstanding family history of protection concerns:

*When you have families, generational, kinship doesn’t work, it can’t break the cycle (Foster mother)*

Kin caregivers instead focused on the differences between kinship and foster care from the perception that foster parents have more respect from CAS workers and financial remuneration is more significant:

*Everything, it would be looked after [if I was a foster mother]. Me, I look after, I have to beg and fight, fight for every penny, every penny. (Kin caregiver)*

This next quote highlights the kin caregivers’ perception that foster parents are more highly valued by CAS workers:
Foster people are put up on a pedestal, doing a service to these children, bringing these children into their homes, but they don’t look at grandparents like that. (Kin caregiver)

This quote again demonstrates the emergent tensions that exist between the two caregiver groups in terms of believing that one placement is more favoured by the system than the other. At the time, the researcher was struck by the underlying tension that exists between kin caregivers and foster parents. Kin caregivers appeared to feel that foster parents were more “valued” by the system as a better or safer option for children. Conversely, foster parents seemed to feel, although it was never overtly stated, that kin caregivers are a threat to the ongoing institution of foster placements.

**Culture and diversity**

The notion of diversity and ethnicity was an emergent theme throughout the interviews with caregivers and, to a larger extent, in the interviews with youth (see youth findings section, next). Foster parents explored the issue of culture from the perspective of trying to offer a home and reach out to a child who may not be from their own specific culture or background. In the following quote, a foster mother comments on what she perceives to be a challenge for a black boy placed in her home in a predominantly white suburb of site 3:

*He* doesn’t *feel he fits anywhere, because he is black and white, and we are in the country, and there is one other black child in the school, in the kindergarten class, but it’s Kanata, and the bad thing about Kanata is that it is so white. (Foster mother)*

In contrast, kin caregivers interviewed expressed resentment that on many occasions children from their extended family had first been placed in a foster home that was not part of their heritage or culture. Aboriginal kin grandparents expressed dismay about children from their families, time and again, first being placed in white foster homes. The following quote examines a kin grandmother’s perception of foster parents taking children to culturally relevant events such as powwows, but not understanding the
meaning of these ceremonies and lacking the ability to teach children of the importance of such traditions:

One of the other things that non-native foster parents do is say, “We are going to take the kids to powwows” and they never do, but they say they will. The thing about powwows is that they won’t teach about you as an individual. [It] doesn’t matter which powwow, they are going to have a smoke dance, they do a jingle dress, but the jingle dress is not part of culture. If you don’t teach the kids then it is irrelevant... (Kin grandmother)

Further along in the same interview with this couple, the kin grandmother spoke of how the baby who was eventually placed with her and her husband had initially been apprehended and placed in a white foster home. She explained how, in the initial court hearing, she told the judge and CAS how all aboriginal children are breastfed, and she was adamant in her charge that the system was failing to provide the child with breast milk:

I would like one question answered by CAS, and I am Long House [native heritage], I teach my daughter-in-law to be traditional. You took the baby at supper time, the girl has not been breastfed, can you tell me how this child [had] been fed? (Kin grandmother)

This is a startling example of a child being removed and placed in a foster home without the input or understanding of the extended family and its traditions and beliefs, to the extent that this child went without breast milk for two days. The judge ordered the child to be returned to the kin caregivers and asked the local CAS to do an assessment concurrent to the child’s placement.

Another kin caregiver who transitioned into the role of foster parent implored the system to find and support culturally relevant placements for children when they enter care:

A dire need, especially for black foster parents or foster parents of minorities. They have a dire need for them. Big, big need. (Foster parent)
Kin and foster parents alike supported the notion that culturally relevant placements are essential for children to feel engaged and part of a larger culture and system.

**Entering the child welfare system**

Both kinship and foster parents showed considerable unanimity in terms of the need to provide stability and permanency for children and youth when they first enter the child welfare system and are removed from the care of their parents or primary caregivers. This quote from a foster father highlights his firm belief that it is important to provide stability to children whose worlds are very often turned upside down. This quote resonates with empathy for the child’s plight when entering care:

> When the children are taken away, [it is] important to establish the links as soon as possible [to familiar things]. The other thing we do is to continue the children at the same school, and the reason we do this is that their lives are completely turned upside down and the only stability they have is their friends and, also, there are teachers, [who] can assist, so it is important to keep this. A lot of change, as an adult, I find it difficult to manage change and I can just imagine being uprooted and moved to a new family, absolutely terrifying. (Foster father)

One foster mother spoke of how so many placements occur on an unplanned and emergency basis and how this type of placement (emergency) can further exacerbate the trauma for the child:

> There [are] very few planned apprehensions. They get a worker they don’t know, sometimes [the worker] gets lost [getting to the placement], no clothing, the child is in shock for a lot of reasons, they have lost everything, everything, everything, and even lost their possessions. They come in, and [the] kids will come in and not ask for anything, and you will ask, did you come with anything, and depending on their age, and, um, do you want a toothbrush...let me get a toothbrush, let’s go out shopping tomorrow. (Foster mother)
This particular foster mother spoke of her role in helping the child transition and purchase basic items such as clothing and a toothbrush to help make this change to the new family environment.

Kin caregivers were like-minded in their desire to provide stability and permanence for children entering the system. The following quote from a kin caregiver explores her fundamental belief that whatever we do for the child, short- and long-term plans must be made quickly so as not to create a situation of children living in limbo:

_Something about the child and situation that will lead to permanency so the child is not moved around in foster care and into group homes._

_Caring, trained and informed staff and an advocate. Caring and well-trained foster parents until something happens: either his birth family getting help and stabilized soon so that he can return to birth family successfully and stay there. Or some family member(s) soon being able to parent him/her in a kinship relationship with help. Or being adopted soon to a family that gets support when needed. (Kin grandmother)_

Both sets of caregivers expressed the same desire to find stability and permanence for children.

**Foster parenting**

This next section addresses the unique issues brought up by foster parents.

**Foster Parent Association**

An integral component of fostering is the need and desire to connect with other like-minded individuals and to create a support group. The Foster Parent Association has been seen as a mechanism through which foster parents can share ideas and receive peer support in relation to the complex role of caring for children with high needs.

Throughout the course of several interviews at one particular site, it became apparent that the Foster Parent Association was viewed as forum for complaining. Some foster parents viewed this as toxic and unproductive:
My only negative experience is [with] the Foster Parent Association, and I have found them overwhelmingly negative and no help at all. It really frustrates me. (Foster mother)

In this next quote, the same foster mother speaks of how she finds the association not at all productive or helpful:

I don’t find the Foster Parent Association act professionally…it is [not] professional and some of the stuff being suggested [is] so unprofessional. (Foster mother)

This next foster parent articulated why a group like an association could be a powerful mechanism for advocacy and support. This foster mother spoke of the need to have professional help to provide support and structure within the group so as not to allow the group to spiral into negativity:

I remember, I sat down with a friend of mine who is a social worker, and we thought what could possibly happen, and it was, I think what would be required would be to have a professional, someone who is very good at conflict management where there [are] such powerful emotions, who is able to professionally affirm those but not let [them] overshadow, and bring someone who is [a] professional, someone who knows how to deal with the emotions…The people running it are volunteers and not trained to deal with the emotions, and really angry. How do you deal with this, not [let it] overshadow the rest of the group? (Foster parent)

Throughout the interviews at this one site, there seemed to be a desire to hold on to the institution of the Foster Parent Association, but also a strong commitment to change the process by which this forum unfolds to result in more positive peer engagement and support. These themes represent not so much the desire to have an association, but rather a mechanism whereby foster parents can support one another. Caring for vulnerable children is a challenging situation fraught with emotions. To have a space and place to share these emotional issues can provide important peer support for foster parents.
**Foster parents’ own children**

An important theme that emerged from the study was the desire for the system to recognize the impact of fostering on foster parents’ own children. At one agency there had been a peer-support network for foster parents’ children, but this idea was terminated because of concerns expressed by the Foster Parent Association:

*There was something for teens, a pizza party, and the Foster Parent Association shot it down because there were social workers in the room and if the child says something then [they might] take it and use it against the foster family and I was so frustrated by this move and my daughter would love this opportunity. She lives for that, but, unfortunately, this doesn’t happen and then people got told not to send their kids by the Foster Parent Association and, um, and just frustrating.* (Foster mother)

Another foster parent spoke of how CAS workers came into her home and told her how to parent her own children. This was perceived by the foster parent as overstepping boundaries within the context of the worker/caregiver relationship:

*I think [they CAS workers] need to be a little bit more understanding. They kind of come at me and they say “Well, they [her own children] are suffering” and I get that, I’m their parent, and coming at me and telling me something—it is almost insulting that they need to tell me this.* (Foster mother)

**Foster family: grief and loss**

One of the most profound realizations that occurred for the researcher during the course of the interviews was the recognition that many foster parents experience considerable grief and loss when a foster child moves from their home. This is demonstrated in the following quote relating to a foster son who left and then returned to the foster parents’ care:

*I was grieving and he [the foster child] was grieving. It really hit me with a ton of bricks. I didn’t know this would hit me so profoundly and then we*
caught a phone call [asking for the foster child to return to their care].
(Foster father)

Another foster mother explained how a foster child left her home, never to be heard from again:

She had been with us for so long, she moved on I think it was a Thursday, and never heard again, so I called that evening. She [had] never been away from us, and [I] wanted to know how she was doing, so I called again on the Saturday and the next thing I know, I get a call from the worker saying, stop calling, I was calling too often...it just kind of went downhill from there. (Foster mother)

An interview with another foster mother explored this sense of grief and loss, not just for her, but also for her own son, who viewed the removal of his foster sister as “giving his sister away”:

Well, she was one of the family. Not exactly the same, but you take a child from a girl who came to us at three, still pooping her pants but cute as a button, and you take that all the way through and my son thought we were giving his sister away. He was only four months old when she came to us, he didn’t understand. I mean he understood, but he didn’t understand. And you know, because he was young. (Foster mother)

Another foster parent explored this emotional complexity and the emotions that come with moving a child on to permanency:

It was devastating, it was devastating...it was devastating, it was heart-breaking, it was heart-wrenching. I know I have to facilitate for the child, I had to make it a happy time, and it was somewhere safe, even though I wasn’t convinced that was necessarily the truth, and had to make it a happy. I had to play a huge role. Any time a foster parent needs to help the child move on happily. It is very challenging when you are going there and, oh, how can this be happening, and you are questioning the system
and you are questioning the worker, and you are told “Just suck it up and
do your job,” and it is not fair and yes, I am only a neutral foster… I am
not doing physiotherapy with this child [meaning having a stronger
emotional connection to the child]. (Foster mother)

A rare example of a worker reaching out and understanding the impact of fostering on a foster family occurred with this example:

For me, one of the things that had the most profound impact was a very long placement and we had a lot of emotional ups and downs, and we had done a lot of work, and it was my family and me and we were all grieving. The day after the child left, we got a basket from the child’s workers, juice and chocolates and a card [that stated] “I want to acknowledge that you as a family, you are grieving”…For me that was great, the worker had seen past the child who has left the home and we had done this as a family and this worker gave a damn about our children and as a group, I would like to see more of that. Just to acknowledge that was huge. It just made such a profound impact on all of us. I think that was the first time [for] my children that they were ever so obviously included in this, our family is a team. (Foster father)

In the example above, the worker recognized the grief and loss being experienced by the foster family. As a worker and supervisor for many years, this is not something that the researcher recognized from her work with foster families (grief and loss issues) and this is likely the case for many other workers. If foster families are not given the opportunity to grieve or receive support, one wonders how these feelings could fester and become challenges to engaging more placements for vulnerable children in the future. This finding requires further consideration. There is a need to examine, from a clinical and research perspective, how unresolved grief becomes transferred into foster parents’ ongoing commitment to vulnerable children.
Kinship

This section covers the various iterations of kinship and how participants viewed the notion of extended family and community caregivers caring for children in need of protection.

**Kin caregivers know the child best**

Throughout the interviews, kin caregivers spoke time and again of understanding the needs, issues and challenges of the children placed in their care because they know the child, often from birth. These caregivers possessed an innate sense of children’s needs, histories and essential requirements. This quote from a kin grandmother highlights her tacit wisdom in understanding the needs of the child:

> I am not a stupid person, I have graduated from a number of colleges and not university, and I knew there was something wrong with my boys...

(Kin grandmother)

This next quote is from a kin caregiver who cared for her grandson after the child was initially placed in foster care:

> When he was apprehended, in the care, she was a great foster mother and when I got him, his little tummy and brain were not connected. I put him a feeding system, he bloomed into a little butterball...you have to know each little personality. (Kin caregiver)

This last example shows a woman who is deeply committed to the needs of her grandson.

**Kin caregivers know the protection issues better than foster parents**

In many interviews, kin caregivers expressed dismay that they often recognized the longstanding protection issues of the parents (often the kin caregivers’ adult children), and that this intrinsic knowledge was frustrating because they sensed that the system was unwilling or unable to recognize the risk to the child:

> I think that is the hardest thing, no one really understands the unique role of kin caregivers. Because we were so concerned with what was going on,
I would make sure I would go by and check and they don’t seem to understand those things. (Kin grandmother)

This quote demonstrates that part of the unique role of kinship is recognizing the bond, connection and understanding that kin caregivers have with respect to the needs of children. These extend beyond those of a typical foster parent role.

**Kin age and health**

An important theme that emerged throughout the interviews was the issue of kin health and how caregivers perceived that the system discriminated against them because of their physical or mental health challenges:

*They questioned our age and our health and our doctor, he said as far as he was concerned, I would be able to do the job.* (Kin grandfather)

This same grandfather spoke of his desire to hide his considerable health issues from the child welfare workers in order to keep his three grandchildren in his care:

*I have had five, seven surgeries so far and damn near died, and this is when we are trying to get custody and I am laying there in the hospital dying, should be getting support, had to keep it from them [CAS]. By Jan, I lost 40 pounds and I am sicker than a dog, trying to put on that I’m not. I knew [I had] an infection, I get up there, I had to run [to] the bathroom and puke and I am really sick and the lawyer told the judge that I have the flu, but I am in the hospital 10 days after that, and as soon as that’s the end of it I should have been able to tell them [CAS], and I got my doctor to say this is a temporary thing. They started questioning my health, we were scared to death [that CAS would use this] as an excuse [and state] “You can’t take care of the kids.”* (Kin grandfather)

Another kin grandmother spoke of how her history from several years previous was being given as a reason she could not care for her grandson:
She [the CAS worker] kept after me, pester, pester, but I was really traumatized by it and finally I said “Those things are not any of CAS’s business, they aren’t mental health things, it’s your job to come and help me if I need any help. I have had a couple of episodes, if I lived in England, there would be nothing wrong with me” and she picked on me, “Why did you see a psychiatrist for a whole year?” And I said, “Do you know how hard it is to get a psychiatrist? What if I needed someone, then I would have someone to go to.” (Kin grandmother)

This kin grandmother made an important point in that she kept her psychiatrist as support, and she articulated how the worker made her feel traumatized by highlighting her mental health history as a barrier to parenting her grandson.

Another kin couple both reported having physical health concerns. This couple, who are aboriginal, spoke throughout the interview of feeling that discrimination was a factor in their interactions with child welfare staff members. In this quote, they state how CAS refused to allow them to care for children in their extended family network because of their age and reported health concerns:

    You are not eligible to take in kids and your file is closed, because of your age. I was 52 and Jack was 56. I had a heart, two heart attacks and Jack has had two strokes. (Kin grandmother)

In this group of grandparents, many individuals were older and had physical health challenges based on their age. Screening kin out because of age or health issues is a complicated subject for child welfare professionals to consider. On the one hand, one could argue that screening kin out for these reasons is ageist or discriminatory. Countering this is the real need for individuals to have the physical and mental capacity to care for children who, in some cases, have serious emotional, behavioural or physical challenges.
Motivation

The issue of motivation from various different vantage points is an interesting theme that evolved throughout the course of the interviews.

Financial: foster parents

Throughout the interviews, foster parents spoke of feeling that substitute caregivers should take on the role of fostering for altruistic reasons. There were, however, comments from foster parents who believed that some of their peers took on the role of caring for vulnerable children for financial gain. One foster parent, when speaking of meeting others at Foster Parent Association meetings, queried the motivation of other peers and asked:

Why are you getting into this? Is it for money, to make a difference or both? (Foster mother)

In response to this financial motivation issue, another foster parent spoke of the enormous demands required to care for special-needs children, which, she felt, should result in some form of financial compensation:

I am of two minds. I think fostering over the years has been criticized and [foster parents are told by CAS workers] “You are doing it for them money,” and you have treatment-level kids, I think that is okay, um, you’re not working outside of the home...Foster parents get a negative rap for that [being financially compensated]. (Foster mother)

Financial: kin caregivers

There were interesting parallels between the comments of foster parents and those of kin caregivers in terms of believing that, in some circumstances, foster parents only care for children because of the financial motivation and gain. The following quote highlights a kin grandfather’s perspective that some of the foster parents who cared for his grandchildren did a wonderful job, while others were simply motivated by financial gain:
One was great, absolutely fantastic, other one okay and the other one was strictly in it for the money. (Kin grandfather)

A kith caregiver spoke of her belief that not just foster care, but also group care, perpetuated the cycle of bringing children into care to serve the financial needs of the staff members caring for the children:

Seeing those kids, and I might cry but don’t pay any attention [kith caregiver is becoming upset when she reports this issue], see in those kids somebody is making a profit from them...people come in and go, workers come in and go, it’s chaos. They are in a home with six other girls who are just as dysfunctional as them, who’s teaching who? And quite often the workers are completely broken themselves, there’s no standards and it turns my stomach to think somebody is making a profit from these kids. (Kith caregiver turned foster parent)

This next quote shows a differing view from a kin caregiver, who believes that kin caregivers should be more equitably paid for the care and support being provided to these vulnerable children:

Obviously foster parents, they get paid for their work. Where there are things my little boys could use, for example my little G. has sensory problems, his T-shirt [special T-shirt to help assist with sensory problems] will work. [The] daycare is not seeing a lot of improvement in his behaviour, whereas a foster parent, it [the special T-shirt] would just be covered [by the CAS]. (Kin grandmother)

There seemed to be a sense from kin caregivers that they believe the system does not support any level of financial compensation because they are family caring for family; but added to this was the sense that the system also financially exploits these same caregivers. The following quote from a kin grandmother speaks of her sense of anger at having to pay for an enormous legal bill that could have instead been used to help care for the needs of her grandson:
It [court proceedings] cost $10,000. That is a very lot of money. Why do you keep doing this, why do you keep dragging me into court? All this money, this money...Money I could have spent on my grandson, and now it’s gone.

The issue of financial compensation was clearly a theme for both foster parents and kin caregivers from similar, but also very different, perspectives. What resonated throughout the interviews was the sense that financial motivation and gain is a very complex issue in relation to vulnerable children.

What motivates foster parents?

Perhaps one of the most complicated questions to emerge in the evolution of this study was this: why do foster parents foster? What motivates these individuals to care for these vulnerable children? Why do they open their homes to children they have no previous knowledge of and care for these children for a day, a week or for years? There is absolutely no pat answer to or quote for this question, but the following comments from foster parents paint a sense of commitment and obligation to others and the community. One foster mother put it eloquently when she stated:

_We never dreamed we would get so much back. (Foster mother)_

The next quote from a foster mother shapes our understanding of a motivation that is generated by the desire to do something for the greater good:

_I love the children...my whole family. I can bring my daughters, and my little ones, and it is not something we’ve been taught, if we can [help] the life of one child then we have done our job. We want these children to feel safe and to feel loved...We are in it for the kids. (Foster mother)_

Foster parents reported being motivated by a sense of giving back to the world at large.

What motivates kin caregivers?

From a very different vantage point, kin caregivers spoke of a desire, also altruistic in nature, to help the child and their biological parents because they are family:
I don’t want to stereotype foster parents, but I think they probably [invest] 150% effort [for the child], but I think we put in a whole lot more because there is that vested interest in the child’s well-being but [also] to the parents’ success. (Kin caregiver)

The issue of motivation is, again, both similar and very different when being discussed from the vantage point of either kin caregivers or foster parents. Kin caregivers explained a desire to support the child, but the motivation is engrained in a desire to help the biological parents move forward, make changes and hopefully regain custody of the child in the short- or long-term.

Organizational perspectives

Foster parents

A theme that emerged in the interviews with foster parents was the divergent perspectives that groups of foster parents held in relation to their home organizations. The same issues did not emerge per se in the interviews with kin caregivers, but foster parents in different organizations clearly held different perspectives.

Foster parents in one specific organization felt that the support and service received in their home organization was considerable:

We have always been impressed. The support we have received is top-notch. (Foster parent)

A foster mother at another organization commented on the unique services provided by her agency towards families and children in care. In the quote below, she describes how her adoptive son was moved from one agency to her home agency. She comments on the variations in adoption subsidies provided by this other agency and her home organization, which itself provides a considerably higher adoption subsidy rate:

He came from XXX and their adoption subsidy program is much different and they give a very small percentage of what [site 2] offers for the same
thing, but they offer more of other support. Different agencies tend to work a little bit different. (Foster mother)

This same foster parent went on to describe program innovations at her agency in relation to foster parent support programs:

There is a new foster parent support program that should probably be open to kin [families], it’s new. Workers go into foster families to help with behaviour modification, but they [the agency] are also doing self-esteem groups for children in care. (Foster mother)

Pre-screening kinship placements

A theme that emerged in several interviews with kin caregivers was the strategy of many agencies to place children in foster care prior to moving them to a kinship placement. Several agencies seem to have a structure in place that requires a full assessment of the kin family prior to placing the child to ensure the safety and well-being of the child. This policy means that children often enter substitute care when kin families are willing and able to take children, which would forgo the child moving to a foster family and then transitioning to the extended family or kith placement. In the quote below, a kin grandmother explains her frustration at knowing that her grandson (the son of her adopted daughter) had been moved into foster care, and that no one was keeping her informed of the child’s transition within the system:

He was moved from one foster home to another but no one ever told us, and we asked lots of questions. But they never actually said why [he had to move]. (Kin grandmother)

Another set of kin grandparents expressed dismay at knowing that not only had the children been placed in foster care, but they had also been moved to different foster homes and were not placed together in sibling groups:

Kin grandmother: We said in the meeting, we can take the children if we have to...[but] it was three or four weeks they [the children] were in foster care, and then they said, can you take them for a little while and take them
on the weekends? ... And we said, this is terrible, we didn’t want the children separated. They were all in different homes and we felt, this isn’t right, they can’t grow up like that and we decided, we have to do something...

KD: How long were they in foster care?

Kin grandfather: About six months...

These two examples highlight the challenges kin grandparents face, knowing that the children are placed in stranger care and, as is often the case, separated from their siblings.

Powerlessness

A theme that resonated throughout the interviews was the sense that, on many occasions, both kin caregivers and foster parents felt powerless in their role to ensure the stability and well-being of children placed in their care. There seemed to be a sense from several participants that this study could become a vehicle for change and give voice to the issues that they are challenged to bring forward on an individual basis.

Foster parents

A theme throughout the interviews with some foster parents was that the notion of powerlessness was a barrier to working as a fully engaged member of the team providing services to the child in the home:

Yes, as a foster parent, because you don’t hold any of the power, and I train PRIDE and we tell people you work as a team, but we are not an equal member of the team. (Foster mother)

Another foster parent highlighted the very real concern that if foster parents make a complaint about a worker in the system, it will come back to haunt them later:

Yes, with the worker, if you make a complaint about the worker, the complaint will go in and you will never see what happens. Complain if you
At one point in an interview with a foster parent, she became fearful that the contents of her interview would be fed back to her social worker.

The theme of not being able to speak one’s voice as a foster parent resonated throughout several of the interviews.

**Kin parents**

Kin caregivers seem to experience the same sense of powerlessness in certain situations with some workers and some supervisors. In one interview a kin caregiver was concerned that her interview would be overheard by CAS workers in the building, despite the door being closed. This theme of fear and a sense of powerlessness was a palpable issue that resonated throughout many of the interviews with kin caregivers. In one interview, a kin grandmother she spoke of a situation whereby she felt that she had become labelled a “trouble-maker”:

*Kin grandmother:* Well, “we wouldn't be in this situation if it wasn’t for you.” That was right in the court document that there was a power struggle because it was my son who was a perpetrator. There were other details. There were some stories that were that the children told me that some parts you know, or my daughter witnessed abuse on the other side. I am not taking it away, but it came out as a power struggle because it was my son, but it had nothing to do with the fact that there were concerns. We were reporting the things we were witnessing and because I do have a background [in social work], put things in writing, so I became [a] trouble-maker...

*KD:* How did you pick that up that you were the trouble-maker?

*GM:* They were coming out the kinship assessment, the supervisor pounded her fist on the table. She didn’t know if she could make us a kinship home after we had them for two years because she didn’t know if
we had the capacity to deal with them [the parents]...I remember [her] pounding her fist and when she left, I was, um, this big.

This quote, striking in the sense that it depicts a grandmother who felt very intimated by CAS personnel, demonstrates the power and authority that can be wielded over vulnerable families caring for vulnerable children.

**Caregiving relationships**

Just as the theme of relationships was an important feature in the worker findings section, this theme also resonates in this section with caregivers. The various iterations and subtleties of relationships between various dyads was a theme that occurred over and again.

**Foster parent relationships**

**Relationships between foster parents and biological parents**

The relationship that exists between foster parents and biological parents is an issue that wove throughout many relationships and seems fundamental in terms of promoting a collaborative framework for the benefit of the child.

In the following quote, a foster father speaks genuinely of his belief in applying a non-judgmental and engaging relationship with the biological parents. In essence, he points out that the more collaborative the relationship, the more it is possible to understand and promote the needs of and permanency for the child:

*Foster parents who are supportive of the situation, who aren’t judgmental—it is very easy to become judgmental of parents, and many of the situations are heart breaking—but if you are able to remain non-judgmental and work with the family, um, it is also important to remain positive with the children about their family, and mommy and daddy love them, they just can’t take care of them right now, as well as to have the openness with the parents, keep the lines of communication open about the children, it makes it much easier as a foster parent. You can gain so much information about the children and, vice versa, you can provide*
information about structures and routines about the children, they were able to meet the needs and adapt. (Foster father)

This same foster father elaborated on his willingness to open his home and his family to the biological parents of the children he is caring for. In a way, his philosophy is almost like he is also fostering the biological parents—a parallel process to fostering the child:

We try to work a lot with families. Some foster parents don’t, but [I] think it is important to remain [in] contact with the bio families, and we let them call on a daily basis, we also invite them to birthday parents, Thanksgiving, Christmas, so they can maintain a relationship with the children. And we have also found that we were able to create a relationship with them, and [in] several situations [when] the children left care we kept a relationship with them and continued to provide for extra-curricular activities that the parents couldn’t afford and also provide parenting support when they have questions and concern. (Foster father)

Relationships between foster parents and CAS workers

This issue was an important feature of the interviews with foster parents and CAS workers. In fact, the working relationship that existed (or not) between the foster parent and the worker became an overarching theme during the course of many interviews with foster parents.

In this quote, a foster mother speaks of how she had a conflict with her assigned worker, but that she was able to work the issues through and helped the worker to understand her perspective on caring for the foster children in her home:

I think the big thing that came out of it, we were able to build a better relationship with the social worker, and she was able to understand why we do what we do so we have a much better level of trust for each other. (Foster mother)
In this next quote, the foster mother speaks of her perspective on her working relationship with various different workers over her tenure as a foster parent:

Foster mother: There all these people you work with and some are very good at that, and others don’t have a clue.

KD: What does it look like when someone is really good at it?

FM: To be really good at it, again it goes back to communicating, keeping you in the loop—court happened, can you attend it? Just, you know, like I always say to workers, you don’t need to run out of here all the time, and I will keep you in the loop but when I do need you, I am hoping you will come.

This is an important observation made by this foster parent. She is essentially saying that she will not exploit the resources given to her by the worker, but when she really needs the support of the worker, she expects that person to be there—to be available during times of stress or crisis.

This next quote highlights another important issue: the dynamic of the worker understanding not just the needs of the foster parent but also the needs of the entire family system, including those of the foster parents’ own children:

My foster care worker has always been great, she sends us cards, and if any of my kids have any kind of crisis she is always more than willing to come and talk to her. Just to have this, this is the child’s worker, usually the child leaves the home, it was great, and it really solidified as a family a team. (Foster parent)

Again, this quote highlights the belief that the worker helps to encourage the foster family to work as a “team” for the benefit of the foster child. This is an interesting and important issue that seems to resonate to a greater or lesser extent throughout all of the various permutations of relationships that exist within the confines of this study.
Relationships between foster parents and children

Although this dyad is obvious, there were minimal data to work with in terms of this being an overt and dominant feature of the interviews. Foster parents appeared more preoccupied with discussing their relationships with workers, as compared to their relationships with children. It is obvious that foster parents are more heavily drawn to explore their relationships with workers than the sustenance and cultivation of their relationships with children. There was, however, one particular interview with a foster mother whose predominant passion was to explore the complexities of the loss and trauma of children in care. This is demonstrated by the following quote, where she explores the challenges of attaining permanence for children in care:

*Like someone to call if there is a problem, or something to share or somewhere to go back to [at] Christmas, and all those things. I just find that very sad. If we could move them through quicker and come up with a permanent plan for them quicker, and I don’t think long-term foster care is a good permanent plan.* (Foster mother)

This foster mother is exploring a theme similar to that featured by Dr. Robbie Gilligan in his understanding of the complexities and needs of children in care: that the focus should be on finding sustainable relationships that endure over time. Dr. Gilligan asks the question, “Who will come to a child in care’s wedding?” These types of questions are at the essence of the issues we should examine for children in care (Gilligan, 2009).

Kin caregiver relationships

Relationships between kin caregivers and biological parents

There were many examples to draw upon in this section with respect to the ongoing commitment of kin caregivers to the biological parents. There was one kin grandmother, however, who demonstrated a unique and enduring bond towards her adoptive daughter, the mother of the child that the kin grandmother now had placed in her care. In this quote, the grandmother explores her reconnection via letters, with her estranged adoptive daughter:
First of all, it was through letters. [She was] single parenting, very poor, very proud not to ask for help and we got the impression that she needed help. [The] child was having a hard time, got kicked out of preschool (we didn’t know ’til after he came here). Anyway, she met a man on the internet and went down to the States, took the boy with her. Our grandson never was with his father at all, and in fact, he never met the father at all. It was probably a one night stand from what she told me, and our communication has been entirely by email (Kin caregiver)

In the interview with this grandmother, she chronicled the incredible journey she had undertaken to regain the trust of her daughter and to take the child, who is now placed with her, back to Canada where she could parent him. Her commitment to her daughter and grandson is a unique story that resonated in its strength and bond.

**Relationships between kin caregivers and CAS workers**

A lot of anger was expressed by caregivers in relation to their perspectives on their working relationships with their assigned workers. These relationships did seem to shift, however, when a kinship specialist worker was assigned and who was viewed as an advocate for the caregiver in terms of navigating a complex child welfare system. Some caregivers spoke of having no relationships with workers, or relationships that were fraught with conflict. The following quote from a kin caregiver speaks to a relationship with a worker that simply did not exist:

*They said, “We need to have someone come once a month to check on the boys” and it was a total stranger, it was actually a protection worker.*

*(Kin caregiver)*

The same kin caregiver went on to highlight how she viewed her own specialist kin worker as her advocate in dealing with the multitude of other workers who had been pressuring her to do so much, including supervising access visits:

*My kin worker, I describe herself as my advocate, especially dealing with the protection worker and other workers. They don’t know the pressures I*
am under, and what I can and cannot do. Many times I just met with [the mother] and her worker. You feel you have to agree, okay, you want another visit, okay, another supervised visit, okay, if that’s what you want me to do, that’s what I’ll do, but [the] foster care worker, she was there to advocate for me, and [if] I was uncomfortable for me, she was there for me. (Kin caregiver)

This quote highlights the importance of providing kin caregivers with an advocate to help them navigate the complexity of a system that is filled with competing demands and various workers with different roles, and to overcome the challenges of working with the biological family and sorting through the challenging legal system.

**Relationships between kin caregivers and children**

The relationship between the kin caregiver and the child is complex because there is a bond that transcends the typical foster parent–child relationship. In this excerpt, this kin aunt explores how she is so attached to her nephew that she is unwilling to completely let go of her heart for fear she will be devastated if he returns to his mother’s care:

> I need to save a little bit of myself, and whereas a foster child, that child would go and you would never see that child, but I would maintain the relationship with [the child], so really trying to keep that little space. My name is Aunt L., Aunt L., Aunt L., that is my mantra. She can still be his mother and I am not trying to be his mother. (Kin caregiver)

The aunt makes an important point here that extends beyond the traditional foster placement—her relationship with her nephew will continue even if he returns home to his mother. This is a completely different challenge than that encountered by foster parents. In many respects, foster parents grieve the loss of the ongoing relationship with the child when he/she returns home; conversely, the kin caregiver is faced with the challenge of sustaining a relationship with a child who has returned to the parent’s home.
Stigma towards kinship placements

A very important theme that emerged during many of the interviews with kin caregivers was the sense that they felt stigmatized because of the family background of abuse or neglect. In the one interview with a kith caregiver the issue of stigma was not a concern, but many extended family members were made to feel that the “fruit doesn’t fall far from the tree.” The following quote highlights the challenges that kin caregivers face in trying to overcome the label of being “bad parents”:

He was adopted out [and when I] tried to get custody they said, “Look at what you’ve done with your own two, how [do] you know if you could do anything better with this one?” And I believe they had plans to adopt him before he was even born.

Another kin caregiver described the struggles she has encountered in overcoming the strong belief of some workers that kin caregivers cannot change their parenting abilities over time:

[The] CAS worker met me at the door and said, “Look at what you’ve raised already...what makes you think you can do any better? Why should you get a chance?”

This kin caregiver felt that foster parents are treated better and that society itself holds the belief that kin caregivers cannot adequately parent:

They [foster parents] are treated [like they] are royalty, but when you are kin you are treated like dirt because of your children, because you know somehow, and this is what society told you, you probably abused your kids and that’s where it all started, the apple doesn’t fall far from the tree.

This theme resonates with the findings from the worker section, whereby workers who typically did not possess a knowledge and understanding of kin families were more apt to judge these families and dismiss the caregivers’ innate strengths.
System bureaucracy

The issue of system bureaucracy came up time and again for both sets of caregivers. Both kin caregivers and foster parents experienced challenges related to navigating the complexity of the child welfare system.

Foster parents

Many foster parents spoke of the challenges of negotiating a complex system that does not always appear to meet the needs of the children they are caring for. In the quote below, a foster mother speaks of a crisis situation that emerged with a child during after-hours:

*The worker was a new after-hours worker and she was trying to call her supervisor and, you know, the police kept saying where’s your back-up and I said, “I am trying, I am trying both lines and no one will make a decision,” and finally he said, “We’re taking over, we are taking the child to [hospital], you have no choice.” So I said, “Am I going with you?” and they said “No,” so then I was chastised [by the worker] for not going with them. But I said the police said I couldn’t, but they said no, you should have gone and followed.* (Foster parent)

In this particular situation, the foster mother highlights the challenge of managing a complex situation in isolation and then her sense of being blamed after the fact. This is a theme that resonated throughout many of the interviews with foster parents.

In this next excerpt the foster mother, who is also a placement supervisor, highlights her perspective on system bureaucracy from both ends of the spectrum:

*I have had both perspectives, so that has been enriching on both ends, and I have been involved in policy and procedure formation, I have been involved in training, and I have been involved in pilot projects, having had these kids in my home, seeing the consequence of poor case planning or systemic issues that are so global. I see it firsthand how it affects the children. Like not being able to go to the beach because I don’t have the
form signed for the 15-year-old even though I know she is a good swimmer so, as a family, we can’t go to the beach that day because of one child, so family life, it makes like family, be a part of who we are, but I can’t take you ’til I have someone to do this one task, or a lifeguard at a pool do a swim test, or you have to wear a life jacket and sit out. Kind of artificial. I can take this back to the agency and tell them, we need to make this less artificial and we need to...all these policies are there for a reason, but the effects on the children, it really singles them out. And stigmatizes them further. (Foster mother/supervisor)

Another quote by the same foster mother/supervisor explores how the system prevents caregivers and workers from truly understanding the needs of children:

I remember reading...the plan of care after it was done, and I have to say that despite the fact that the worker asked some really good questions and knew the kids really well...this [plan of care] doesn’t tell me anything about S. It tells me she can set a table, it tells me she is in Pathfinders, and she is in swimming lessons and skating lessons and anything you can possibly find to put her in, but it doesn’t tell me what it means day to day to be that girl, but it was all compartmentalized from the seven domains [from Looking After Children]. Identity [was] talked about, “Oh she’s aware that’s she a young woman now.” “Well, yeah, she’s 15” (laughter). I am glad she is aware of that, but it didn’t talk to me about what’s it like to be a little girl with developmental delays in a special class at school. (Foster mother/supervisor)

This foster mother/supervisor highlights how system bureaucracy affects her role as caregiver to the child, and how the system’s emphasis on administrative processes gets in the way of workers and caregivers exploring meaningful and enriching relationships with children.
**Kin caregivers**

In many respects, the same level of frustration in dealing with the system also exists for kin caregivers. In the quote below, a kin caregiver speaks of how she had to deal with the process of being screened as a kinship placement:

> No, we have to jump through all of the hoops before they would consider us. You need a three-bedroom house—not an apartment, a house. (Kin grandmother)

In the next quote, a kin grandparent speaks of the level of intrusion she experienced during the placement screening process:

> I am not sure if I shared some important facts or expectations about the hoops we went through, i.e. lengthy invasive interviews that went to the extent of our sex life...police checks on everyone who enters your house on a regular basis. Everyone that came [to a] Bible study we hosted from our church [would] get a police check or we had to stop hosting it. (Kin grandmother)

For kin caregivers, these themes of frustration around system bureaucracy seemed to emerge at the point of contact with the child welfare organization during the screening process. This point is more fully expanded upon in the discussion chapter in relation to kin screening.

**Training**

**Foster parents**

There was not a great deal of unanimity by foster parents related to their experiences of training provided by the child welfare system. In the following quote, a foster mother states that she feels she receives a great deal of support and training from her organization:

> We get lots of training, go to the convention...We get a lot of support. (Foster mother)
In contrast, in the following quote another foster mother, who is from a different agency, explains how she feels that the level of and support for training of foster parents has diminished over time as resources have become increasingly scarce:

*I have seen changes over the years, just as far as economic times go for sure, and funding for the Ministry. I found when we started there was considerable funding for training.* (Foster mother)

**Kin caregivers**

Kin caregivers did not speak to the issue of training on a substantive level, but this one quote from a kin caregiver provides an example of how the PRIDE model does not fit with the perspectives of kin caregivers who have a pre-existing relationship with the child:

*Oh, my PRIDE training, which we do kin/foster/adoptive, I was the only kin, I didn't, there weren't many kin-specific things that come up in the training.* (Kin caregiver)

This quote highlights how this kin caregiver felt isolated within the context of a training system that has really been created to support foster parents.

**Youth findings**

Nine youth participated in this research, of whom only one was male (Figure 5.3). This male came from the foster youth data set. In total, four foster youth (age range 13–14 years, mean 13.5 years) and five kin youth (ages range 13–20 years, mean 15 years) were involved in the research. At the beginning of data collection, it seemed simpler to recruit the youth from foster placements and much of the recruitment process was focused on the finding more kin youth for the research. Much effort, and many ethics amendments later, the study yielded a total of six kin youth. A data set of nine does not even begin to reflect the time and effort that went into recruiting this very specific group. There were times when the researcher wanted to give up recruiting the youth, but she was glad she persevered and tried various means to engage this crucial group of individuals.
**Figure 5.3.** The gender distribution of the youth data set.

**Overarching themes**

The following are the substantive themes that emerged in the youth group. These overarching themes reflect the issues that emerged during the course of interviews held with eight youth.

1. Understanding the reason for placement
2. Culturally relevant placements
3. Feelings (fear of loss, anger towards the system, divided loyalties)
4. Youth understanding of kinship
5. Permanency within foster placements
6. Relationships
7. Resilience
8. Traumatic experiences
9. Placement instability
This findings section is much more limited than those of workers and caregivers in terms of results, given the limited number of youth participants engaged in the study. With only nine subjects, there are fewer themes and issues captured for this sub-group. Despite this, there are still some emergent and important themes to review and understand.

**Understanding the reason for placement**

The following quote seemed important to capture in terms of identifying that there are times when youth do not understand why they are placed in care or the reasons why they are asked to move. In this quote, a foster boy speaks of his experience of having to move out of his foster home:

*KD: How come you left your [foster] house, what happened there?*

*Foster youth: I don’t know, I just got moved out.*

*KD: You don’t know what happened.*

*FY: I guess [the foster mother] was getting a new person when I got moved out...*

This quote shows how the youth perceived his move out of his placement to be based on the need for another child to move into the home. It displays, for this youth, a sense of displacement from his current home and a lack of understanding regarding the context or reasons for his move to another home.

This issue was reinforced in the interviews with caregivers, particularly foster parents, who stated that many children and youth who moved into their homes had no understanding of why they were there or what led to their removal from their family home. Foster parents indicated that it was their understanding that the purpose behind seven-day visits, in particular, was to give the child a more in-depth explanation of why they had been removed from their home and some information related to the short- and long-term plan for the child. In the interview with the youth quoted above, it was clear that he did not understand why he had been moved to another placement. Giving children and youth concrete knowledge about why they are moving and the decisions
regarding these plans is crucial. Without this information, there is always the potential that these children or youth may feel that they are to blame or misunderstand the logic or reasoning behind the transition.

**Culturally relevant placements**

The issue of culture and diversity was an emergent theme throughout the interviews with this sub-group. Two kinship youth of the youth participants were black. Culture and diversity, as they relate to placements, are important for youth, as is captured in the following quote. This black youth speaks of how she tries to fit into a parent model group home with other white female youth and the tension that this causes her:

> So like, here I am like with slutty girls and these two little white women, so how do I fit in right there? (Foster youth)

This theme resonated with foster youth because it was clear, in this girl’s situation, that she did not feel as though she fit in. In kinship placements, it is presumed that the child or youth will be placed with kin or kith who represent a cultural match. The interviews did not yield substantive enough data to warrant a complete comparison between these two groups related to culturally relevant placements. This is an issue that warrants greater attention, however, from clinical, policy and research perspectives.

**Feelings**

All of the interviews with youth resonated with emotions. This section explores the undercurrent of feelings that youth had in relation to their experiences, whether with their families or in care.

**Fear of loss**

A powerful emotion that resonated in the interviews was the fear of loss. The following quote speaks of one youth’s fear that, at a certain time every year, he is always moved to another foster home:

> There is some hard times some of the time. I was so used about every half year around the month of November, every time I moved to a new foster
In this quote, he speaks of fighting as a way of negotiating his fear of being moved. He was able to recognize that, over time, as he stabilized in his current foster home (residing there for three years), he was able to overcome this fear of being moved on to the next placement. Again, the data set for this study was not sufficient to yield more substantive themes. It can be said, however, that the tone of the interviews with these youth resonated with feelings of anger, loss and sadness over many complex emotional issues. In some respects, it seemed in some interviews with youth, that these emotional issues were something that had been buried or not explored by workers. One young girl, when asked about her experience of being separated from her natural family, cried and cried. It seemed as though the “emotional tap” of pain, sadness and loss was turned on during the interview. The researcher found herself asking if anyone (counsellors, workers, parental figures) had really talked to the young woman about any of these feelings. Furthermore, how do we help these young people overcome such great emotions if we do not allow them the space and place to reflect on their emotional challenges?

**Anger towards the system**

In the quote below, a youth expresses her anger towards everyone around her. In the interview, her anger was palpable as she expressed her frustration towards the group home caregivers:

*I have anger issues. Everyone knows that. If you piss me off for the smallest thing I will get angry and start a fight. They restrained me yesterday…Been angry all my entire life, and fighting solves it. (Foster youth)*

Another youth expressed her anger towards the people in her life:
I would never, I would never go pick fights with anybody, never. But if you come make trouble with me, I’ll beat you to the end. So... if that’s how you want it. (Foster youth)

A third foster youth expressed her anger towards the system for bringing her into care and towards her parents for allowing this to happen to her:

For me it was sad when I came in [to care], missed my parents and I was kind of mad, and sad... I was mad at the agency and kind of mad at my mom. (Foster youth)

**Divided loyalties**

In one particular interview, a foster youth was very insightful and emotional about how hard it is to love both of his parents and how to return home caused him to feel the pressure of being split between two parents—a sense of divided loyalties:

Yeah, I want to go home. I want to go home with my mom but I also want to go home with my dad but I don’t want to hurt their [his parents’] feelings... It might seem weird, but sometimes I picture myself living with one and then the other one is upset and then I get upset and start to cry, just the thought. That happens a lot. And then [I think] they don’t want to see me anymore. (Foster youth)

**Youth understanding of kinship**

Kin youth expressed their belief in the fundamental importance of kinship placements. This quote explores how youth believe that having a relationship with extended family has considerable importance for the quality of the placement:

I think it is easier for kids to be with their grandparents, because they are at least related to them. Usually grandparents and grandkids have a relationship. (Kin youth)

The next quote from another kin youth echoes that sentiment:
Kinship is a lot better because you are living with people who you love.
(Kin youth)

The following quote from an older kin youth explores how she lived with her sister in a kinship placement. This youth examines the challenges of such a placement and how the multiple roles her sister was managing made the placement more complex:

My sister was going through a break up...It was hard, she was being a mother, a sister, a best friend so it was hard for her to take on all those roles and take on the family. (Kin youth)

It is clear from these myriad of responses that although kinship is seen as family, the roles can be complicated. In the final quote above, the young woman expressed how her sister was overwhelmed with the demands of remaining the older sister, but also taking on the role of a full-time parent. This placement broke down and the youth transitioned back to her foster placement.

How youth understand and perceive living with extended family or kith is an issue that requires a great deal of understanding and exploration by front-line workers. Workers who have children and youth placed in kinship homes should be encouraged to examine how the child or youth is experiencing these placements. It is evident from this limited sample, however, that these youth found the experience of living with kin as loving and seeming like home.

Permanency within foster placements

Only one youth spoke of this issue, but her experience resonated in the interview and it seems important to highlight it. She spoke of how she had entered foster care twice and how, on the second occasion, she was able to transition back into her previous foster home. Almost serendipitously that home was available to the youth, but if the placement had not been available she would have to move to yet another placement:

I don’t really know ’cause I don’t know what it feels like to be in a different home. I got to pick which home I think because the first time I
was, I was so scared, like where am I going? I remember the first time I was small and I was like, this is a huge house, and there were so many people and then when I went back there the second time, it’s like, okay, I’ve been here before, I kind of know who these people are and they are not strangers. (Foster youth)

This is a critical point because just as youth placed in kinship homes desire to be with relatives whom they have a relationship with, so too do foster youth who are entering and re-entering care.

**Relationships**

**Relationships with workers**

Over and again, youth spoke of their relationships with social workers. In the following quote, a youth speaks of how she felt her worker “bribed” her to move to another foster home with visits to a McDonald’s restaurant. For the youth, this method of “enticement” seemed to be somewhat coercive and not genuine:

> I don’t like when they bribe you when you come into foster care. They bribed us with McDonald’s. I know it is trying to get it off your mind they would take you to McDonald’s. Let’s go to McDonald’s...and another time we went to KFC. (Foster youth)

When the youth was asked how workers could better handle these situations, she responded by stating:

> I think they could talk to you...Having a good worker, [she] took her time and waited for me to open up. Waited for me to open. (Foster youth)

The same youth spoke of how her worker was not being open and forthright with her about important issues:

> [It] worries you more when you don’t know, like a secret. Like for the one night when we got to see our brother, it was our last visit with our brother and they didn’t tell us that...and then my worker came out and said, “B.
This youth describes how workers and caregivers are not always transparent with youth about issues that are vitally important for young people to understand. This example showcases the importance of this issue. This lack of communication and openness is understood at a deeper level by these youth. In an interview with one young person, it was obvious from her comments that she lacked complete trust in her worker’s ability to be open and forthright with her. This is an important issue to consider, and perhaps workers, in their efforts to protect children or youth, are in the long run eroding trust and healthy relationships with these individuals. These comments by the youth about mistrust made the researcher reflect on her own practice of working with vulnerable children and youth. Indeed, she was not always open and forthright about the issues and plans. It is clear from these poignant examples that workers must consider how open communication is vital to building a trusting and open working relationship with children and youth in the child welfare system.

**Relationships with caregivers**

Youth spoke of their relationships with caregivers in unusual but important ways. In the following quote, a youth speaks of how her foster mother could only provide permanence to her one brother (three siblings are in care) because this is all that the foster mother could afford, given there were no adoption subsidies available:

> My foster mom wants to adopt my little brother because he is the only one she can afford. And then we have been in foster care, we can decide if we want to stay in. (Foster youth)

This comment is a striking example of how foster parents can and do make choices of which children to “hang on to” and which to let go. This youth spoke in a forthright manner, but beneath this comment the question remains: what does this “Sophie’s choice” represent to the youth when her brother is chosen over her and her other brother by the foster mother?
In the next quote, a youth speaks of how her relationship with her foster mother was much more enduring than that of her younger brother with the same caregiver. This youth speaks of how, even after returning home, she continued to have “access” visits with the foster parents, hence maintaining a bond that endured over time:

> When I went home and I would always visit them, like on the weekends and stuff, but my brother, he wasn’t comfortable, like, I guess he forgot who my foster mum was so he wouldn’t go to her. (Foster youth)

In another interview with a kin youth, she spoke of how her kith placement with a community member provided her with the skills required to navigate life:

> Like [my kith caregiver] would always counsel me every day and telling me all sorts of life’s stuff and whatever, he just, like, he give me like tips of the day and he makes me feel better, like if I feel down about something or if I get too upset, too fast over something he would, he will make me understand and calm me down and tell me good things. (Foster youth)

This next foster youth spoke again of learning life skills from her foster mother related to cooking:

> Like I’m like not a very good cook, but like [foster mother] is a very good cook and she cooks dinner every night, but then dessert I learned from her. (Foster youth)

Another foster youth spoke of how his foster parents were emotionally neglectful and did not speak to him, which resulted in a replacement. Again, this quote underscores the power of the caregiving relationship and, when there is no attachment, how painful this can be for the child:

> I was for some reason, I was getting talked to less and less, at one point I was getting locked in my room and getting fed in my room, and at one point I wasn’t allowed to use the phone I guess because they thought I would tell CAS, but in the end I did end up telling the school and then I
moved to [another foster mother’s] house and I had freedom there.
(Foster youth)

Relationships with siblings

All youth in the study spoke of their relationships with siblings and the importance of these enduring relationships. The quote below from a kin youth represents how she was able to have contact with her mother and sister, but because her sister was placed in an adoptive home, her sister was not allowed to have access with the mother. This kinship situation highlights the complexity of sibling relationships and how different placement alternatives can have a considerable impact on the sibling relationship. This youth had become the conduit for the relationship between her sibling and her mother:

She [sibling] sent her [mother] a school picture and wrote a letter on that and saying Merry Christmas, and I gave it to her [mother], and she was really happy. Well, my mom isn’t allowed to see her [sibling]. (Kin youth)

This next quote demonstrates the lack of uniformity of the sibling relationship for foster and kin youth, except for being an enduring theme throughout the interviews. This quote demonstrates how the youth perceived the worker as not making attempts to forge a relationship among the siblings. Despite this, the youth speaks of a highly conflictual relationship with her brothers:

Kin youth: Two are 20 and [the] other two are 14 and 15.

KD: And they live with your dad?

KY: They live in group homes.

KD: Does your social worker try to get you together?

KY: She attempts to but clearly she doesn’t.

KD: Do they ever call you?
KY: No, you can’t. I won’t give them my number, unless I want them to call me non-stop and I would most likely hang up on them if they call me. I hate talking to my family. And me and my brother always fight on the phone so…

KD: What do you fight about?

KY: We fight about my step-dad.

Although this quote represents only a participant of one, there is an important theme here in that the relationship between the siblings is frayed and that perhaps with greater intervention by the worker, the sibling relationship could be worked on through mediation and support by positive adult communication.

Another theme that emerged in the interviews was the sense that foster siblings (the natural children of foster caregivers) were also an important relationship for youth in care. The following quote highlights how a youth found companionship in her interactions with her foster siblings:

Oh it’s like, whoa just be like, before I used to be like it’s so boring at my mom’s, it’s me and her but I had nothing really to do, but with all of them it’s so much fun. Like even if we’re not out doing something or we’re just at home watching TV, it’s still fun. (Foster youth)

This quote demonstrates the importance of foster siblings in the quality and stability of the placement for children in substitute care.

Resilience

Resilience theory is a concept that is embedded in the theoretical framework of this thesis. Indeed, some of the youth who participated in the study provided insight into what the concept of resilience, and overcoming the odds, represents for them. This youth, now 20 years old, spoke of how having others believing in her gave her the strength to overcome challenges and become a role model in her high school.
I am a guest speaker at my high school. If you have people who believe in you and your potential, you can do anything. (Ex-foster youth)

Another youth spoke of how her academic success represented her ability to move forward in her life:

I am the youngest of four kids and the first one to finish high school. (Kin youth)

And a further youth spoke of how a teacher in her school gave her the confidence to share the details of her current living situation:

I changed teachers every year, but there was one teacher, Ms. N., but now she is Ms. D., um, she knew about it, she kind of understood because she had been through some things with her dad. I used to talk to her about it, but a lot of teachers don’t know...a lot of teachers know kids who are living with grandparents. (Kin youth)

All of these quotes represent how youth have overcome adversity and challenges in their lives. These youth took pride in sharing with this researcher how they were able to overcome adversity. It was never enough to share the sadness and loss; rather, there appeared to be a desire by these young people to share their triumphs and capacity to overcome great odds. This sharing of stories was an important theme that resonated throughout all of the interviews.

**Traumatic experiences**

Both kin and foster youth explored the impact of trauma in their lives. The following quote comes from a young woman who had been placed in both kinship and foster placements. She spoke of the trauma that she had experienced prior to entering care:

I was 12. I came out about being molested. I was molested at age five by my older brother and by my cousin. My brother was living with my cousin and two nieces. I came out about this. My dad beat up my brother in XXX and after my dad left and I said something to my worker about my mom
doing drugs and that is when they took action with my [younger] brother and me out of the home. [We] got put in a foster home in XXX for seven months. (Kin and foster youth)

Another foster youth spoke repeatedly of the trauma of witnessing her mother being arrested prior to the youth being placed in care:

> When I moved away from my family, that’s the only time I have been really sad in my whole entire life…I bawled my eyes out and watched my mom get arrested. I watched my mom get arrested and I kicked at the police officers and hit them. Yelled at them for why are they taking my family away. And then I was back and forth…I have been in and out of foster care. I don’t even remember the first time I was in foster care. But I remember the last time. (Foster youth)

Both of these situations represent the stories of young persons’ lives and the experiences and trauma they witness. The second quote shows a young person who not only witnessed trauma, but then also lived the trauma of being moved time and again. The researcher was always amazed at how young people were so willing to share their pain and sorrow, particularly within the context of such a short time frame. In one interview, a young person shared the trauma of her sexual abuse within the first 15 minutes of the interview. Clearly these young people required a space and place to share their stories. More than anything, these individuals wanted to share who they were and what their lives represented.

**Placement instability**

One of the issues that emerged several times in the interviews with youth was the number of moves that these youth had experienced, whether in kinship or foster placements.

> I was just starting junior kindergarten, and my mom got beaten up once and she got threatened, and she thought it was okay to go back and went to an apartment, but she got beaten up again, so we went into foster care
and then went back to grandma’s...I have been to five different schools and moved seven times. (Kin youth)

In the following excerpt from an interview with a second kin youth, she speaks to the number of moves she made while residing with her mother prior to entering foster care, and then finally residing with her grandmother.

KD: How many times did you move when you lived with mom?

Kin youth: 64 times.

Many years ago, the researcher provided training to workers on the issue of placement instability. She would show the film about Richard Cardinal, a young aboriginal youth who took his own life in 1984 after moving a total of 28 times in foster care and losing all contact with his natural family and beloved sibling group (Obomsawin, 1986). Now, 26 years later, the same issues resonate in interviews with young people. The sadness and loss that these youth reported resonated with the researcher long after the interviews were complete.

**Overarching themes and emerging analysis**

Given that there are three groups represented in this study, it is important to visually illustrate how the same themes cut across some or all groups. The only dominant theme that emerged through all three data sets was the issue of relationships. The meaning of this and other predominant themes is more closely scrutinized in the discussion section. This thematic analysis becomes the “scaffolding” for understanding the theoretical framework that has emerged from this grounded theory analysis of constituent groups.

Several themes emerged from the set questions developed for the research study. Through a dialogue and conversation with participants, which included more probing and clarifying questions by the researcher, further ideas and analysis emerged. Themes that were common across various groups are shown in Table 5.1.
Table 5.1. Common themes that emerged during the interview process.

<table>
<thead>
<tr>
<th>Themes across all three data sets</th>
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<tbody>
<tr>
<td><strong>Workers</strong></td>
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<tr>
<td>Relationships</td>
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<tr>
<td>Differences between kinship and foster placements</td>
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<th>Similar themes between worker and caregivers</th>
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<tbody>
<tr>
<td><strong>Workers</strong></td>
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<td>Access</td>
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<tr>
<td>Training</td>
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<tr>
<td>Stigma/shame</td>
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<tr>
<td>Similarities between kinship and foster placements</td>
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<tr>
<td>Differences between kinship and foster placements</td>
</tr>
<tr>
<td>Motivation: financial</td>
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<td>System bureaucracy</td>
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<th>Similar themes between workers and youth</th>
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<tbody>
<tr>
<td>There were no overlapping themes between these two groups, except for relationship issues (see above).</td>
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<tr>
<td>Similar themes between caregivers and youth</td>
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<td>------------------------------------------</td>
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<tr>
<td><strong>Caregivers</strong></td>
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<tr>
<td>Culture and diversity</td>
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<tr>
<td>Kinship</td>
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Chapter 6
Discussion

Introduction

This chapter requires the greatest consideration for it is here that ideas and concepts merge together from the three studies. Coming out on the “other side” of completing a study involving three discrete groups—workers, caregivers and youth from the kinship and foster care streams—has allowed this researcher to reflect on the triangulation of the three data sets. This chapter merges the thoughts and perspectives of these three groups to create an overarching conceptual model. This model builds on the triangulation of the three perspectives, and the epistemological stance of social construction.

This chapter examines the findings and links this information back to the literature. In addition, unique findings that have emerged from the study, which are not explored in any depth in the current landscape of research or writings on the subject of kinship and foster care, are explored. This chapter gives the researcher the opportunity to reflect on how this study has contributed to the current state of knowledge on this subject from practice, policy and research perspectives. This study contributes to our emerging knowledge of both kinship and foster groups and does so from an Ontario perspective—a perspective that is overshadowed by other research that has been developed across North America and around the world.

This chapter gives an overview of the findings and analysis for each of the three subgroups. One of the major hurdles of this study was creating an ethical framework that would ensure the needs of all participants were met. A segment titled “ethical considerations” explores the impact of the ethics protocol on the evolution of the interview process with individual participants. This is an important consideration for review in this study and requires some analysis in the overall context of this research.

As the chapter progresses, the researcher examines how her epistemological stance has contributed to her perspective and understanding of the findings. The chapter concludes with some personal reflections and analysis from the researcher, and the learning and
evolution that she has been through on this journey.

Research questions

Given that this is a qualitative study there are no hypotheses to be tested but, rather, questions and ideas to be explored. The following ideas and themes describe the essence of the study and provide an important framework for this discussion chapter:

- What are the essential differences between kinship and foster placements?
- What are the similarities between kinship and foster placements?
- How do we strive to improve these placements for children and youth?
- How do we attempt to improve these placements and related supports for kin caregivers and foster parents?

Worker analysis

Overview of findings

A total of 13 workers (seven non-kinship and six kinship) were interviewed for this portion of the three-part study. Table 6.1 provides the reader with a concise overview of the findings that emerged from this part of the study.
Table 6.1. Overview of findings from the 13 workers.

<table>
<thead>
<tr>
<th>Theme</th>
<th>Findings</th>
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<tbody>
<tr>
<td>Training</td>
<td>Workers perceived kin caregivers and foster parents to have different training needs based on their own unique perspectives.</td>
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<td></td>
<td>Workers saw kin caregivers as more challenging to engage in training because they already have the child in their care and may possess a pre-existing relationship. Workers believe that many kin caregivers do not see the need for training, given their knowledge of the child.</td>
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<td>Workers indicated that they believe foster parents benefit from the PRIDE curriculum, based on the depth of understanding the curriculum provides with respect to attachment and permanency issues.</td>
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<td>An issue to consider is whether foster parents themselves always find that the PRIDE training relates to their experience or meets their needs. It is important to reflect here that at no time during the course of the interviews did foster parents express dismay about the content or process of the training. This study did not attempt to provide specific findings related to satisfaction with the training. If more research is conducted specifically on this subject, it may be found that foster parents also wish to have different perspectives provided in the training model.</td>
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<td>Theme</td>
<td>Findings</td>
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<tr>
<td>Stigma and shame</td>
<td>Workers expressed sadness over the stigma and shame that children often feel when they enter care, particularly foster care.</td>
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<td></td>
<td>Some workers portrayed a sense of stigma towards kinship placements—the belief still that the “fruit does not fall far from the tree.” Workers who did not hold a specialization in working with kin families seemed to harbour this belief more strongly.</td>
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<tr>
<td>Similarities between kinship and foster placements</td>
<td>Workers viewed both kinship and foster placements as safe havens for children who require protection from their families.</td>
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<td></td>
<td>Both kinship and foster carers are mandated to follow the same policies and procedures.</td>
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<tr>
<td>Theme</td>
<td>Findings</td>
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<tr>
<td>Differences between kinship and foster placements</td>
<td>Workers outlined how kinship and foster placements require different kinds and levels of support. For the youth who participated in this study, kinship placements were a known entity. Data relating to pre-existing relationships between kin caregivers and children and youth have not been uncovered in the literature. These are important data that agencies could collect and an analysis would be important for the field. This cannot be said for children entering foster placements. Kinship placements provide normalcy. Children can still visit with parents, if possible, and typically still attend the same school. The SAFE tool is used, but workers felt that there is a greater emphasis on child-specific issues with kinship placements, whereas in foster placements the emphasis is on the “unknown” child, the child who has yet to arrive. From an emotional perspective, workers felt it is harder to screen kin families out (people who have a connection to the child, but who are found to be unsuitable). Workers articulated a sense that to say “no” to a kin family was more challenging because of the kins’ connection to the child.</td>
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<tr>
<td>Theme</td>
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</table>
| Relationships | There was a sense that workers need to be matched to foster parents—that it cannot just be a case assignment, but rather a working match of personalities. A similar theme did not emerge for the assignment of workers to kin families.  
Workers appeared initially more mistrusting of kin caregivers, and appeared to move towards a greater respect for and understanding of these individuals over time.  
Relationships between workers and children in care were seen by workers themselves as vital. There was a sense that some children and youth are easier to attach to than others.  
The relationship between caregivers and biological families is an important issue. Compared to kin caregivers, foster parents are viewed as far more disconnected and, at times, far more mistrusting of the biological parents.  
The relationship between caregivers and children in care was a unique theme within this group. Kin caregivers traditionally have a pre-existing relationship with the child, leading to a greater attachment and perseverance with the child. This leads to the child being less likely to be removed from the home because of behaviour issues. |
<table>
<thead>
<tr>
<th>Theme</th>
<th>Findings</th>
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<tbody>
<tr>
<td>Entering the child welfare system</td>
<td>This was an important theme throughout all of interviews. Workers saw pre-placement visits as essential and a good way to minimize trauma for children. Workers try to keep siblings together. Worker cannot always provide answers or a long-term plan for children. This is seen as frustrating for both workers and children.</td>
</tr>
<tr>
<td>Exiting the child welfare system</td>
<td>Workers noted that children are provided with material items (e.g., new coat, boots) when they come into care, which boosts their self-esteem. Often, these same children return to a life of poverty, which includes a decreased ability to have new clothes and participate in recreational outings. Workers voiced the belief that, at times, children lose their safety net of being in care—moving from a place of safety back to a life of challenges. Workers saw it as being much easier to transition back from a kinship placement because there is a sense that children can still move back and forth from the kin to the family home. This is not always the case with foster placements. Workers outlined a stricter divide between leaving foster care, as compared to leaving extended family and returning to the biological family.</td>
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<td>Organizational factors</td>
<td>Interviews were held at several agencies across the province, which led to different discussions about the mission and vision of children in care related to organizational philosophy and beliefs. Some agencies moved children directly into kinship homes, even on after-hours service. There were times when workers highlighted a compartmentalization of services—each worker is assigned a specific role. One worker was assigned as a foster care worker, but she never had the mandate or ability to spend any time with children in the foster home. She reported feeling a disconnect from the issues that were going on in the foster placement because she did not know the child(ren) in the placement. Two of the four agencies held a kinship specialization. In the two agencies that structured a kinship specialization, workers held a smaller kinship-in-care caseload so as to provide more intense services to these families. Workers in agencies that did not have a kinship specialization reported that there was a need for specialization in this area so as to understand the clinical complexities of such cases and provide more tailored support to these families.</td>
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<td>Theme</td>
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<tr>
<td>System bureaucracy</td>
<td>Workers noted a sense of frustration with system bureaucracy issues for children in care and not always knowing the long-term plan for children. There was a sense that it is sometimes difficult to move the permanency agenda forward for these children. Several workers highlighted the system bureaucracy that exists with kinship placements. Workers felt that, in many regards, asking kin caregivers to attend to all of the same requirements as foster parents (e.g., attending a parenting course) does not always make sense or is seen as humiliating for kin caregivers. Workers felt that the system is too risk-focused on kinship placements, and that this focus on potential risk can make it more challenging for workers to engage these unique sets of caregivers. The emphasis on risk precludes workers’ capacity to fully engage with kin families.</td>
</tr>
<tr>
<td>Access</td>
<td>Some workers felt that kinship homes provide a “ready-made supervisor” for access visits. Other workers felt that kin caregivers do not always understand the safety and importance of protecting children during access visits—the line was blurry in terms of engaging relatives, but protecting children.</td>
</tr>
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</table>
Worker discussion and analysis

At this juncture in the analysis, it becomes important to compress themes into more overarching categories to begin the framework for the development of a substantive theory. Therefore, this section does not rework the 10 themes collated for review in Table 6.1; rather, it moves towards a more emergent thematic analysis that will link to the other two sub-groups.

An overarching theme that resonated throughout the interviews with workers is the perception that the system has built a kinship model of practice on top of the existing foster care system. The verdict from workers is—this model does not work. Kinship homes are qualitatively different and, because of these different needs, there is a requirement to create different model of kinship practice that attends to the uniqueness of family or community-based placements.

Workers illustrated how the system is set up to serve the traditional foster care model, and it would seem that kin families have simply been layered on top of an existing model of practice. Kin and non-kin workers spoke of the challenge of working with kin caregivers to help them understand and overcome the barriers of the child welfare and legal systems. The barrier, it seems, is that the system has never taken into consideration the unique perspectives of kin families and has failed to recognize that these family systems have such unique perspectives and needs that differ greatly from those of the traditional foster care model. A review of the literature suggests that this is a new or more overt theme that has arisen from this study. Winokur et al. (2009), in their systematic review, did not delve into the clinical and qualitative perspectives of workers. In the book Kinship Care: Making the Most of a Valuable Resource, Geen (2003) examined some of the issues and challenges that are unique to kinship placements.

Throughout the interviews, when the researcher asked kin and non-kin workers “What are the similarities between kinship and foster placements?” many workers were unable to provide much depth in their answer. What workers did acknowledge is that the kinship and foster care placements are similar in the administrative application of policies and
procedures. The second similarity was that both kinship and foster placements provide a safe haven for vulnerable children and youth.

When these same workers were asked the next question—“What are the differences between kinship and foster placements”—there was a clear desire to explore the unique qualities that exist between both placements. Many workers wanted to “jump” into the differences questions and not explore the similarities.

Many workers questioned if the existing PRIDE model of training works for kin caregivers, particularly when these caregivers already have the child in their home. In comparison, the majority of foster parents enrolled in the training are still awaiting a child—a child they do not know. It seemed almost antithetical to workers that training for kin and foster parents should be one and the same and, if they are combined, there should be greater attention paid to the specialized needs of kin caregivers. Given that there is no substantive body of research that explores the empirical evidence related to the PRIDE model, it seems imperative for child welfare systems to begin to examine the learning outcomes for both kinship and foster care placements. Kin caregivers in particular require an opportunity to express whether the PRIDE training model works for them. In this regard, future research must explore the efficacy of such a training program, particularly as it relates to kin caregivers.

An interesting theme emerged among workers who spoke of system compartmentalization, with a number of workers being assigned to one case, one child or one family. A worker at one site stated that she assesses kinship and foster placements, but never has any time with the children or the opportunity to build relationships with them in the context of their current placements. This is an important issue to sort through because, in many ways, having so many workers assigned to a particular case results in more emphasis on the adults and less direct service time with the children and the essence of the work—that is, building relationships with the children. In a study by Glissen and Hemmelgarn (1998), the researchers examined a unique set of outcomes related to interagency organization. They found that the organizational climate had an important impact on service outcomes, whereas service coordination did not lead to better outcomes.
for children. This contrasts with the findings of this study. It can therefore be said that providing seamless service provision to children and foster and kin families is an area worthy of further exploration and research.

Perhaps the one question the researcher is asked the most when she is queried about the findings of her research by child welfare staff members is “Which placement is better than the other—kinship or foster?” There is no clear-cut answer, but, overall, throughout the majority of the interviews, workers felt that it is usually better to place children with kin or kith, if the placement is to best serve the needs of the child. The majority of kin and non-kin workers felt that the obvious answer is that family, or someone known to the child, is the best alternative.

Given this researcher’s role in disseminating findings to child welfare professionals, she feels a moral obligation to ensure that child welfare professionals have access to the current state of knowledge related to this subject matter. The Winokur, Valentine and Holtan (2009) study should be published and made available to child welfare organizations on the PART website (www.partontario.org). This researcher is publishing the literature review from this study in an upcoming text edited by Kufeldt and McKenzie (2010) titled Child Welfare: Connecting Research, Policy and Practice (2nd edition), and also plans to compress the literature review into a PARTicle (literature review) to be published on the PART website. Child welfare professionals have a strong desire to understand and integrate the available evidence relating to best practice and effective policy development into their everyday decision-making. Access to PART and other knowledge dissemination portals is an essential component that links evidence to child welfare decision-making processes.

Organizational differences and attitudes

There was a subtle difference in attitudes and beliefs between workers whose agencies had developed specialist teams with a focus and emphasis on kinship practice and those from agencies with no specialization. In workers from the latter, there was a subtle shift towards less engagement of kin families and an attitude that “the fruit does not fall far from the tree.” This finding is congruent with Peters’ study (2005) that examined
workers’ beliefs and biases related to kinship placements. This does not mean that these workers are not open to understanding that kin families have different requirements, but there was an underlying sense that kin families are not able to provide a safe and stable environment for children in need of protection.

Another issue that emerged in interviews with workers was that, in some agencies, children are moved directly into kinship homes even on after-hours service. If a model could be put into place to pre-screen kin families before a crisis unfolds then it is likely that many more children could immediately move to a known environment instead of to a stranger. This is a new recommendation that has not previously emerged in the current state of knowledge related to kinship placements.

Workers from agencies with kinship specializations clearly demonstrated a keen awareness and understanding of the subtle and overt challenges that exist for kin families. In a sense, these workers almost seemed alone, working within their organizations, in terms of understanding the unique needs of kin families. Workers from outside of the specialization teams seemed to have a minimal understanding and minimal tolerance for the uniqueness of kinship homes. Kin workers expressed the need to educate and advocate for kin referrals and placements outside of kinship teams. The kin worker parallels the kin caregiver in terms of advocating for the unique needs of the family and child.

**Relationships**

Workers spoke of the pre-existing relationship that exists between kin families and the child. This pre-existing relationship seemed to be particularly understood by workers who possessed a specialization in working with kin families. These workers held a level of clinical expertise that spoke to their understanding of the unique qualities that exist in kinship placements.

The current state of knowledge related to kinship placements tends to explore the outcomes related to such placements. The notion of best practice models is not something that has been well developed in the literature. In their book titled *Relatives Raising Children: An Overview of Kinship Care*, Crumbley and Little (1997) explored the issues
related to pre-existing relationships between kin caregivers and children. This book does not contain evidence-based research, but rather explores some of the complex clinical terrain of working with kin families whose connection to the biological families is at times complicated by this pre-existing relationship. In a more recent publication completed by Marilyn McHugh (2009), she explored best practice models from kinship care programs both nationally and internationally. The issue of pre-existing relationships is not a detailed subject *per se* in her report, but the document does provide ideas for examining best practice models that link to effective clinical practice with kin families.

Relationships with children, caregivers and biological families were seen by workers as critical elements in building a positive working relationship for the overall benefit of the child or youth. In general, workers seemed to understand that there were times when they could not work with everyone, whether a child, parent or caregiver; that there are times when there is not a ‘goodness of fit’. Acceptance that not all individuals can work together is an important issue that requires more exploration in future studies.

During the course of member checking, one kin worker made a very important point:

*From the document sent to the worker: Relationships between workers and caregivers—there was a sense that workers need to be matched to foster parents, that it cannot just be a case assignment but rather a matching of working personalities.*

*Worker’s comment: While this would be a nice practice in principle, in the real world this point seems secondary, behind the need to match the foster parent to the child, rather than focusing on the relationship between the worker and the foster parent. I too have certainly worked with some very difficult foster parents, who were not a good personal fit for me, but if they were a good fit for the child then it really didn’t matter that much to me. The adults ought to be professional enough to adjust themselves accordingly, in order to accommodate the child’s needs.*
This perspective seems to pull all of these ideas together—that, ultimately, the goal of the working relationship between caregivers and workers must be to serve the needs of the child and not the other way around. It is this focus and emphasis that seemed to become lost in the myriad issues that emerged during the interviews with staff members.

**Substantive theory**

This dissertation employs a multidimensional framework. The worker findings can be situated within this multidimensional perspective from a variety of different viewpoints.

The ecological perspective was echoed in these viewpoints when workers spoke of their desire to view the family (kin, foster or biological) within the context of the broader community. The emerging conceptual model situates workers’ perceptions of kin families as being more closely aligned with the biological family. With foster families, workers see a greater divide in terms of access and overall relationship-building between the child and biological family.

Attachment theory resonated in interviews with workers in terms of their understanding of relationships between biological parents, caregivers and children. While not expressly using the word “attachment,” workers explored the notion of bonds between children and significant others in their lives. The rupturing of this relationship can cause major distress for a child who has likely already suffered trauma.

The notion of resilience was not expressly discussed by kin and non-kin workers in terms of how it relates to the child. Kin workers, in particular, noted the resilience of kin caregivers in overcoming challenges and remaining steadfast in their desire to advocate for the needs of the child. There was a sense from workers that the pre-existing relationship with the child creates a strong internal champion in the kin caregiver to promote the best needs of the child, even at the cost of feeling alienated from CAS. This is an interesting issue that appeared again in the analysis of the caregiver findings.
Caregiver analysis

Overview of findings

Table 6.2 summarizes the findings from interviews with 22 caregivers.

Table 6.2. Overview of findings from the 22 caregivers.

<table>
<thead>
<tr>
<th>Theme</th>
<th>Findings</th>
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<tbody>
<tr>
<td>Access</td>
<td>Through training and experience with biological parents, foster parents believe that it is important to provide ongoing contact between children and their biological parents. Kin caregivers want to provide access to biological parents, but have an intimate knowledge of the protection concerns with the biological parents because of the pre-existing relationship with the family.</td>
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<tr>
<td>Advocacy</td>
<td>Foster parents see the worker as the person to advocate for change—the person who can advocate for the needs of the child through the child welfare organization and the court system. Kin caregivers spoke a great deal about advocating for the child, but there were times when they felt their concerns fell on deaf ears with CAS workers or that they were blamed for being “too pushy” with</td>
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<td>Theme</td>
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<td>Attachment</td>
<td>Foster parents spoke of witnessing the plight of children who experience multiple moves in the system and are then challenged to attach to caregivers and peers. Many kin expressed the challenges and emotions related to forming a primary attachment to a child who was born to one’s own family member, knowing that the child may return to the parent’s care.</td>
</tr>
<tr>
<td>Caught in the middle (kin)</td>
<td>This is an important theme unique to kin caregivers, who see their role as challenging and caught in between the needs of the biological parent and child. This theme was specific to kin caregivers because of their relationship with the extended family network.</td>
</tr>
<tr>
<td>Communication</td>
<td>Several foster parents highlighted the challenges of trying to share and communicate the needs of the child with the assigned worker. Kin caregivers outlined the challenges of communicating with workers when there seemed to be an underlying tension or</td>
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<td>Theme</td>
<td>Findings</td>
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<td>conflict about the needs of the child.</td>
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<td>Compartmentalization (working in discrete components)</td>
<td>Both kin caregivers and foster parents spoke of how the system operates in different pieces (i.e., several workers are assigned to a case and not everyone knows what the other workers are doing). Using the old adage the “left hand doesn’t always know what the right hand is doing,” some foster parents advocated for one worker per case instead of several working in discrete roles and functions.</td>
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<tr>
<td>Similarities between kinship and foster care</td>
<td>Foster parents detailed how foster placements can provide love and stability just as effectively as kinship placements. One foster mother thought it would be useful to provide support groups for both kin and foster parents together to explore the commonalities between the two types of placement. Kin caregivers reported that the similarities between the two placements were based on administrative tasks: rules and regulations.</td>
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<tr>
<td>Differences between kinship and foster care</td>
<td>Foster parents felt that kinship placements should be subject to the same rigorous screening process as foster homes before such placements are accepted as an option</td>
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<td>Theme</td>
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<td>Several kin caregivers reported, from their own experiences, that the level of support and financial remuneration for kin families differs to that for foster families.</td>
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<td>Culture and diversity, aboriginal issues</td>
<td>Both kinship and foster parents agreed in their belief that children and youth should be strongly connected to their culture and heritage.</td>
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<td></td>
<td>The systemic issues related to aboriginal caregivers and families are multiple. It is important to understand and consider the depth and contribution offered by aboriginal caregivers.</td>
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<tr>
<td>Entering the child welfare system</td>
<td>Both kin caregivers and foster parents expressed an understanding of how when children leave their parents’ care, their world can be turned upside down. Both groups expressed a strong desire to provide children with stability and permanency right from the beginning of their placement.</td>
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<tr>
<td>Foster parenting</td>
<td>Many themes emerged related to fostering from the perspective of the foster parent participants. These themes included the</td>
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<td><strong>Theme</strong></td>
<td><strong>Findings</strong></td>
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<td></td>
<td>following:</td>
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<td>The Foster Parent Association was seen as an important peer network that requires outside support and mediation by trained social workers who can assist foster parents in negotiating the challenging issues faced by vulnerable children and families.</td>
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<td>Foster parents stated that they believe their own biological children are at times left out of the discussion in terms of understanding the impact of fostering on the entire family system. Foster parents advocated for support groups and peer groups for these children.</td>
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<td></td>
<td>Foster parents spoke of tremendous grief and loss when foster children, who may have lived in their care for several years (in one case nine years), leave the family home and all ties are severed by the system. This process and impact on families was seen to be misunderstood and foster parents require more support by the child welfare system.</td>
</tr>
<tr>
<td>Kinship</td>
<td>Kin caregivers felt that they had a unique relationship with the child because, as was often the case, they had developed a relationship with the child since birth.</td>
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<td>Theme</td>
<td>Findings</td>
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<td>Kin had a unique vantage point in terms of understanding the protection issues with birth families because of family ties.</td>
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<td>Motivation</td>
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<td><strong>Motivation: financial</strong></td>
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<td>Foster parents expressed the desire to be understood by the system as providing a deeper commitment to children that extends beyond financial remuneration. Many articulated a strong desire to help children feel part of the family, and this required digging into their own financial resources to provide foster children with the same opportunities as their own children. Kin caregivers reiterated the challenges of providing for children in their care without adequate financial support.</td>
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<td><strong>Motivation: caring for children</strong></td>
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<td>Foster parents spoke of the desire to care for children to do something for the “greater good” of humanity—a desire to give back to the world at large—an altruistic gesture. Kin caregivers spoke of being driven by a</td>
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<td>Theme</td>
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<td>desire to help the family system and the child whom they love and are connected to. Both groups were driven by the desire to provide stability, love and compassion to vulnerable children.</td>
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<tr>
<td>Organizational perspectives</td>
<td>Kin caregivers expressed a desire to have the system re-evaluate the need to place children in foster care prior to placing them with kin. Some kin caregivers suggested that in many situations “the writing was on the wall” with respect to protection issues that would necessitate the child’s removal from the family home. The question was asked: why not pre-screen kin caregivers as a mechanism for facilitating a seamless placement to kinship homes, instead of placing children in foster care while awaiting approval of the kinship placement?</td>
</tr>
<tr>
<td>Powerlessness</td>
<td>A theme that emerged for some foster parents and kin caregivers was that there are times when both groups feel “powerless” in their ability to advocate for the needs of the children in their care with CAS staff members.</td>
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<tr>
<td>Theme</td>
<td>Findings</td>
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<tr>
<td>Caregiving relationships</td>
<td>Foster parents spoke of the importance of maintaining and cultivating a positive working relationship with the birth parents and the assigned worker in order to benefit the child.</td>
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<td></td>
<td>Kin caregivers explored the complex emotions that are inherent when caring for a family member’s child. The challenges and attachments were evident in the interviews held with this group of caregivers.</td>
</tr>
<tr>
<td>Stigma towards kinship placements</td>
<td>Kin caregivers expressed strong emotions related to their perception that there are times when the child welfare system stigmatizes them—the “fruit does not fall far from the tree.”</td>
</tr>
<tr>
<td>System bureaucracy</td>
<td>Foster parents spoke of a system that focuses on administrative requirements and bureaucracy to the detriment of forming a lasting and meaningful relationship with the child.</td>
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<td>Kin caregivers highlighted a system that is challenging to navigate, particularly at the initial screening and assessment process.</td>
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<td>Theme</td>
<td>Findings</td>
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<tr>
<td>Training</td>
<td>Foster parents expressed strong support for the PRIDE training model, but some believed that the commitment and resources to provide alternate training opportunities had diminished over the years as financial resources became tighter. Kin caregivers did not support the PRIDE training model as they believed that the training does not meet their specific needs.</td>
</tr>
</tbody>
</table>

**Caregiver discussion and analysis**

This section of the study involved the most complex and divergent analysis. In comparison to the other two data sets of workers and youth, the caregiver group held the most differing views about their overall relationship with child welfare agencies, children and families. It was in these interviews that perhaps the most was learned about the complexities of kinship versus foster care. It is the essential differences between these two groups that has become the foundation for the comparative analysis of the caregiver data set. This section focuses on the underlying themes and issues related to the similarities and differences between these two constituent groups.

**Similarities**

At first glance, it appeared that kin caregivers and foster parents had little in common but, as the themes emerged, similarities did become apparent. Both groups spoke of the need for culturally relevant placements, effective access between parents and children, fewer workers assigned to a case to avoid confusion and more effective communication between workers and caregivers. Both groups commented on a rigorous screening process and administrative requirements.
Differences

The differences were more striking. Throughout the interviews, a sense evolved that kin caregivers were a stronger advocate for the child because of the inherent pre-existing relationship and bond that exists within the family system. Foster parents advocated for children, but an interesting theme emerged—that this group viewed the worker as the advocate for the child. Conversely, kin caregivers took this role of advocacy on themselves. This is perhaps one of the most important issues to understand from a clinical perspective. Workers may become frustrated with kin caregivers and their desire to voice the needs of the child; from the perspective of the kin caregiver, however, this is an inherent right and need—to ensure the safety and well-being of the child. It is this lack of understanding on both sides of the equation that seems to result in a breakdown in communication between workers and kin caregivers. Workers see kin caregivers as “arguing” with them, while kin caregivers view workers as not understanding the concerns that they hold with respect to the needs of the child.

Another important difference between kin caregivers and foster parents is the level of complexity that exists in kin family systems as compared to foster families. Kin relationships are different because of the attachment to the child, but also because of the attachment to the biological family. It is hard for grandparents, for example, to completely focus on the needs of the child without factoring in their love and bond to the parent, who may be their son or daughter. It is these complex relationships that resonated in the interviews with kin caregivers. Kin caregivers often felt caught in the middle between the needs of the child and the needs of the biological parent.

One of the most painful themes to emerge was the perception, rightly or wrongly, that workers view kin caregivers as “second-rate” options for children. Workers were cautious never to state this in their interviews for this study, but clearly the overwhelming perception of the kin grandparents was that they felt stigmatized and somehow blamed for their children’s failings as parents. Kin caregivers spoke of trying to help workers realize that they had moved forward and that their commitment to the child was second to none. The question remains as to whether kin workers who possess a specialization in working with kin families may help these families to move beyond the stigma and shame
because of the worker’s own clinical training and knowledge of the complex issues related to kin families. It should be noted that only one “kith” caregiver participated in the study and she did not express the same views as held by kin caregivers. Although only one person, this difference within the data set strengthens the argument that kin caregivers who are blood-related perceive, rightly or wrongly, that the system labels them as poor parents. This finding again relates to Peters’ study (2005), in which workers were found to hold underlying biases against kinship placements and held on to the view that “the fruit doesn’t fall far from the tree.” In a presentation for the PART program, Rob Geen (PART presentation, 2008) spoke at length to workers about this ideological belief that kin families are second-rate options and implored workers to consider that families can grow, develop and change over time. We cannot paint all kin caregivers with the same brush of “bad parents.” With the proper screening and assessment, many kin caregivers provide the best options and outcomes for children and youth (Winokur et al., 2009).

Kin caregivers felt that their financial remuneration was not at the same level as that of foster parents. Although kin caregivers are supposed to receive the same financial remuneration as foster parents, kin grandparents said that this is not the case. Children are placed in their care with little or no financial assistance. This researcher would ask if the children are in care and, yes, the kin caregivers would say the child has a legal status, but still the financial compensation does not exist. It became apparent that a comprehensive financial structure and compensation package does not exist for many of these families. Thinking outside of the box, it seems important to consider whether some of these families who are served by child welfare agencies because of required funding could be provided with financial support from other outside sources. The question is—does a child welfare agency have to provide financial support? Could other structures be put in place for kin caregivers to receive financial, emotional and social supports? These structures
could include venues such as community resource centres and other related social service agencies. Many grandparents asked this question during the course of this study.

Another theme that arose was that many kin caregivers knew the family situation was falling apart long before the child needed to come into care. Yet so many children were placed in foster homes on an emergency basis and then placed in kin families following the assessment process. Could the system not turn itself around and begin to pre-screen kin caregivers as potential placement options in the event that the family situation breaks down? Being prepared for placements ahead of time would go a long way towards ensuring that if and when children do arrive in a situation that requires their removal, the transition to a family home would be seamless and less traumatic for the children.

One of the interesting findings that emerged for this researcher was the realization that many foster parents are traumatized by witnessing children repeatedly move. The theme that resonated in many of the interviews was the sense of loss and grief that foster parents feel when a child is moved home or to another placement. Foster parents spoke of losing contact with children who in many cases had lived with them for years. Foster parents spoke of some situation as like “losing a child” and yet the system seems unwilling or unable to help them deal with the effects of this loss. There appears to be minimal research on this subject matter. In a dissertation completed by McLain (2009), the author posited that there is minimal research on the subject of compassion fatigue and post-traumatic stress on foster caregivers. This study found that despite high levels of personal burnout, foster parents still derive satisfaction from their commitment to caring for vulnerable children. The current study highlights the need for further research. It would be interesting to examine levels of compassion fatigue between kin caregivers and foster parents.

Foster parents also spoke of the need for peer support from other foster parents. This support and camaraderie is important because the role of the foster parent is so unique and is not well understood by others who have not taken on this role. Although the peer support of structures such as the Foster Parent Association were seen as important mechanisms for providing peer mentoring, there was also a recognition that sometimes
external professionals, such as a skilled social worker, are required to help foster parents work through the challenging dynamics related to caring for traumatized children. Many interviews with foster parents seemed to resonate with a sense that the Foster Parent Association can become a complaint session when, in fact, many wanted a positive environment to share stories and gain support. There appears to be minimal research on the subject of how peer support may mitigate stress and compassion fatigue for foster parents. In an invited commentary for the journal *Child Abuse and Neglect*, Jean Adnopoz (2007) provided suggestions for improving support to foster parents, which included peer support. This is the extent of the literature found on this subject. Given the findings from the current research, the impact of peer support on foster parents requires greater examination by child welfare researchers.

An issue that emerged in the findings section was the desire by some foster parents to provide joint peer support for kin and foster parents. From the perspectives that emerged from kin caregivers, one wonders if a joint peer support model would work. Instead, it would be interesting to see if agencies could provide separate and discrete peer support models for kin caregivers and conduct intervention research to determine if issues of self-esteem, competence and overall self-efficacy differ before and after the provision of the peer support model. In Marilyn McHugh’s webinar presentation for PART (March 2, 2010), she gave child welfare participants a link to a kinship support program developed by the Springwood Neighbourhood Centre in New South Wales, Australia (2008). This type of resource material is invaluable to the field.

**Substantive theory**

This constituent population truly resonates with elements of the theoretical model of the ecological framework and resilience and attachment theories, as explained below.

**Ecological framework**

The most striking and interesting observation is the analysis of two substantively different family systems: kinship and foster families. Although there are many inherent similarities, the overwhelming differences far outweigh these. Interviews with caregivers demonstrate a sense that the biological family is disconnected from the foster parent
family, whereas with the kin family, the related systems are more joined and cohesive. The biological family is more clearly attached to all systems, which can only benefit the child. This perspective was also held by the workers interviewed, and so this concept will be integrated into the overall conceptual framework.

**Attachment theory**

From the beginning of the interview process, it became clear that the pre-existing relationship and attachment that the child has to the kin family has a large impact on the child’s ability to settle and stabilize in the family home. In contrast, the foster family typically does not have a pre-existing relationship and, because of this, there is an underlying tension caused by the child entering a family home that is completely unknown—an abyss or, as Robbie Gilligan has stated, the “emotional tundra” (Robbie Gilligan, PART Learning Event, November 4, 2009).

In one interview, a foster mother indicated that when a child she had had from a previous placement was in need of a second placement, she was able to open her home to the child again. This type of placement matching does not always exist and many times children are moved to emergency receiving homes instead of to a foster placement with which they already have an attachment. Furthermore, kith and kin families do not always have a previous relationship with the child and so, in this circumstance, the issue of a pre-existing relationship does not always fit. What is clear is that when a pre-existing relationship does exist, there is room for support and stability for the child.

**Resilience theory**

Kin caregivers displayed resilience and courage in overcoming many challenges: poverty, divided loyalties, lack of social supports and dealing with the child welfare and legal systems. This is not to say that foster parents did not encounter such challenges, but kin caregivers’ stories resonated with overcoming adversity, of “hanging tough” and continuing to stay strong for the child. In one interview, an elderly kin couple’s story of financial hardship, health issues and challenging the child welfare and legal systems, but never giving up on caring for three young children, became the symbol for this researcher of overcoming adversity and remaining committed to the needs of the child. This
commitment and resilience has an enormous impact on the needs of children and their stability. Kin caregivers said that no matter how hard things got, they would never give up on the child. The question is, can the same be said for foster parents? The answer is no. This perspective was also held by the workers interviewed, and so this concept will be integrated into the overall theoretical framework.

**Youth analysis**

**Overview of findings**

Table 6.3 summarizes the findings from interviews with nine youth.

**Table 6.3. Overview of findings from the nine youth.**

<table>
<thead>
<tr>
<th>Theme</th>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Why am I in care?</td>
<td>A lot of youth talked about not always understanding why they were in care or why they had to move from one placement to another.</td>
</tr>
<tr>
<td>Culturally relevant placements</td>
<td>Two youth expressed a desire to live in placements with other black youth like themselves. They felt it would be easier to fit in.</td>
</tr>
<tr>
<td>Feelings (fear of loss, anger at the system, divided loyalties)</td>
<td>All youth talked a lot about feelings—feelings about CAS and about losing parents.</td>
</tr>
<tr>
<td>Theme</td>
<td>Findings</td>
</tr>
<tr>
<td>--------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>What does kinship represent to youth?</td>
<td>Youth who lived in kinship homes spoke of how they felt about living in a kinship home. They felt that living with family was good because they were living with someone they know.</td>
</tr>
<tr>
<td>Permanency within foster placements</td>
<td>Youth who lived with foster families felt better when they could stay there longer and the house started to feel like a home.</td>
</tr>
<tr>
<td>Relationships (with workers, caregivers, siblings)</td>
<td>Relationships with others were very important to all youth who participated. Many of the youth talked about their relationship with their social worker and how important this relationship is to them. Some youth felt that their relationship with their worker was not good and they were unsure how to fix this problem. Many youth spoke of how their relationship with their foster parent or kin caregiver was very important, but just as important were relationships with brothers and sisters (biological and foster siblings).</td>
</tr>
<tr>
<td>Resilience (overcoming the odds)</td>
<td>Some youth talked about overcoming many challenges in life to move ahead and do things such as finish school and move on to college or university.</td>
</tr>
<tr>
<td>Theme</td>
<td>Findings</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Traumatic experiences</td>
<td>Some youth spoke of sad things that happened to them before coming into care, and some shared difficult experiences while being in care.</td>
</tr>
<tr>
<td>Placement instability</td>
<td>A lot of youth talked about moving from foster home to foster home. Some youth who ended up in a kinship home spoke of being in foster care for a long time before finally arriving at, say, grandma’s house.</td>
</tr>
</tbody>
</table>

**Youth discussion and analysis**

The section with the youth contained the fewest amount of themes because the data set was so small, but also because many of the youth simply were not that talkative. It seemed hard for youth to open up to a complete stranger and then, once again, have that person leave their life. In so many ways, the interviews with these youth could have been enriched if the interviews had taken place over time, allowing the researcher to build a trusting relationship with these young people. This was not the case but, in future, this is an issue that is worth great consideration when interviewing young people.

There is minimal research in the literature that explores the qualitative perspectives of children and youth residing in child welfare placements. Chapman, Barth and Wall (2004) employed a quantitative design to elicit information about the differences between kinship and foster placements. Broad, Hayes and Rushforth (2004) interviewed 50 youth residing in kinship homes to ask about their perceptions related to their experiences of kinship placements. This is the single qualitative study exploring youth perceptions of kinship placements that could be located. Therefore, the minimal research, particularly
qualitative in nature, suggests that more research with youth residing in child welfare placements is required.

In many ways, young people are not used to engaging in one-on-one interviews and instead are more likely to open up using social media such as Facebook, Twitter or texting. The reality is that technology is the means by which youth share their stories, and so to be speaking with a stranger in person was probably a foreign concept to many of these young people.

The following are the themes and issues that emerged during the interviews with the nine youth.

**Kinship versus foster care**

Because the youth data set for this study was so small, the inherent themes related to kinship and foster care were subtle and could not really be seen as delineating a clear desire for one type of placement over another. It can be said, though, that youth who lived with kith and kin families felt a sense of comfort on entering a situation that was known to them. One youth, currently in foster care, expressed a desire for his worker to see if his grandparents could take him. He seemed unclear why placement with extended family had never been considered.

**It has to feel like home**

All of the young people, whether in kin or foster care, expressed the desire to have a home that felt “like home.” Youth who were living or had lived with kin expressed how living with family seemed like being “home” because they had a pre-existing relationship with the caregivers. Youth who had lived with foster parents over a lengthy period of time also spoke of how they became settled and the home they had lived in for so long began to feel permanent. The passage of time allowed them to feel stable and forge deeper relationships with members of the foster family, including the biological children of the foster parents. Many youth spoke of how these foster siblings became very much like their own blood-related siblings. These enduring relationships, whether formed through kinship or foster care, provided a sense of stability.
Relationships are key

Relationships with workers, caregivers, siblings, biological family and peers were a constant theme and issue for many youth. Perhaps the most striking thread throughout the interviews was the importance of the relationship with the assigned social worker. When this relationship was good, this provided comfort to the youth; when it was negative or disconnected, the youth appeared alienated not only from the worker, but also from the child welfare agency as a whole. The worker was seen by all youth as a voice, an advocate for change, and without that voice some youth seemed lost in the shuffle. One youth was deeply angry towards her worker for “never calling me back” and “never listening to me.” Following the interview, this youth called the researcher on two separate occasions wanting to talk. It is possible that this youth was trying to find someone who would listen and advocate for her; something she felt was lacking in her relationship with her own worker.

Feelings run deep

The powerful emotions of pain, loss, sadness, tragedy and in many cases triumph over adversity and challenges resonated throughout all the interviews. Youth, more than the other two groups, spoke from their hearts and expressed many emotions and feelings. There were times when the researcher felt as though many of these youth are simply never asked how they feel about things. Is this a reflection of the administrative demands on workers to ask questions related to safety and Looking After Children (LAC)? There seemed to be a need for youth just to talk, reflect and ponder their circumstances and for the feelings and emotions they possess to be affirmed.

Moving is painful and lonely

Perhaps most moving in all of the interviews was the sense from youth of their loneliness when being moved and first placed in care. One youth spoke of moving into a new foster home, only to learn that her foster mother was leaving her that night to attend a party. Another youth spoke eloquently of the loneliness of moving to a new foster home and not knowing anyone. When asked what workers should know about living in care, he responded, “Understanding how lonely it is when you move to a new home.” These comments had a powerful impact on this researcher. The loneliness and sadness of these
young people was palpable and painful to hear. Beyond these feelings was a true desire from these youth to educate workers and caregivers about their experiences of transition into care.

**Sharing their stories**

The most hidden but important theme that resonated in the interviews was the desire of youth to share their stories. One young person spoke of a letter that was on her file that she wrote expressing her experience of being in care. She was desperate for the researcher to read the letter and yet, despite calls to the worker and a signed youth consent form from the youth, the worker never responded. It was this lack of responsiveness that made the researcher realize how hard it is for youth to be heard. Being a part of this study presented a rare opportunity for youth to share their experiences and hopefully make small changes to the experience of youth in care in general.

**Substantive theory: youth**

The most important finding throughout the interviews with youth in kinship and foster care was the importance of positive and enduring relationships with the people in their lives, including workers. In fact, the impact that workers have on youths’ lives was a critical influence on whether the youths held an optimistic and hopeful belief about their situation and overall lot in life. Workers were viewed by many youth as the most influential people in their lives, and when this relationship was not stable or positive, youths seemed angry and resentful. The powerful influence that workers have in a child or young person’s life is critically important.

**Substantive theory**

The goal of a grounded theory study is to produce a theory that has built “from the ground up” through analysis of the data and thematic analysis (Glaser & Strauss, 2007). The substantive theory that has arisen from this study, as the dissertation title “Fitting a Square Peg into a Round Hole” suggests, is that kin placements need to be understood and constructed from a different perspective and paradigm than foster placements. This triangulation of the data has resulted in a greater understanding of how it is that that kinship care has resulted in the child welfare system forcing this unique form of
placement within the context of the traditional foster care model. The section below
explores the current and realigned systems of kinship and foster care placements.

**Conceptual model**

Figure 6.1 demonstrates the current system of care, which situates kinship on top of the
current foster care paradigm.

Figure 6.1. “Fitting a square peg into a round hole.” Kinship care is situated outside of
the foster care paradigm.
Table 6.4 explores the elements of this “square peg in the round hole” theme, while Figure 6.2 and Table 6.5 realign these elements.

**Table 6.4.** Elements of the “square peg in a round hole” theme.

<table>
<thead>
<tr>
<th>Elements of “fitting a square peg into a round hole”</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training is the same for kin and foster caregivers.</td>
<td>The system offers PRIDE training to both kin caregivers and foster parents.</td>
</tr>
<tr>
<td>The home study process is the same for kin and foster caregivers.</td>
<td>The SAFE tool is used for both kinship and foster parents.</td>
</tr>
<tr>
<td>There is a lack of recognition of pre-existing relationships between kin caregivers and children.</td>
<td>Workers and supervisors may understand the clinical aspect of the pre-existing relationship between the kin caregiver and the child, but the overall structure of the system views kin in the same category as foster placements (i.e., stranger placements). For this reason, the clinical and structural elements of kin placements are not well understood within the context of the overall foster care system.</td>
</tr>
<tr>
<td>Elements of “fitting a square peg into a round hole”</td>
<td>Description</td>
</tr>
<tr>
<td>--------------------------------------------------</td>
<td>-------------</td>
</tr>
<tr>
<td>Kin caregivers can sometimes be “caught in the middle.”</td>
<td>The study reveals the challenges for kin negotiating the needs of the family and the child. These challenges and complications are not well understood or supported by the system. Peer support groups for kin caregivers do not appear to be a routine structure within the context of child welfare organizations, whereas Foster Parent Associations are a structural component of the child welfare system.</td>
</tr>
<tr>
<td>Organizational differences and attitudes exist towards kin families (stigma).</td>
<td>Several organizations do not have kin-specific programs. The study reveals that without organizational specialization of kinship placements, workers may display attitudes towards families such as the “fruit doesn’t fall far from the tree.”</td>
</tr>
<tr>
<td>Policies and procedures are not always kinship specific.</td>
<td>An example of this occurred when a grandmother showed the researcher a copy of a foster care contract that she was being asked to sign as a kin caregiver. This demonstrates how the system has failed to understand and implement structures that are aligned with the unique needs of kin families.</td>
</tr>
<tr>
<td>Elements of “fitting a square peg into a round hole”</td>
<td>Description</td>
</tr>
<tr>
<td>--------------------------------------------------</td>
<td>-------------</td>
</tr>
<tr>
<td>Financial and social supports for kin families are unclear.</td>
<td>Several kin caregivers who had the child placed in their care under a court order reported receiving limited financial support from the supervising child welfare agency. If they did receive support, the funds did not include clothing allowances or funds for recreational programs.</td>
</tr>
</tbody>
</table>

**Figure 6.2.** “Removing the square peg.” Linking kinship to foster care.
Table 6.5. Elements of “removing the square peg.”

<table>
<thead>
<tr>
<th>“Removing the square peg”: linking kinship to foster care elements</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Make PRIDE training more kinship specific.</td>
<td>The training model should explore the clinical dynamics that exist for kin caregivers, such as being “caught in the middle.”</td>
</tr>
<tr>
<td>Research and evaluate the SAFE screening tool and its applicability in relation to kinship placements.</td>
<td>The system requires a more in-depth analysis of whether the SAFE screening tool works effectively in terms of screening kin placements.</td>
</tr>
<tr>
<td>Provide workers with kinship-specific training that addresses clinical dynamics such as the kinship pre-existing relationship, “caught in the middle” and recognizing there are times when kin caregivers are stigmatized.</td>
<td>Workers in both specialized kinship teams and non-kinship teams require clinically focused training in relation to working with kin families.</td>
</tr>
<tr>
<td>Link organizational policies and procedures for kin families (e.g., kin contracts).</td>
<td>A review of organizational structures and policies related to kinship placements is required.</td>
</tr>
</tbody>
</table>
“Removing the square peg”: linking kinship to foster care elements

<table>
<thead>
<tr>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide financial and social supports.</td>
</tr>
<tr>
<td>This was the most confusing area for kin caregivers to navigate. Having a booklet or outline of the financial and social services available to kin families would go a long way towards providing these placements with their own unique services and an understanding of what resources are afforded to them.</td>
</tr>
<tr>
<td>Kin caregiver and kin youth support groups can provide a peer mentoring and support element that is unique to these placement types.</td>
</tr>
</tbody>
</table>

Converging analysis

This is the point at which the analysis, research findings and tacit wisdom converge to create an overarching understanding of what these voluminous data mean. During the course of working on this study, this researcher has observed enormous interest in the field related to this research. There is an overwhelming desire to understand what this research means. In presentations in Cornwall and Ottawa, workers, supervisors and senior managers were lined up to hear the findings from the study. This study, along with other research in the province (Goodman, 2009), is one of the first real attempts to analyze the current kinship and foster care structure since the inception of the kinship program in 2006. Therefore, the dissemination of this study is critical for the field.

The real essence of this study is the understanding that kinship care is a unique model of practice that is separate and apart from the foster care system. This finding is in keeping
with the Campbell Review completed by Winokur et al. (2009), which suggested that there are unique outcomes for kinship versus foster care placements. This dissertation reiterates the analysis of the Campbell review, noting distinct differences between the two placements types. Although not purporting that one placement type is better than the other, this dissertation strongly supports the notion that kinship placements require a different lens and intervention to foster care homes. A striking example of this occurred when a kin grandparent pulled out a foster care agreement that was written in language consistent with the caregiver being a foster parent, not a kin provider. The grandmother rightly pointed out that the system does not even have appropriate documents or forms that link to the specific needs of kin or kith caregivers. It is no wonder that this grandmother related stories of feeling like a “square peg in a round hole” in her work with her assigned child welfare organization.

In consulting with provincial colleagues following the presentations in Ottawa and Cornwall, practitioners asked about two important research questions that did not emerge as distinct themes in the findings and subsequent analysis. First, the question of the heterogeneity of kin caregivers, as described by Zinn (2009). Practitioners asked the question—do aunts, kith caregivers and older siblings have a different experience as kin caregivers to that of grandparents? This study recruited a preponderance of grandparents and so much of the analysis applies to the intergenerational perspective of grandparents caring for grandchildren. With a different constituent group, would the findings from this study resonate with different themes and ideas? The second issue that emerged in consultation with the field was the notion of respite for kin families. This is an issue that did not emerge as a dominant theme in the study, but it is one that requires further analysis. How do kin caregivers manage to gain relief when caring for children? Again, this is an issue that did not emerge as a theme and yet practitioners were eager to understand this issue.

Testa (2008) made a very important commentary on permanency within kinship homes as compared to foster placements. The child welfare system of today views adoption as the “gold star” of permanency outcomes. As Testa rightly points out, however, legal guardianship is an important outcome for children placed in kinship placements. Asking a
grandmother to adopt her granddaughter can be seen as disloyal and hurtful to her adult child. In this respect, as in others, the system has to understand that permanency outcomes for kin families are quintessentially different. Legal guardianship is the future for kin families in the province of Ontario. The province should strongly consider providing subsidized legal guardianship programs such as the Kinship Support Services in California (Shlonsky et al., 2004).

**Unique findings**

This study uncovered a series of core findings that do not appear anywhere in the current body of research on kinship and foster placements. Table 6.6 explores these unique findings.

<table>
<thead>
<tr>
<th>Unique findings</th>
<th>Commentary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Screening kin families</td>
<td>Workers find it challenging to screen kin families out when these individuals are deemed unfit to care for the child despite the pre-existing relationship or connection to the child.</td>
</tr>
<tr>
<td>out</td>
<td>Workers view kin caregivers as more able than foster parents to negotiate access with biological parents.</td>
</tr>
<tr>
<td>Access</td>
<td>Workers believe that kinship placements where there is no pre-existing relationship with the child are more apt to fail. They feel that knowledge of the child and a previous connection with him or her is a predictor of a more successful placement for the child.</td>
</tr>
<tr>
<td>Caught in the middle</td>
<td>Kin caregivers reported a sense of being caught in the middle between the system and the biological family.</td>
</tr>
</tbody>
</table>
Unique findings | Commentary
---|---
Grief and loss for foster parents | Foster parents reported a great deal of loss and grief after a child or youth leaves after being with them for an extended period of time. This sense of grief often goes unrecognized by child welfare workers.

Youth want their stories to be heard and shared | The most unique issue that emerged in interviews with youth was the desire to be heard—for someone to hear their story, extending beyond the traditional administrative requirements of seven- and 30-day visits. Youth want someone to understand their story and how moves and changes in placement can have an extraordinary impact on them.

The current state of knowledge on this topic is dominated by quantitative research with minimal longitudinal or retrospective study designs (Winokur et al., 2009). The current doctoral dissertation contributes in a unique way to the research by including the voices and perspectives of three constituent groups. The new and emergent findings link directly back to good clinical practice. These ideas resonate with this researcher and, in her role as an educator and disseminator of research findings for child welfare practitioners, she hopes to distribute these findings in a way that can alter the current state of practice for foster and kinship placements. It can also be said that this study has become the basis for this researcher’s program of research. Within all of these findings, there is a substantive body of research that continues to be required for the field. This researcher has only just begun her journey.

From an epistemological standpoint, this study explores the social construction of kin and foster placements. In essence, this researcher now asks the question—why? Why are placements constructed in this way? Why are kinship placements layered on top of the existing foster care model? This researcher, building upon her extensive clinical
experience in child welfare, knowledge of the system and emerging research skills, will attempt to tap into the core elements of child welfare placements to ask the fundamental question that requires analysis: why do we treat kinship placements in exactly the same way and manner as foster placements?

The title “Fitting a Square Peg in a Round Hole” relates the essence of this study and its subsequent findings. Out of a necessity to create more placements, the child welfare system has created a set of placements with extended family and community members that does not link to the current foster care model of practice. It is this core finding that must be discussed and challenged within the child welfare system by engaging key stakeholders, such as kin caregivers, in discussions related to practice, policy and research generation and dissemination. The social construction of kinship placements within the current child welfare system is the quintessential issue to be explored by practitioners, policy-makers and researchers within the child welfare community in Ontario.

**Ethical considerations**

The ethical considerations of this study provided the researcher with superb learning opportunities in terms of engaging vulnerable groups into a research study. This section explores the issues and challenges related to each sub-group.

**Workers**

It was important to adhere to the ethical considerations for workers, but overall there were no challenges or difficulties with following the protocol of the Research Ethics Board (REB) in relation to interviews with CAS staff members. All participants willingly signed the consent form and understood the need for this level of scrutiny. The consent form was very detailed and, in some respects, the forms and letters created for this study mirrored the intense administrative burden on child welfare staff members. CAS workers operate within the realm of constant scrutiny and, for this reason, it may be that kin and non-kin workers never once complained at having to review a lengthy cover letter and consent form. The only mild protests came when workers were asked for their date of birth, but nothing else was challenged.
**Caregivers**

The ethical considerations for this constituent population were evident throughout the interviews. The researcher always felt embarrassed when she had to read through the pages and pages of content in the consent form. In one instance a kin caregiver made sense when she retorted, “You sound like a CAS worker with that big long form you have there.” The consent form was too long and too administrative and many times off-putting right at the beginning of the interview process. Several foster parents would review, fill out and sign the consent form upon arrival for the interview, but this was not the case for kin caregivers. In two circumstances, kin caregivers were illiterate and the researcher had to read the consent form to the participant. Although cumbersome, all participants were made aware of their rights with respect to participation in the study.

**Youth**

Without a doubt, from beginning to end the ethical considerations for this group were far-reaching. The REB was stringent in its demands to ensure that all youth felt comfortable and protected during the course of the study. In a desire to protect youth from any wrongdoing, the consent form actually dampened this researcher’s ability to engage youth in a discussion. With each youth, by the time this researcher had reviewed the consent form and done the “mini-quiz” to test if the youth actually understood what he or she was signing up for, the youth’s attention span was waning. One youth in particular appeared to have difficulty with maintaining her attention and by the time the consent form was complete she was asking to leave the interview. The consent forms (overarching form and youth notification form) along with the quiz and review of the questions created many challenges for engagement during the interview process. Although these requirements were deemed necessary by the REB, there has to be a better and different way of engaging these vulnerable youth. It took the researcher several months to construct all three consent forms for the participants interviewed, but, without a doubt, it was the perceived risk of engaging vulnerable youth that caused the greatest consternation. How could this process have unfolded differently? The following ideas provide a framework for engaging vulnerable children and youth in studies:
• Ask three or four youth to critique the draft consent forms and ask them if the language makes sense.

• Present this researcher’s experiences with using an overly detailed and administrative consent form that disengages rather than engages youth to the REB.

**Epistemological considerations and reflections**

This section links the researcher’s epistemological stance and framework with the analysis of each sub-group.

**Worker analysis**

Social construction examines how ideas and principles are socially constructed. Here, the epistemological stance of social construction is considered in this analysis of the worker findings based on the emerging evidence. This evidence suggests that: (1) kin families should be viewed outside of the traditional foster care paradigm; and (2) pre-screening kinship placements is essential preventative work to ensure that children and youth can transition to kinship placements without enduring the placement instability of first moving to stranger care and then on to a kin or kith placement. The workers’ perspectives highlight how the system has been constructed around the traditional foster care paradigm, without considering the possibility of including kin families in placements and ongoing relationship-building with the child.

**Caregiver analysis**

From an epistemological perspective, the social construction of foster care versus kin placements is at the core of this study’s analysis. The evolution of kinship care has been overshadowed by the foster care model of practice that situates “stranger care” as being the predominant and at times more favourable form of placement for children and youth. This study uncovers some of the individual and organizational complexities that continue to feed into the construction of kin placements as an adjunct to current foster placements.
Youth analysis

The story of Richard Cardinal and his moves to over 20 placements during the course of his short life continues to resonate in this section. It is now some 26 years later, and youth in care continue to voice sadness over their many moves, lack of connection to family and siblings and minimal opportunities to share their personal stories and journeys. The state of the Canadian child welfare has not evolved to take into consideration the plight of young people in care, whether in kinship or foster placements. The system continues to create situations that are untenable for children and youth. The willingness of the youth to participate in this research highlights their desire to make changes to the system and improve the lives of others who require placements outside of the parental home. This researcher has placed countless children in care. Looking back, she wonders if she has contributed to instability and challenges for children and youth. She undoubtedly did. For this reason, she sees this research as an opportunity to view the “big picture” and examine the elements within the system that continue to present barriers to children and youth in care. The barriers that continue to exist are placement instability, lack of connection to significant others and lack of a forum in which youth can articulate their ideas, potentially resulting in systemic change. Child welfare research has continued to dismiss the voices of children and young people in research. If we are to make any substantive improvements, we must listen and understand their ideas, challenges and opportunities. Their stories remain too vital to dismiss.

Conclusion

This discussion chapter has pulled together all of the ideas, challenges and insights into a thoughtful conclusion. The analysis of the three data sets converges to a very simple but poignant conclusion, which is the realization that the child welfare system cannot place kin families into the same category and systems as foster care placements. Kin families are unique placements situations for children and youth. Given this analysis, the system requires a greater understanding of how these types of placements need a separate—and unique—practice and policy framework.
Chapter 7
Conclusion

Introduction

This chapter provides an overarching analysis of the entire study and reviews the limitations of the research, future research questions and practice and policy implications. It concludes with reflections on the evolution of this study on both personal and professional levels.

Limitations of the study

Several limitations of this study require further reflection and analysis.

Youth Participant Group

Youth participation in this study was minimal. Although many different methods of recruiting youth to the study were used, there are likely many reasons why it is difficult to have young people participate. These include issues of trust, initiating the first call with the researcher and not understanding the importance of such research. It is, however, these young people who make the research in general resonate with the richness and depth required to change policy and practice. With hindsight, different ways of soliciting youth in the study could have been tried, including posting the recruitment flyer on Facebook and Twitter. In today’s society, youth may be more prepared to open up about issues using social networking sites. Ethical considerations may prove an obvious barrier to recruiting youth participants using social networking sites, but this is the “way of the world” and so one must try.

The different voices of kin caregivers

The second most challenging group to engage was the kin caregiver group. The vast majority of kin caregivers recruited came through the National Grandparents Support Group network. Although their voices are important, this group does have its own agenda in terms of pushing the issue of financial remuneration forward. Kin caregivers from child welfare agencies did not participate and so this leads to the question of whether
their ideas and perspectives may be different. Would they have had something unique to say about their experiences with their child welfare agency? The National Grandparents Support Group provided important insights about their experiences with child welfare agencies, but the sentiment was generally negative and this coloured the results of the research. The issue of selection bias in relation to the kin grandparents is a real concern that has emerged from this study. This researcher made several attempts to recruit kin caregivers from child welfare agencies to no avail. There is no doubt that the grandparents who participated in this study chose to do so in order to have their perspectives, albeit negative at times, heard.

Other perspectives that could have added to the richness of the analysis include: kin grandparents from within child welfare organizations, aunts and uncles, and even older siblings caring for children and youth. Future research should explore more of the heterogeneity of the kin population, as described by Zinn in his 2009 study on divergent kin populations. Given recruitment issues and the small size of the constituent groups, the feedback from the kin grandparents may have biased the results towards more negativity, which is important in interpreting the results and its implications.

The recruitment of kin caregivers is a complicated process and if this researcher could repeat her study again, she would spend more time with kin supervisors and workers explaining the importance of the study and asking for their advice on how to engage kin caregivers in the study and recruit divergent kin groups. This method of engaging child welfare professionals in the study design may have yielded better results.
The aboriginal perspective

One aboriginal couple participated in the study. Although this couple shared invaluable insights into the plight and perspectives of aboriginal people and their intersection with the child welfare system, the data set was too small to really comment and extend the knowledge and findings further. Future research with aboriginal communities that explores customary and kinship care is required.

Limited geographical representation

This research was conducted at several sites throughout the province of Ontario, but the northern perspective is missing from this research. One grandmother from Thunder Bay did offer to participate in the research, but limited financial resources prevented the researcher from flying there to interview her. A colleague suggested after the fact that perhaps the interview could have been carried out via the telephone or using Skype. This is an excellent idea, but this study methodology was focused on the personal interview. If the researcher carries out national research in the future then other forms of technology will be utilized. It is challenging to carry through a provincial study at the best of times, but even more difficult to do so as a dissertation study because there were no additional staffing or financial resources available. Future research must engage perspectives from all points of the province to truly ensure that all voices are engaged in the discussion.

Insider role

The researcher had conducted a previous study with her mentor and colleague, Professor Marion Bogo, on the subject of clinical supervision in child welfare. One of the insights that Professor Bogo provided was the perspective that the researcher would not ask probing questions because of her “insider role” and knowledge of child welfare practice as a worker, supervisor and trainer. In the current study, the researcher tried as best she could to position herself as more of an outsider and neutral researcher. Despite her best efforts, it is likely that there were times when her intimate knowledge of the system prevented her from asking more probing questions. The thesis committee and thesis advisor provided insights into the researcher’s “blind spots” and areas that required more critical reflection.
Piloting interview questions

The questions used in this study were piloted with two youth, but not with the other constituent groups. This meant that the questions were constructed from the researcher’s perspective. If participants were involved in helping to construct the questions, the study may have resulted in different themes and ideas.

Practice, policy and future research implications

This section examines the practice, policy and research implications for this study. There is much to consider under each of the three areas. Given this, the ideas have been summarized in a table format.

Kinship and foster care practice implications

On March 9, 2010, the researcher presented her findings to the field. A total of 195 participants from across Ontario, Canada and the USA attended this presentation. The presentation led to an interesting online discussion with participants about many practice issues. This online conversation led the researcher to reflect on the isolation of practitioners, who have limited discussion forums to learn from each other about clinical approaches to working with kin and foster families. The field requires a forum for sharing ideas and information. Advisory committees do exist, but workers on the front-line require access to forums for sharing different methods of engaging with families.

Kinship and foster care practice recommendations are shown in Table 7.1.
### Table 7.1. Kinship and foster care practice recommendations.

<table>
<thead>
<tr>
<th>Practice Recommendations</th>
<th>Outline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide peer support for foster parents.</td>
<td>Foster parents require a structured process for debriefing about the trauma and grief of being separated from children who have been placed with them and then moved. Structured peer support, such as the Foster Parent Association, can provide a venue for sharing and receiving support. However, these groups should be monitored and supervised by outside professionals who can guide the conversation in a way that is meaningful for all participants.</td>
</tr>
<tr>
<td>Provide training for workers on how to understand the complex grief process for foster families when a child is moved to a new placement.</td>
<td>Training and education for workers on this issue is critical. To date, there seems to be minimal curriculum or writings on this issue.</td>
</tr>
<tr>
<td>Create a clinical framework for foster parents to engage with biological parents via access visits and regular contact. The framework could be called “breaking down barriers—engaging foster parents in building relationships with biological parents.”</td>
<td>It would seem that the PRIDE training has helped to assist foster parents in understanding the need to engage biological parents in the planning process. Worker education about the need to continue this process is required.</td>
</tr>
<tr>
<td>Practice Recommendations</td>
<td>Outline</td>
</tr>
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<td>------------------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>• Educate workers on the clinical importance of administrative requirements such as seven-day visits.</td>
<td>Workers speak the administrative language of ministry requirements (e.g., “seven-day visits”), but underlying this, workers need to be educated about the underlying clinical importance that are the purpose behind such as administrative and ministry requires.</td>
</tr>
<tr>
<td>• Educate workers as to the appropriate use of language such as “seven-day visit” with a child. Children do not understand what the term ‘seven-day visit’ means.</td>
<td></td>
</tr>
<tr>
<td>Children and youth require a voice—a space and place to talk about their experience in care that extends beyond the “looking after children” tool</td>
<td>Youth expressed the desire to be heard. Supervisors and training models need to educate workers on providing children and youth the opportunity share their experiences. Children and youth require support groups to explore their experiences of placement with each other. The study revealed that kin youth in particular wish to have a support group to share their experiences of living with extended family members.</td>
</tr>
<tr>
<td>Conduct specialized training for workers to understand the complex needs of kinship placements</td>
<td>This researcher is working with the Kinship Advisory Committee on creating learning opportunities for workers to engage on a clinical level with kin families.</td>
</tr>
</tbody>
</table>
**Practice Recommendations** | **Outline**
--- | ---
Disseminate research to allow workers to make good practice decisions. | Workers need to know what the evidence says in relation to kinship and foster care. With programs such as PART (www.partontario.org) providing a mechanism for disseminating research findings, child welfare practitioners can begin to make better evidence-informed decisions.

Educate workers as to different perspectives among kin caregivers and foster parents. | Kin see themselves as advocates for the child, whereas foster parents see workers playing the advocate role. Child welfare professionals need to recognize these varying perspectives. This can assist workers in becoming more understanding and empathic to kin caregivers when issues arise.

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**Kinship and foster care policy implications**

Perhaps the most striking example of required policy shifts with kin families occurred when a grandmother showed the researcher a copy of a foster care agreement that she was being asked to sign by her supervising child welfare agency. She made the point in the interview that she is a *grandmother* and not a *foster parent*. The agreement was constructed in such a way that dismissed her role as a kin caregiver and viewed her as a foster parent. This example strikes at the heart of the findings—“fitting a square peg into a round hole.” The policy framework for kin caregivers being serviced by child welfare organizations does not recognize the unique needs of kin caregivers.

Kinship and foster care policy recommendations are shown in Table 7.2.
Table 7.2. Kinship and foster care policy recommendations.

<table>
<thead>
<tr>
<th>Policy recommendation</th>
<th>Outline</th>
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<tbody>
<tr>
<td>Create policies related to creating and sustaining culturally relevant placements.</td>
<td>Many organizations have some policies in place, but it is clear from the findings that there is still a requirement to focus on creating and sustaining culturally relevant child welfare placements.</td>
</tr>
<tr>
<td>Give kin caregivers the option of legal guardianship instead of adoption.</td>
<td>Testa (2008) supports the notion of moving towards legal guardianship for kin families. Adopting a family member’s child is complicated for kin families, whereas legal guardianship is a process that is more in line with the complex underlying relationships that exist between kin and child’s parent(s) or guardian(s).</td>
</tr>
<tr>
<td>Pre-screen kin families.</td>
<td>Agencies should set in motion structures that promote assessing kinship placements before the situation with the child’s parent(s) breaks down.</td>
</tr>
<tr>
<td>Promote kin caregiver representation on kin advisory committees.</td>
<td>Involving kin caregivers in the development of policy frameworks will ensure that they have a voice in emerging policy decisions.</td>
</tr>
</tbody>
</table>

In the researcher’s presentation of her findings held on March 9, 2010, an audience participant asked an important question: “If you were in front of the Ministry, what top
three recommendations would you put forward for change to the current system regarding kinship care?” This question gave rise to an interesting analysis related to the important policy priorities that have emerged from this study. The researcher’s response is as follows:

1. We need to provide greater financial and social supports to kin families.

2. We need to pre-screen kinship placements so that children and youth do not have to move to foster placements first and then on to kin families following the screening process.

3. Organizations need to reconsider their direction in moving away from specialized kinship services teams. The findings from this study suggest that workers who understand the complexities of kin families are more apt to support and advocate for the needs of these families. If we do not support these families, placement breakdowns are likely to occur. In this era of cost containment, agencies are moving towards the reduction of specialized kinship programs. The Ministry should reconsider its funding and support of such initiatives.

In this researcher’s role as the Executive Director of Practice and Research Together, she has been a strong advocate of workers, supervisors and senior managers making evidence-informed decisions (Dill & Shera, 2010). The current study should help to inform future policy directions related to kinship placements, but also to foster placements.

**Future research questions**

Table 7.3 gives an overview of future research topics that have evolved out of this study.
Table 7.3. Future research topics.

<table>
<thead>
<tr>
<th>Topic</th>
<th>Potential study design</th>
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<tr>
<td>National comparative analysis of kinship programs.</td>
<td>Several kin caregivers from across Canada and the USA asked to participate in this study. This demonstrates an interest on the national and continental levels for research on kinship care and practice. A cross-Canada comparative analysis is required to understand policy and practice implications from different geographical sites.</td>
</tr>
<tr>
<td>Aboriginal research.</td>
<td>One interview with an aboriginal couple provided insight into the need to understand the aboriginal perspective related to kinship and customary care. A future study could include focus groups or key informant interviews with community elders and band representatives.</td>
</tr>
<tr>
<td>Comparative analysis of kin and kith placements.</td>
<td>Building on this study design, workers, youth and caregivers from kin and kith placements could be engaged to understand the essential differences between the two groups.</td>
</tr>
<tr>
<td>Comparative analysis of kinship services and kinship care.</td>
<td>Again building on the study design of this research, a provincial comparative analysis of kinship services and kinship care placements could be performed.</td>
</tr>
<tr>
<td>Analysis of the heterogeneity of kin and kith placements.</td>
<td>A multitude of kin caregivers exist, ranging from grandparents to aunts, uncles, siblings and cousins. Future research can examine the heterogeneity of this population.</td>
</tr>
<tr>
<td>Topic</td>
<td>Potential study design</td>
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</tr>
<tr>
<td>Impact of separation and loss on foster families.</td>
<td>A qualitative study that examines the impact of separation from and loss of foster children on foster families would be a unique study and have the potential to yield important policy and practice implications for child welfare.</td>
</tr>
<tr>
<td>Role of the Foster Parent Association on peer support for foster parents.</td>
<td>Peer support for foster parents is an important topic and a theme that emerged several times during interviews with foster parents. Peer support, such as the role and impact of the Foster Parent Association and cluster groups, are important issues to pursue in future research.</td>
</tr>
<tr>
<td>Intervention study for kin youth—peer support network.</td>
<td>Kin youth seemed to want a place to belong and engage with their peers living with family or community members. Future research could initiate kin youth support networks and examine the impact of such an intervention on the overall well-being of youth. This idea is specific to kin youth.</td>
</tr>
<tr>
<td>Specialized kinship screening tool.</td>
<td>A standardized screening instrument for kinship in-care and service families could be developed and then piloted with a small number of agencies.</td>
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</table>

Throughout this study, the researcher has been captivated with the emerging research that has been generated from this qualitative study. In the interview with the aboriginal couple, both caregivers implored the researcher to consider doing more research on customary care within the aboriginal community. This is an important research topic, but what was more important was the underlying theme in the interview of the need for study
participants to give voice for future research. As the researcher moves forward, she plans to engage potential study participants in the construction of research questions, study methodology and mechanisms for disseminating study findings.

**Dissemination of findings**

It is not enough to simply do a study. Rather, a study should inform the field and encourage best practice, policy development and innovative future research. A dissemination plan for this study is as follows:

1. The researcher has already begun to disseminate the findings to the child welfare community in her presentation held on March 9, 2010.

2. Sections of the findings will be disseminated via the Ontario Association of Children’s Aid Society journal so that all 53 member agencies have access to the material.

3. Findings will be summarized in PARTicles (literature reviews) via the PART website.

4. The researcher will present the study findings to the National Grandparents Support Group Grandparents Advocacy Group on July 23, 2010.

5. The researcher will present the findings to the Kinship Advisory Committee on April 30, 2010.

6. The researcher will write a series of publications from this study for submission to peer-reviewed journals.

Following the presentation to the child welfare community on March 9, a participant suggested that PART might consider developing its own online journal that publishes child-welfare-related research findings. This researcher’s presentation has set in motion some ideas of how to engage the child welfare community in submitting and receiving regular updates of child-welfare-related research. This is an idea that is worth considering and will be taken to the PART board on March 23, 2010, for further review.
Study’s relevance for the advancement of child welfare knowledge

This study’s relevance to the advancement of child welfare knowledge is important from a number of perspectives. The study provides an important framework for emerging Ontario and Canadian qualitative research on child welfare placements, particularly as it relates to kinship practice. Hearing the voices of the three constituent groups has provided enormous insights into the challenges and perspectives of each group. When the recruitment flyer was disseminated to the National Grandparents Support Group, emails and phone calls were received from grandparents across Canada and the USA. There is no doubt that this research design could be expanded to other provinces across Canada.

The study has explored the deeper clinical aspects of child welfare placements and uncovered some important practice-related issues. These include the following:

1. Kin caregivers feel exploited and not understood within the foster care paradigm.

2. Foster parents and their children experience considerable grief and trauma related to the movement of children in and out of the home.

3. Youth experience loneliness and challenges with regard to living in different homes.

4. Workers from kinship and foster care want to understand the clinical implications of foster and kinship care. Because of challenges within the system, however, they are often prevented from developing in-depth relationships with caregivers and youth that would help build a solid working relationship between all parties.

Given that this is an exploratory study based on the perspectives of 45 participants, one cannot assert that these statements are generalizable in any measure. However, they certainly provide “food for thought” in relation to clinical practice with kin and foster placements.

This study highlights what we do not know about child welfare placements. This researcher has worked in the child welfare system for over 20 years and despite her in-
depth knowledge of many issues related to placements for children and youth, she has been struck by how much she still does not know and needs to learn in relation to the complexities of this subject matter.

**Personal reflections**

I could talk for hours about how much I have learned from doing this research, which included navigating a complex ethics protocol, creating strategies for recruiting study participants, learning how to write more clearly and effectively and synthesizing and critically reflecting on the literature—but the real learning has extended beyond this “book smart” knowledge. I have learned that I have something to offer to the field in terms of producing research that has meaning and practicality. My greatest insight is that despite the challenges that life throws at me along the way, I am able to keep going, keep growing and never stop laughing. Perhaps that has been the greatest education of all.

**Conclusion**

This dissertation has provided me with an invaluable learning opportunity for personal and professional growth, while the study has provided important insights into the complexities of issues related to child welfare placements. This is only the beginning of what will become a body of research as I begin on my academic career. My greatest desire is to help vulnerable children and families and I hope that, in some measure, this study has achieved that goal. It would not have done so without the 45 remarkable participants who opened their hearts and minds and shared their important stories. Without these courageous individuals, this study would never have occurred.
References


Testa, M. (2005). The quality of permanence--lasting or binding? Subsidized guardianship and kinship foster care as alternatives to adoption. *Journal of Social*


Appendices

**Appendix A: member-checking feedback**

<table>
<thead>
<tr>
<th>Worker feedback</th>
<th>Comments</th>
<th>Date consent given</th>
</tr>
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<tbody>
<tr>
<td>Worker 1</td>
<td>There is some really interesting information in your findings. I believe it is accurate based on what my experiences have been and what I have heard from other workers. Nice to know we are all experiencing the same challenges. What are the next steps?</td>
<td>December 1, 2009</td>
</tr>
<tr>
<td>Worker feedback</td>
<td>Comments</td>
<td>Date consent given</td>
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<tr>
<td>Worker 2</td>
<td>I would just comment on the power/authority imbalance between the bio family and kinship placement. The kin family may not have a positive relationship with the bio family but want to participate in more positive outcomes for the child... this can be difficult to navigate when planning for the child if the different stakeholders have negative perceptions and emotions toward one another. As well…motivations for the kin family can also be affected by financial compensation to help them in providing for the child; compensation that may be more than what the bio family receives when the child is with them, which can mean that their situation is more challenging and stressful, as opposed to the kin families, i.e. the influence of socio-economic status on the family dynamics and protection issues.</td>
<td>December 1, 2009</td>
</tr>
<tr>
<td>Worker feedback</td>
<td>Comments</td>
<td>Date consent given</td>
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<tr>
<td>Worker 4</td>
<td>It looks great, I found the outcome was very interesting and in some cases sad. Bullet #2 in the Relationship section where it states that workers initially mistrust kin families. I do not find this but it was kind of sad to think others felt that way. The only part I found was missing and maybe I was the only one that felt that way, was access and the role the kin family or foster family play....the similarities and the differences (maybe that was not part of your study). Because I see that the kin family having a negative in this area as many times they allow their children or family member have access because it is so familiar to them that can place the child at risk. Again maybe this issue was not part of the study. It was great to read the findings and thanks for allowing me to be part of the research.</td>
<td>December 2, 2009</td>
</tr>
<tr>
<td>Worker feedback</td>
<td>Comments</td>
<td>Date consent given</td>
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</tbody>
</table>
| Worker 5        | I’ve reviewed the findings and they look very authentic. That is, they look “complete” to me in terms of the discussions I have also shared with colleagues and foster parents, regular and kin.  
It feels good to see this in print and to know of the good research practice behind it.  
Thanks for my opportunity to participate and for handling this wonderful research. | December 13, 2009      |
| Foster father   | The synopsis is written in a way that I found easy to follow and understand. The synopsis points out the complexity of kin caregivers and foster parents, e.g. Aboriginal/Attachment and Advocacy issues.  
Overall, I have nothing further to add to the synopsis. | December 23, 2009      |
<table>
<thead>
<tr>
<th>Worker feedback</th>
<th>Comments</th>
<th>Date consent given</th>
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</table>
| Kin father      | As I stated before, it covers a lot and this is my additional three cents worth.  
The following item may already be covered in the detailed section, but just in case it is not covered, the following have been outlined for your consideration:  
1. A problem that exists as a universal issue is that of raising grandkids and this extends to raising family members such as nieces and nephews. If there is a problem with the upbringing of a child, there is very little financial assistance to assist with the upbringing of that child, especially if it is taken in by someone who is related. This does not mean that a foster home cannot do an adequate job and in some cases still do a better job, but the love for that child will often not be done with the same degree that family can give it. This is particularly true if the relatives own a home and are thought to be able to afford it. Even if the CAS are involved and are looking for a foster home, they would rather pay a stranger to raise them and this does not make sense. This could lead to abuse of the system, but if safeguards are put in at the beginning, abuse would be limited or at least, no worse than the abuse that currently takes place.  
2. Fetal Alcohol Spectrum Disorder is a universal problem that is more predominant in Aboriginal people, but not limited to them. Some kind of program needs to be set up, so prospective care takers will know in advance of what they are facing. The program may involve developing a diagnostic tool or even educating the care takers on how to get it analysed and then developing tools for the caregivers to deal with the children. This is going to be expensive to do, but the way to do this is to provide education material for all Canadians and hopefully it will be minimized in the future. | December 22, 2009 |
<table>
<thead>
<tr>
<th>Worker feedback</th>
<th>Comments</th>
<th>Date consent given</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kin youth</td>
<td>thank you for sending me the lettre i hope you liked my lettre if you read it yet</td>
<td>February 25, 2010</td>
</tr>
</tbody>
</table>
As a CAS worker, we want to know what you think...

There is a need to understand more about kinship and foster care placements… Can you help?

Do you have ideas about what kinds of placements work best for children and youth? This is your chance to state your ideas about kinship (in care) and foster care placements. The hope is that this study will assist the child welfare field to understand more about kinship and foster placements.

How can you get involved in this study?

If you are interested in learning more about this study, please contact Ms. Dill directly. She will provide you with more details about the research and, if you agree to participate, she will schedule an interview with you at your CAS office. The interview will last about 1.5 hours.

You can contact Katharine at kdill@partontoario.org or toll-free at 1-866-285-0941 x 2473.

Will you receive anything for participating in the study?

You will receive a $20.00 Tim Hortons gift certificate.

Katharine Dill, PhD Candidate
Factor-Inwentash Faculty of Social Work, University of Toronto
246 Bloor Street West
Toronto, Ontario M5S 1A1
kdill@partontoario.org
1-866-285-0941 x 2473
As a kinship caregiver, we want to know what you think...

There is a need to understand more about kinship and foster placements... can you help?

Do you have any ideas about what kinds of placements work best for children and youth? This is your chance to state your ideas about kinship and/or foster placements. The goal of this study is to develop child welfare professionals’ knowledge of these types of placements to help improve the system for children and youth.

How can you get involved in this study?

If you are interested in learning more about this study, please contact Ms. Dill directly. She will provide you with more details about the research and, if you agree to participate, she will schedule an interview with you at a location that is most convenient for you. Your partner is more than welcome to come with you to this interview. The interview will last about 1.5 hours. In order to participate in the study, you must have a child or youth in your care who is currently being supervised by a local Children’s Aid Society.

You can contact Katharine Dill at katharine.dill@utoronto.ca or by phone at 416-519-6151 or cell at 905-441-1890.

What will you receive for participating in the study?

You will receive a $30.00 Wal-Mart gift certificate and you will be compensated for any travel or care-giving related costs.

Katharine Dill, PhD Candidate
Factor-Inwentash Faculty of Social Work, University of Toronto
246 Bloor Street West
Toronto, Ontario M5S 1A1
kdill@partontario.org
(h) 416-519-6151 or (m) 905-441-1890
As a young person living in your grandparent(s) home, we want to know what you think...

There is a need to understand more about what it is like to live with your grandparents...Can you help?

This is your chance to tell us what your experience has been like living with your grandparent(s). We believe this study will help professionals better understand what works best for youth when he or she lives with extended (grandparents) family. Other youth who live in foster homes have already participated in the research and now we really want to understand what it is like for youth who are living with relatives. Your ideas are really important and valued.

How can you get involved in this study?

You must be 12 years of age or older to participate in the study. If you are interested in learning more about this study, please get in touch with Katharine Dill, who is doing the research. Katharine will give you more information about the study and, if you agree to take part, she will set-up an interview with you at your family home.

You can contact Katharine by texting her or calling her at 905-441-1890 to set up an interview time.

Will you receive anything for participating in the study?

You will receive either a $30.00 iTunes gift card or a $30.00 movie pass.

Katharine Dill, PhD Candidate
Factor-Inwentash Faculty of Social Work, University of Toronto
246 Bloor Street West
Toronto, Ontario M5S 1A1
kdill@partontario.org
(h) 416-519-6151 or (m) 905-441-1890
# SECTION A – GENERAL INFORMATION

## 1. TITLE OF RESEARCH PROJECT

Finding the Best Home…
A Comparative Analysis of Kinship and Foster Care Placements in the Ontario Child Welfare System

## 2. INVESTIGATOR INFORMATION

**Investigator:**

<table>
<thead>
<tr>
<th>Title: Doctoral Candidate</th>
<th>Name: Katharine Dill</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department: Faculty of Social Work, University of Toronto</td>
<td></td>
</tr>
<tr>
<td>Mailing address: 246 Bloor Street West, Toronto, Ontario, M5S 1A1</td>
<td></td>
</tr>
<tr>
<td>Phone: 416 519-6151</td>
<td>Fax:</td>
</tr>
<tr>
<td>Email: <a href="mailto:katharine.dill@utoronto.ca">katharine.dill@utoronto.ca</a></td>
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</tr>
</tbody>
</table>

**Level of Project**

- Faculty Research [ ]
- Post-Doctoral Research [ ]
- Student Research: Doctoral [X]  Masters [ ]
    - Student Number 009169462

**Faculty Supervisor/Sponsor:**

<table>
<thead>
<tr>
<th>Title: Professor</th>
<th>Name: Robert MacFadden</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department: Faculty of Social Work</td>
<td></td>
</tr>
<tr>
<td>Mailing address: 246 Bloor Street West, Toronto, Ontario, M5S 1A1</td>
<td></td>
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<tr>
<td>Phone:</td>
<td>Fax:</td>
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<td>Email:</td>
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**Co-Investigators:**

Are co-investigators involved? Yes [X]  No [ ]

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3. UNIVERSITY OF TORONTO RESEARCH ETHICS BOARD

Health Sciences ☐ Education ☐ Social Science & Humanities ☒
Please consult http://www.research.utoronto.ca/ethics/eh_rebs.html to determine which Research Ethics Board your proposal should be submitted to.

4. LOCATION(S) WHERE THE RESEARCH WILL BE CONDUCTED:

If the research is to be conducted at a site requiring administrative approval/consent (e.g. in a school), please include all draft administrative consent letters. It is the responsibility of the researcher to determine what other means of approval are required, and to obtain approval prior to starting the project.

University of Toronto ☐
Hospital ☐ specify site(s)
School board or community agency ☒ XXX Children's Aid Society specify site(s)
Community within the GTA ☐ specify site(s)
International ☐ specify site(s)
Other ☐ specify site(s)

The University of Toronto has recently reached an agreement with the University-Affiliated Teaching Hospitals, regarding ethics review of hospital-based research. Based on this agreement, certain hospital-based research is now exempt from ethics review at the University of Toronto. If your research is based at a University-Affiliated Teaching Hospital please consult the following document to determine whether or not your research requires review at the University of Toronto http://www.research.utoronto.ca/ethics/eh_where_tahsn.html.

5. OTHER RESEARCH ETHICS BOARD APPROVAL(S)

(a) Does the research involve another institution or site? Yes ☐ No ☒
(b) Has any other REB approved this project? Yes ☒ No ☐
If Yes please provide a copy of the approval letter upon submission of this application.
If No, will any other REB be asked for approval? Yes ☐ The REB situated at each of the three Ontario Children's Aid Societies listed above (please specify which REB) No ☐

6. FUNDING OF THE PROJECT

(a) Please check one:

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<tr>
<th>Funded ☐</th>
<th>Agency:</th>
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<td>Unfunded ☒</td>
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If one protocol is to cover more than one grant, please include all fund numbers.

(b) If waiting for funding, do you wish to postdate ethics approval to the release of funds? Yes ☐ No ☐
(c) For funded research, will more than one protocol be submitted to cover all research funded by the respective grant? Yes ☐ No ☒
   If Yes, this is # of

7. CONTRACTS

Is there a funding or non-funded agreement associated with the research?
   Yes ☐ No ☒
   If Yes, please include 3 copies upon submission of this application.

8. PROJECT START AND END DATES

Estimated start date for this project: September 2008
Estimated completion date for this project: Early winter, 2009

9. SCHOLARLY REVIEW

Please check one:

☒ The research has been approved by a thesis committee (required for thesis research)
☒ The research has undergone scholarly review prior to this submission for ethical review
   Doctoral Studies Thesis Committee. Committee members include: Dr. Robert MacFadden (chair), Dr. Aron Shlonsky, Dr. Lynn McDonald, and Dr. Bob Flynn (University of Ottawa) (specify review committee)
☐ The research will undergo scholarly review prior to funding
   (specify review committee)
☐ The research will not undergo scholarly review apart from this ethics review

10. CONFLICTS OF INTEREST

(a) Will the researcher(s), members of the research team, and/or their partners or immediate family members:
   (i) Receive any personal benefits (e.g. financial benefit such as remuneration, intellectual property rights, rights of employment, consultancies, board membership, share ownership, stock options, etc.) as a result of or in connection to this study? Yes ☐ No ☒
   (ii) If Yes, please describe the benefits below. (Do not include conference and travel expense coverage, or other benefits which are standard to the conduct of research.)

(b) Describe any restrictions regarding access to or disclosure of information (during or at the end of the study) that has been placed on the investigator(s). This includes controls placed by sponsor, advisory or steering committee.
(c) Where relevant, please explain any pre-existing relationship between the researcher(s) and the researched (e.g. instructor-student; manager-employee; minister-congregant).

As a PhD Candidate, I am currently employed as the Director of P.A.R.T. (Practice and Research Together), a consortium of 25 Children's Aid Societies. P.A.R.T. is a project whose sole purpose and mission, is to disseminate the findings from various child welfare related studies. Two Children's Aid Societies are members of the P.A.R.T. project: XXX and XXX Children's Aid Society. In fact, because of my profile as the Director of the P.A.R.T. project and my working relationship with individuals at the study sites, I am better able to recruit agencies for the research study. Individuals at all three study sites are aware of my upcoming research study that will make a comparison between kinship and foster care placements. This role will not compromise my capacity to carry out research in these various agencies. As such, I have no power or authority over any of the people (current or future) who will be asked to participate in this research study.

P.A.R.T. is a program that is designed to disseminate research findings to child welfare practitioners that include front-line workers, supervisors and senior managers. The program is not intended to provide services to foster parents and/or youth. The program does not involve any authority over any individuals. in my role, as director of part: (1) I do not supervise any staff members; (2) I am not engaged in any form of research with these selected child welfare organizations. The P.A.R.T. program is solely intended to provide organizational support and strategies for dissemination of child welfare research findings.

SECTION B – SUMMARY OF THE PROPOSED RESEARCH

Please include a list of appendices for all additional materials submitted.

11. RATIONALE

Describe the purpose and background rationale for the proposed project, and, if relevant, the hypotheses/research questions to be examined.

THE STUDY'S PURPOSE

This proposed study seeks to compare and contrast kinship and foster care placements within the context of the Ontario child welfare system. Kinship care involves child welfare placements for children and youth with relatives or community members. Foster placements are child welfare placements for children or youth who cannot remain in the care of their parents or guardians as a result of abuse and/or neglect.

Using a modified grounded theory methodology, the study will examine individuals whose lives are impacted by child welfare placements. The premise behind this research is that individual participants will share their "stories" about what kinship or foster placements mean to them in the context of their subjective experiences. The constituent population will include the following groups: (1) youth, kin caregivers, and Children’s Aid Society (CAS) workers (kinship placements); and (2) youth, foster caregivers, and CAS workers (foster care placements).

On the basis of the findings and employing a grounded theory methodology, the study will develop a conceptual model that explores the contrasts and similarities between kinship and foster placements. This conceptual framework has the potential to guide practitioners and policy makers and to inform further studies on kinship and foster care placements.
THE STUDY'S PERSPECTIVE

Since 2006, practitioners in the field of child welfare in Ontario and beyond have been expressing increased interest in the growing utilization of kinship placements for children and youth in need of protection. Attention to kinship placements has increased because many child welfare practitioners consider family-based care a better arrangement for children or youth than foster homes or group care (Albert, Iaci, & Catlin, 2006; Barber & Delfabro, 2004). This preference is rooted in the belief that kinship placements offer children a greater chance for continuity and stability than foster homes (Geen, 2003b; Gleeson & Hairston, 1999; Hegar & Scannapieco, 1999; Ministry of Children and Youth Services, 2006; Murphy, 2006; Scannapieco & Hegar, 2002).

In essence, there are three deeply entrenched assumptions about the benefits of kinship placements: (a) kinship placements have greater longevity than foster care situations; (b) kinship homes are more likely to accept sibling groups and thereby sustain these important relationships; and (c) most children and their parents would prefer that the children live with family members or friends rather than with strangers (i.e., in foster care placements) (Barth, Guo, Green, & McCrae, 2007).

KINSHIP CARE FROM AN ONTARIO CHILD WELFARE PERSPECTIVE

Kinship care is a concept that has been utilized by North American and international child welfare systems for decades. The practice of using extended family or community members as placement options for children in need of protection has become a significant trend in the Ontario child welfare system in recent years, primarily since the spring of 2006 (Ministry of Children and Youth Services, 2006). This development has occurred because of the ever-increasing numbers of children requiring homes and the decreasing numbers of foster placements (Geen, 2003a,b).

In Ontario, the shift towards utilizing family and friends as placement options has generated some controversy in relation to the safety and well-being of the children involved (Misener, 2006; Lewis, 2005). These concerns surfaced particularly in a provincial inquest that examined the case of a young boy, Jeffrey Baldwin, who died of starvation while in the care of his maternal grandparents. At the time of his death, the family was being supervised by the XXX CAS. On April 7, 2006, the Ontario Courts found the maternal grandparents of Jeffrey Baldwin guilty of second-degree murder (Marin, 2006; Misener, 2006). The case received significant public scrutiny and highlighted the pressing need to understand the complex issues related to kinship caregiving. The case also exemplified the challenging issues involved in kinship care, and the need for child welfare authorities to ensure the protection of children by having a structure and screening system in place for kinship placements.

In Ontario, there has been a substantial increase in the numbers of kinship placements since 2001. There were a total of 7,697 foster and kinship homes available or in use on March 31, 2007; an increase of 10% since March 31, 2002 (Ontario Association of Children's Aid Societies, 2007). These figures highlight the increasing utilization of such placements but the data does not differentiate the emerging trends between kinship and foster placements.

PLACEMENT DECISION MAKING

In a study by Beeman et al., the authors determined that there is a pressing need to define decision-making processes in relation to kin versus non-kin placements (Beeman, 2000). In a review of the literature on kinship placements, Shlonsky and Berrick have focussed on the need for the development of a system for screening kinship placements and for the development of a decision-making framework (Shlonsky & Berrick, 2004).

These two publications emphasize the requirement for a structured method that would assist CAS workers in deciding when and how children should be placed in family-based situations, namely kinship homes. These publications also highlight the minimal progress that has been made in the design of assessment and screening tools that CAS workers may use when they are deciding whether they should be placing children in
kinship situations. The dilemma for child welfare practitioners is that they often need to make such decisions on the basis of minimal empirical evidence. Such screening and assessment tools would help to guide their decision-making practices.

A QUALITATIVE PERSPECTIVE IS REQUIRED

A comprehensive literature review completed on this subject has determined that there is minimal qualitative research from any jurisdiction that has explored the perspectives of children and youth regarding their experiences of living in kinship and/or foster care homes (Chapman, Wall, & Barth, 2004). Data gathering regarding the perspectives of children and youth is essential for the development of an initial understanding of the factors that influence the success or failure of such placements. The existing qualitative kinship care research, which has been exploratory in nature, has tended to focus on experiences reported by child welfare professionals or by adults who were in kinship care when they were children (Beeman & Boisen, 1999; Benedict, Zuravin, & Stallings, 1996; Harden, Clyman, Kriebel, & Lyons, 2004). Attention to the voices of children and youth who are currently residing in kinship placements is essential if practitioners, policy makers and researchers are to understand the unique elements of such placements. The fundamental question to be explored is: how does kinship care compare with the traditional foster care model within the context of the Ontario child welfare system?

SIBLING ATTACHMENTS

One of the key findings regarding kinship care placements appears to be the higher proportion of sibling placements in kinship homes as compared to foster care or group care (Hegar & Scannapieco, 1999). This is important because the protective factors for children entering care appear to increase when they have the solidarity of their sibling relationships to assist them through the trauma of separating from their parents (Webster, Barth, & Needal, 2000).

In a meta-analysis of 17 studies on sibling relationships, Hegar has provided an important insight about the role of such relationships in the family system (Hegar, 2005). The analysis found that the authors of some studies reported fewer placement disruptions for children who were placed together with their respective siblings (Boer & Spiering, 1992; Drapeau, 2000; Thorpe & Swart, 1992). However, none of the studies employed a qualitative methodology that involved interviewing children about their subjective experiences of sibling relationships. The lack of qualitative research on issues related to sibling relationships in foster care means that there are no data that could contribute to a clinical understanding of the value of such relationships.

THE CANADIAN PERSPECTIVE

A review of the literature suggests that there is a striking lack of empirical and conceptual literature from the Canadian perspective on the subject of kinship care. Some research has been conducted about foster placements for children and youth in care (Flynn, 2004), but no specific analysis has been done about the impact and outcomes of placements with family members. Researchers based in the United States have conducted significant research on this topic and have paved the way for defining some of the important issues that require analysis (Beeman & Boisen, 1999; Benedict, Zuravin, & Stallings, 1996; Chapman, Wall, & Barth, 2004; Ehrle & Geen, 2002; Sivright, 2004; Worrall, 2001). These American authors, who pioneered research regarding kinship caregivers, have employed both qualitative and quantitative methodologies (Musil & Standing, 2006; Shlonsky & Berrick, 2004). However, Canada has a diverse population with distinct social policy and clinical issues at play. Therefore, the development of a Canadian perspective requires an analysis of the demographic information regarding children and youth entering kinship care in this country, an exploration of outcomes in relation to placements, and an assessment of intervention strategies that might help to support or hinder these placements. In contrast to researchers in some other nations of the developed world, Canadian researchers and agencies still have considerable ground to cover in the development of a policy framework that could be used to guide a child welfare system in the effective utilization of kinship, kith, and foster care placements.
Emerging Canadian research indicates that architects of the social policy framework need to pay more attention to the details related to placements in kinship and foster homes and to the child welfare system’s relationships with and payments to caregivers in these homes (Callahan, Brown, MacKenzie, & Whittington, 2004; Dominelli, Strega, Callahan, & Rutman, 2005; Nova Scotia Health Research Foundation, 2006).

KEY FINDINGS

A review of the literature has determined that: (a) there is a need for studies that employ a qualitative perspective as a way of understanding the subjective experiences of the client population, particularly of children and youth who are currently residing in kinship and foster care placements; (b) comparative analyses of sibling attachments in kinship and foster care placements are needed; and (c) most importantly, a Canadian, not American, perspective on kinship versus foster care placements is required in order for practitioners and policy makers to understand the demographic data and underlying issues inherent to our population.

12. METHODS

Please describe all formal and informal procedures to be used, settings and types of information to be involved, as well as how data will be analyzed.

Attach a copy of all questionnaires, interview guides or other non-standard test instruments.

KEY STUDY DEFINITIONS

Kinship care has been defined as “the full-time nurturing and protection of children by relatives, members of their tribes or clans, godparents, stepparents, or other adults who have a kinship bond with the child” (Child Welfare League of America, 2000). In this Child Welfare League of America paper, kinship care refers to the placement, with relatives or community members, of a child or youth who has been found to be in need of protection by a child welfare agency because of concerns about possible abuse and/or neglect.

For the purposes of this study, a 'kinship placement' is defined as a situation where a child resides with a family or community member who was known to the child or their biological family before the need for a placement arose. In contrast, foster care is family-based care with individuals who were not previously known to the child or their biological family.

PLACEMENT TYPES
The province of Ontario currently has two streams of kinship placements, namely kinship services (voluntary placements) and kinship care (an arrangement made after the formal placement of the child in the care of the child welfare agency). This study will focus solely on kinship care placements; these placements have been formally studied and are compensated by Ontario child welfare agencies at the same rate as foster homes. Ms. Dill’s thesis committee felt that it was important to examine only kinship care homes, given that they are more in line with the current licensing structure of Ontario foster homes. The justification for this decision is based on the study’s purpose of conducting a comparative analysis between kinship and foster care. To introduce kinship services placements may result in different findings. A study involving kinship services placements is required at a future date but, for the purposes of this study, kinship services placement will not be included in the current study design.

STUDY SETTINGS

Three CAS locations across the southern, central and eastern sections of the province have been chosen for study settings in order to provide a broad geographic sample of both kinship and foster care placements. Families residing at these sites can provide both urban and rural viewpoints, which both need to be incorporated into a comprehensive understanding of issues related to kinship care. The 53 CAS's in Ontario are grouped into six geographical zones: Southwestern, Central, Grand River, Eastern, Northwestern and Northeastern. Ms. Dill has selected one study site from each of three geographical zones: southwestern zone, central zone and the eastern zone. Interviews conducted in these three study locations will generate varied narratives about experiences in both urban and rural settings. In particular, two of the selected CAS's serve large rural districts, and the southwestern agency includes a significant aboriginal population. The selection of various sites will also provide a wide purview of the methods used by child welfare organizations to manage relationships with and provide services to kinship and foster placements in different situations.

These sites have also been chosen on the basis of Ms. Dill’s working relationship with individuals at all three sites. Ms. Dill was a front-line worker at one of the CAS's and also spent several years as a supervisor at the second CAS and has worked closely with the third CAS doing training and collaborative work.

***************************************************************************************************************************

ETHICS AMENDMENT #1: THE FOLLOWING IS THE DOCUMENTATION SUBMITTED FOR THE FIRST AMENDMENT TO THE PROTOCOL. THIS AMENDMENT WAS APPROVED BY THE REB ON NOVEMBER 14, 2008.

XXX WAS ONE OF THREE STUDY SITES CHOSEN FOR THIS DISSERTATION RESEARCH STUDY. IN THE COURSE OF ENGAGING THE AGENCY TO PARTICIPATE IN THE STUDY, IT BECAME EVIDENT THAT CAST WAS SEEKING SIGNIFICANT CHANGES TO THE STUDY DESIGN TO ENSURE THAT THE RESEARCH FINDINGS ARE MORE ALIGNED WITH THEIR ORGANIZATIONAL PRINCIPLES AND PHILOSOPHY OF PRACTICE. THIS LED TO CAST REQUESTING SEVERAL CHANGES TO THE STUDY QUESTIONS THAT ARE NOT IN KEEPING WITH THE RESEARCH STUDY. THE CONCERN IS THAT THE CHANGES BEING PROPOSED BY CAST HAVE THE POSSIBILITY OF WEAKENING THE STUDY DESIGN BECAUSE OF THE ABSTRACT NATURE OF THE PROPOSED QUESTIONS.

FAMILY & CHILDREN’S SERVICES OF XXX COUNTY CAME FORWARD VOLUNTARILY AND OFFERED TO PARTICIPATE IN THIS STUDY. XXX IS IN AGREEMENT WITH THE STUDY PRINCIPLES AND RESEARCH DESIGN FORMAT AND HAS PROVIDED FORMAL APPROVAL TO ENGAGE IN THE RESEARCH SHOULD THIS BE APPROVED BY THE RESEARCH ETHICS BOARD. THEREFORE, A REQUEST IS BEING SOUGHT TO CHANGE THE SITE LOCATION FROM THE XXX TO THE FAMILY AND CHILDREN’S SERVICES OF XXX.

DATA COLLECTION

THE ORIGINAL PROTOCOL OUTLINED A PLAN TO FIELD TEST THE INTERVIEW QUESTIONS WITH TWO YOUTH. THE ORIGINAL QUESTIONS AS OUTLINED IN THE STUDY PROTOCOL ARE AS FOLLOWS:
(No change to questions):

Can you describe the different places that you lived in before coming to this home?

What was it like living with your own family before coming to this home?

What is your relationship like with your family? Did you have any challenges?

Do you see your family?

Do you have any contact with your sisters or brothers and, if so, how often?

What is it like now, living with your current family (foster or kin)?

If you have some challenges in your life, how were you able to overcome them? Can you provide some examples?

Before coming to this home, were there things about yourself that you found challenging — like feeling sad or depressed, having difficulties at school or getting into trouble?

Have things changed since you moved to this home? If so, in what way? Can you describe how things have changed?

THESE QUESTIONS ARE PROVIDING IMPORTANT STUDY INFORMATION BUT I WOULD LIKE TO ADD THE FOLLOWING TWO INTERVIEW QUESTIONS THAT ARE AS FOLLOWS:

1. IF YOU COULD CHANGE ONE THING ABOUT YOUR EXPERIENCE IN CARE, WHAT WOULD THAT BE?
2. WHAT THINGS DO YOU THINK CAS WORKERS AND CAREGIVERS NEED TO UNDERSTAND ABOUT WHAT IT IS LIKE FOR CHILDREN AND YOUTH TO COME INTO CARE (KINSHIP AND/OR FOSTER AND/OR GROUP CARE)?

THESE LAST TWO QUESTIONS WILL ENCOURAGE THE YOUTH TO EXPLORE HIS OR HER OWN IDEAS ABOUT HOW THE CHILD WELFARE SYSTEM MIGHT BE CHANGED TO MAKE IT BETTER FOR YOUTH IN CARE. THESE CHANGES TO THE YOUTH INTERVIEW QUESTIONS IN NO WAY RELATED TO THE XXX CAS REQUEST FOR CHANGES TO THE STUDY DESIGN.

INTERVIEW GUIDES WILL INCLUDE THESE TWO REVISED STUDY QUESTIONS.

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ETHICS AMENDMENT #2

MAJOR AMENDMENT TO STUDY DESIGN

THIS DOCTORAL CANDIDATE HAS COMPLETED A TOTAL OF 32 INTERVIEWS FOR HER DISSERTATION RESEARCH. THE PROPOSED STUDY DESIGN REQUIRED THE RECRUITMENT OF THE FOLLOWING POPULATIONS: CAREGIVERS, WORKERS AND YOUTH FROM BOTH KINSHIP CARE AND FOSTER CARE PLACEMENTS. THE RESEARCH DESIGN REQUIRES THE FOLLOWING SAMPLE POPULATION:
POPULATION SAMPLE:

FOSTER CARE
CAREGIVERS: 6
WORKERS: 6
YOUTH: 6

KINSHIP CARE
CAREGIVERS: 6
WORKERS: 6
YOUTH: 6

THIS DOCTORAL CANDIDATE HAS COMPLETED INTERVIEWS WITH ALL OF THESE CONSTITUENT POPULATIONS AT EACH OF THE THREE FOLLOWING CHILDREN’S AID SOCIETIES:

1. CHILDREN’S AID SOCIETY OF XXX
2. XXX FAMILY AND CHILDREN’S SERVICES
3. CHILDREN’S AID SOCIETY OF XXX

THE FOLLOWING POPULATION HAS BEEN RECRUITED TO DATE:

FOSTER CARE
WORKERS: 4
CAREGIVERS: 10
YOUTH: 5

KINSHIP CARE:

WORKERS: 8
CAREGIVERS: 3
YOUTH: 2

A MEETING WAS HELD WITH THIS DOCTORAL CANDIDATE’S THESIS COMMITTEE ON THURSDAY, MAY 7, 2009. THE COMMITTEE RAISED CONCERNS THAT THE CURRENT SAMPLE POPULATION FROM THE THREE CONSTITUENT POPULATIONS FROM BOTH KINSHIP CARE AND FOSTER CARE PLACEMENTS HAS NOT YET BEEN ACHIEVED. THE REQUIREMENT IS A MINIMUM OF SIX PARTICIPANTS FOR EACH SUB-GROUP. THE COMMITTEE WOULD LIKE THIS DOCTORAL CANDIDATE TO RETURN TO THE CHILD WELFARE FIELD AND RECRUIT MORE PARTICIPANTS TO ENSURE AN EVEN DISTRIBUTION OF STUDY PARTICIPANTS. THE COMMITTEE IS ASKING THAT THIS DOCTORAL CANDIDATE COLLECT THE FOLLOWING NUMBERS OF INTERVIEWS FROM EACH OF THE CONSTITUENT POPULATIONS TO ENSURE AN EVEN DISTRIBUTION OF PARTICIPANTS FROM BOTH KINSHIP AND FOSTER CARE.

THE CURRENT ETHICS PROPOSAL STIPULATES THAT THIS DOCTORAL CANDIDATE CANNOT RECRUIT ANY PARTICIPANTS WHO KNOW EACH OTHER, PARTICULARLY INDIVIDUALS FROM THE SAME CASELOAD. IN THE FIRST WAVE OF DATA COLLECTION, THIS DOCTORAL CANDIDATE HAD TO FORGO INTERVIEWS WITH SOME PARTICIPANTS BECAUSE INDIVIDUALS HAD AN AFFILIATION WITH ONE ANOTHER. FOR EXAMPLE, IN SOME SITUATIONS CHILDREN’S AID SOCIETY (CAS) WORKERS WOULD RECRUIT KINSHIP CAREGIVERS FROM HIS/HER CASELOAD TO PARTICIPATE IN THE STUDY. THIS DOCTORAL CANDIDATE HAD TO DENY THESE CAREGIVERS PARTICIPATION IN THE STUDY BECAUSE OF THE PRE-EXISTING RELATIONSHIP WITH THE CAS WORKER. THIS
DOCTORAL CANDIDATE’S THESIS COMMITTEE SUGGESTED THAT A MORE APPROPRIATE STRATEGY INVOLVES RECRUITING THREE NEW CHILD WELFARE AGENCIES TO PARTICIPATE IN THE STUDY. THESE NEW AGENCIES WOULD THEN BE ASKED TO RECRUIT PARTICIPANTS FROM ONLY ONE OF THE THREE CONSTITUENT POPULATIONS: CAREGIVERS OR YOUTH OR WORKERS. THREE NEW SITES HAVE BEEN APPROACHED TO PARTICIPATE IN THE STUDY AND ALL HAVE PROVIDED TENTATIVE AGREEMENTS TO PARTICIPATE PENDING APPROVAL FROM UNIVERSITY ETHICS BOARD. THESE AGENCIES ARE: XXX CHILDREN'S AID SOCIETY, FAMILY AND CHILDREN'S SERVICES OF XXX AND XXX, AND XXX CHILDREN'S AID SOCIETY. THE SAMPLING DISTRIBUTION IS AS FOLLOWS:

XXX: KINSHIP CAREGIVERS 3
XXX: FOSTER CARE WORKERS: 3
XXX: YOUTH FROM KINSHIP AND FOSTER CARE: 4 KINSHIP YOUTH AND 1 KINSHIP FROM FOSTER CARE.

THIS SECOND PHASE OF DATA COLLECTION WILL RESULT IN THE RECRUITMENT OF TEN MORE STUDY PARTICIPANTS.

THIS NEWER METHOD OF RECRUITING PARTICIPANTS REMOVES ANY CONCERN OF A PRE-EXISTING RELATIONSHIP BETWEEN PARTICIPANTS.

THEREFORE, THIS DOCTORAL CANDIDATE IS SEEKING THE FOLLOWING CHANGES TO THE ETHICS PROTOCOL:

• THE RECRUITMENT OF THREE NEW STUDY SITES: XXX CHILDREN'S AID SOCIETY, FAMILY AND CHILDREN'S SERVICES OF XXX AND XXX CHILDREN'S AID SOCIETY

• A VARIATION OF THE RECRUITMENT STRATEGY. EACH NEW STUDY SITE WILL BE ASKED TO RECRUIT ONE POPULATION: YOUTH OR CAREGIVERS OR WORKERS. THIS MINIMIZES THE CONCERN THAT PARTICIPANTS WILL HAVE AN AFFILIATION WITH ONE ANOTHER PRECLUDING HE OR SHE FROM PARTICIPATING IN THE RESEARCH.

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ETHICS AMENDMENT #3
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A SECOND AMENDMENT WAS GRANTED BY THE RESEARCH ETHICS BOARD ON JUNE 2, 2009. THIS AMENDMENT PERTAINED TO CHANGES TO THE OVERALL RECRUITMENT STRATEGY OF STUDY PARTICIPANTS AS WELL AS THE INCLUSION OF THREE NEW STUDY SITES.

FOLLOWING THE APPROVAL BY THE REB, THIS DOCTORAL CANDIDATE BEGAN TO RECRUIT MORE STUDY PARTICIPANTS. THE XXX HAS STARTED TO RECRUIT KINSHIP CAREGIVERS FOR THE RESEARCH. THE KINSHIP SUPERVISOR, XXX FROM XXX EMAILED MS. DILL ON JUNE 9, 2009 TO ENQUIRE ABOUT THE FEASIBILITY OF CONDUCTING STUDY INTERVIEWS AWAY FROM THE XXX OFFICE LOCATION IN SCARBOROUGH. XXX INDICATED THAT COMING TO THE SCARBOROUGH OFFICE MAY PRESENT A BARRIER TO SOME OF THE KIN CAREGIVERS BECAUSE OF THE DISTANCE FROM INDIVIDUAL’S RESIDENCE AND LACK OF ACCESS TO TRANSPORTATION. MS. XXX’S STAFF MEMBERS WONDERED IF I, MS. DILL WOULD CONSIDER GOING TO A KIN CAREGIVER'S HOME OR ANOTHER MUTUALLY AGREED UPON LOCATION IN ORDER TO FACILITATE INDIVIDUAL'S PARTICIPATION IN THE STUDY. THEREFORE THE CHANGE TO THE ETHICS PROTOCOL IS AS FOLLOWS: CONDUCT STUDY INTERVIEWS OUTSIDE OF THE CAS OFFICE LOCATION. THE ORIGINAL PROTOCOL DID STATE THAT INTERVIEWS TAKE PLACE IN THE CHILDREN'S AID SOCIETY OFFICE.
THIS CHANGE IN LOCATION WILL REQUIRE THAT I, MS. DILL BE MORE ATTENTIVE TO ISSUES OF CONFIDENTIALITY. I WILL ENSURE THAT ANY LOCATION THAT IS CHOSEN IS SITUATED SO AS TO ENSURE THAT THE PRIVACY AND CONFIDENTIALITY OF THE STUDY PARTICIPANTS IS PROTECTED.

ETHICS AMENDMENT #4

MS DILL HAS COMPLETED 32 INTERVIEWS WITH THE THREE CONSTITUENT POPULATIONS: CAREGIVERS, YOUTH AND WORKERS. SHE HAS MANAGED TO RECRUIT ALL NECESSARY PARTICIPANTS FOR THE WORKER POPULATION. HOWEVER, SHE STILL REQUIRES MORE KINSHIP YOUTH AND KINSHIP CAREGIVERS. THE STUDY DESIGN REQUIRES 4 KINSHIP YOUTH AND 3 KINSHIP CAREGIVERS FOR A TOTAL OF 6 PARTICIPANTS FROM EACH GROUP. IN CONSULTATION WITH HER THESIS COMMITTEE, MS. DILL HAS DEVELOPED A REVISED RECRUITMENT STRATEGY TO INCREASE PARTICIPATION FOR THESE TWO CONSTITUENT POPULATIONS.

REVISED RECRUITMENT STRATEGIES

#1: REVISED RECRUITMENT STRATEGIES: KIN CAREGIVERS

MS. DILL HAS MADE VARIOUS ATTEMPTS TO RECRUIT KIN CAREGIVERS THROUGH FOUR CHILDREN'S AID SOCIETIES: (1) XXX CHILDREN'S AID SOCIETY, (2) FAMILY AND CHILDREN'S SERVICES OF XXX, (3) XXX CHILDREN'S AID SOCIETY AND (4) XXX. MS. DILL CONTINUES TO RECRUIT CAREGIVERS THROUGH THE XXX CHILDREN'S AID SOCIETY. HOWEVER, IT IS CLEAR THAT RECRUITING PARTICIPANTS THROUGH CHILD WELFARE AGENCIES IS NOT PRODUCING EFFECTIVE RESULTS WITH RESPECT TO KIN CAREGIVER PARTICIPATION. MS. DILL IS SEEKING APPROVAL FROM THE RESEARCH ETHICS BOARD TO RECRUIT PARTICIPANTS THROUGH A NATIONAL KINSHIP ADVOCACY GROUP.

MS DILL SPOKE WITH XXX DIRECTOR, ABOUT RECRUITING KIN CAREGIVERS THROUGH THIS ORGANIZATION. THE DIRECTOR SUPPORTS THIS RECRUITMENT STRATEGY. MS. DILL INDICATED THAT NO RECRUITMENT CAN BEGIN UNTIL THIS NEW STRATEGY IS VETTED AND APPROVED BY THE RESEARCH ETHICS BOARD (REB).

AS A WAY OF FURTHER ENCOURAGING PARTICIPATION IN THE STUDY, MS. DILL WOULD LIKE TO INCREASE THE STUDY INCENTIVE TO $30.00 FROM $20.00 FOR A WAL-MART GIFT CERTIFICATE.

THEREFORE, A SUMMARY OF CHANGES TO THE ETHICS PROTOCOL AS IT RELATES TO THE RECRUITMENT OF KINSHIP CAREGIVERS IS AS FOLLOWS:

1. RECRUITMENT OF KINSHIP CAREGIVER PARTICIPANTS FROM XXX, A NATIONAL KINSHIP SUPPORT AND ADVOCACY NETWORK;

2. CONDUCT INTERVIEWS AT THE KINSHIP CAMP BEING SPONSORED BY XXX, IF POSSIBLE. IF THIS IS NOT FEASIBLE, MS. DILL WILL CONDUCT STUDY INTERVIEWS AT A LOCATION THAT IS MOST CONVENIENT FOR KIN CAREGIVERS.

3. INCREASE THE STUDY INCENTIVE FROM A $20.00 WAL-MART GIFT CERTIFICATE TO A $30.00 WAL-MART GIFT CERTIFICATE.

THE RECRUITMENT FLYER FOR KIN CAREGIVERS WILL ENSURE THAT THE THE FOLLOWING KEY POINTS ARE INCLUDED:
- Kin caregivers must have a child or youth in his/her care who is currently being supervised by a local children's aid society;
- The interview will take place at a location that is suitable for the caregiver. Once participants contact Ms. Dill, she will then offer to conduct the interviews at the XXX camp if this is feasible for the participant.
- The flyer will indicate the revised study incentive—a $30.00 Wal-Mart gift card.

#2: Revised Recruitment Strategy for Youth

Ms. Dill continues to recruit youth participants through XXX children's aid society. No youth have come forward thus far to participate from this agency. Therefore, Ms. Dill wishes to revise the recruitment flyer to state that youth can text message her on her cell phone simply to arrange a time for the interview. This strategy is likely more in keeping with the ways in which youth communicate.

The current study incentive is listed as $20.00 and Ms. Dill wishes to increase the study incentive to $30.00 to encourage potential increased interest in the study.

The recruitment flyer for youth will ensure that the following key points are included:

- The revised flyer will reflect the use of text messaging with the following line: "You can contact Katharine by calling or texting her at XXX-XXX-XXXX" to set up an interview time.
- The study incentive will be increased from $20.00 to $30.00.

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ETHICS AMENDMENT # 5

A fourth amendment was approved by the REB on August 13, 2009. This most recent amendment gave Ms. Dill the opportunity to conduct interviews with kin. Ms. Dill conducted interviews with kin caregivers on Thursday, August 27, 2009, at an annual retreat (camp) held for kin grandparents and their respective grandchildren. At this camp, Ms. Dill achieved a high rate of success with respect to the recruitment of kin grandparents for the study. A total of four kin grandparent caregivers were interviewed at this retreat and a total of three kin grandparents were interviewed outside of the camp at off-site locations. A total of seven kin grandparents were recruited through the XXX network thereby allowing Ms. Dill to successfully recruit the desired sample population for her dissertation. It is evident, that recruiting kin caregivers through XXX has been very successful and has resulted in the desired results.

To date, no further youth from the kinship in-care stream have come forward to participate in this study. Recruitment for these youth has been organized through the XXX children's aid society. Ms. Dill has made attempts to recruit through this organization since May, 2009. The most previous ethics amendment dated August 13, 2009, provided Ms. Dill with the opportunity to try alternative recruitment strategies with youth that included: (1) texting Ms. Dill to set up the study interview, and (2) the recruitment incentive was increased from $20.00 to $30.00 for either a movie pass or iTunes gift card. To date (September 2, 2009), no youth have called or texted Ms. Dill asking to participate in the study. Two out of the six required youth have been recruited to date. A minimum of four kin youth are required to make the study complete.
AT THE KINSHIP RETREAT HELD ON AUGUST 27, 2009, GRANDPARENTS DIRECTOR, INDICATED TO MS. DILL THAT SHE COULD RECRUIT YOUTH THROUGH THE GRANDPARENT NETWORK. THEREFORE, MS. DILL IS SEEKING TO REVISE THE CURRENT RECRUITMENT STRATEGY AND INCLUDE THE GRANDPARENTS AS A RESOURCE TO RECRUIT KIN YOUTH. THIS REVISED RECRUITMENT STRATEGY INCLUDES THE FOLLOWING PLAN:

• A REVISED RECRUITMENT FLYER HAS BEEN DEVELOPED THAT EMPHASIZES THE DESIRE TO RECRUIT YOUTH WHO ARE RESIDING ONLY IN KIN HOMES, INSTEAD OF KIN AND FOSTER YOUTH (SEE ATTACHED AMENDED FLYER);
• INTERVIEWS WILL TAKE PLACE IN THE GRANDPARENTS’ HOME. MS. DILL WILL ENSURE THAT ANY YOUTH WHO PARTICIPATES IN THE STUDY WILL BE INTERVIEWED IN A SPACE IN THE FAMILY HOME THAT IS QUIET AND CONFIDENTIAL. THE GRANDPARENTS OF THE YOUTH WILL BE AWARE THAT THE YOUTH IS PARTICIPATING IN THE STUDY BUT NO INFORMATION WILL BE RELEASED TO THE CAREGIVERS FOLLOWING THE INTERVIEW, UNLESS THE YOUTH REQUESTS MS. DILL TO COMMUNICATE THIS INFORMATION VIA A SIGNED CONSENT FORM TITLED, ‘YOUTH NOTIFICATION FORM’ DESIGNED SPECIFICALLY FOR THIS STUDY. THE CURRENT CONSENT CLEARLY OUTLINES THAT MS. DILL WILL NOT RELEASE ANY INFORMATION RELATED TO THE YOUTH’S INTERVIEW TO THE CAREGIVER FOLLOWING THE INTERVIEW.
• THE RECRUITMENT FLYER WILL BE DISTRIBUTED THROUGH THE GRANDPARENTS ELECTRONIC NETWORK. GRANDPARENTS WILL THEN SHARE THE RECRUITMENT FLYER WITH YOUTH WHO MAY BE INTERESTED IN PARTICIPATING IN THE STUDY. THE YOUTH MUST CONTACT THIS RESEARCHER THEMSELVES IN ORDER TO INITIATE THE STUDY INTERVIEW.
• THE CURRENT PROTOCOL STATES THAT PARTICIPANTS MUST BE UNRELATED, THEREFORE, ANY YOUTH WHOSE GRANDPARENTS ALREADY PARTICIPATED IN THE STUDY, WILL BE EXCLUDED FROM THE RESEARCH.

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SIXTH AND CURRENT PROPOSED AMENDMENT

A FIFTH ETHICS AMENDMENT WAS APPROVED BY THE REB ON SEPTEMBER 17, 2009. THIS MOST RECENT AMENDMENT GAVE MS. DILL THE OPPORTUNITY TO RECRUIT YOUTH RESIDING WITH THEIR RESPECTIVE GRANDPARENT(S). STUDY PARTICIPANTS WERE RECRUITED THROUGH, A NATIONAL SUPPORT AND ADVOCACY GROUP FOR GRANDPARENTS WHO ARE RAISING THEIR GRANDCHILDREN. RECRUITMENT THROUGH THIS GROUP HAS BEEN MINIMAL BECAUSE THE MAJORITY OF THE YOUTH ARE NOT INVOLVED WITH A CHILD WELFARE AGENCY—a REQUIREMENT FOR THE STUDY DESIGN.

THE XXX CHILDREN’S AID SOCIETY HAS CONTACTED A TOTAL OF TEN YOUTH WHO HAVE INDICATED THEIR WILLINGNESS TO PARTICIPATE IN THE STUDY. THESE YOUTH, ALTHOUGH INDICATING A DESIRE AND INTEREST TO PARTICIPATE IN THE STUDY, DO NOT FOLLOW THROUGH AND CONTACT THIS RESEARCHER DIRECTLY. IT IS LIKELY THAT YOUTH SEE THIS PROCESS OF contacts THE RESEARCHER AS SOMEWHAT INTIMIDATING. THE CURRENT PROCESS INVOLVES CONTACTING A PERSON IN A POSITION OF AUTHORITY AND SPEAKING WITH SOMEONE COMPLETELY UNKNOWN TO HIM OR HER. THEREFORE, THIS RESEARCHER IS REQUESTING AN AMENDMENT TO THE EXISTING RECRUITMENT STRATEGY FOR YOUTH. THIS AMENDMENT INVOLVES ASKING THE XXX CHILDREN’S AID SOCIETY KINSHIP SUPERVISOR, TO CONTACT THE YOUTH DIRECTLY AND SEEKING THEIR PERMISSION TO HAVE MS. DILL CONTACT THEM TO SET UP THE STUDY INTERVIEW. THIS REVISED STRATEGY WILL TAKE THE ONUS OFF THE YOUTH TO MAKE THE INITIAL CONTACT WITH THIS RESEARCHER. THESE YOUTH WILL INCLUDE THE SAME INDIVIDUALS WHO HAVE ALREADY INDICATED A DESIRE TO PARTICIPATE IN THE STUDY EITHER TO HIS/HER RESPECTIVE WORKER OR TO XXX. IF THE YOUTH PROVIDE THIS PERMISSION TO MS. XXX, THEN SHE WILL PROVIDE THE NAMES AND CONTACT NUMBERS TO MS. DILL. MS. DILL HAS SIGNED AN OATH OF CONFIDENTIALITY WITH THE XXX CHILDREN’S AID SOCIETY AND SHE WILL NOT SHARE ANY OF THIS INFORMATION WITH ANY OUTSIDE SOURCE.
FOLLOWING THIS PRELIMINARY CONTACT BY XXX KINSHIP SUPERVISOR, THIS RESEARCHER WILL THEN CONTACT THE YOUTH DIRECTLY AND SET UP THE STUDY INTERVIEW. MS DILL WILL INDICATE TO THE YOUTH THAT MS. XXX WILL NOT BE INFORMED OF WHETHER AN INTERVIEW OCCURRED OR ANY INFORMATION ABOUT THE CONTENTS OF THE INTERVIEW. THERE WILL BE NO RAMIFICATIONS IF THE INDIVIDUAL YOUTH DOES OR DOES NOT PARTICIPATE IN THE RESEARCH. THESE ISSUES ARE CLEARLY ARTICULATED IN THE CURRENT YOUTH INFORMATION LETTER AND CONSENT FORM. YOUTH ARE TOLD THAT IF THEY DECIDE TO WITHDRAW FROM THE STUDY, THERE WILL BE NO CONSEQUENCES AND HE/SHE WILL STILL RETAIN THE STUDY RECRUITMENT INCENTIVE (MOVIE PASS OR ITUNES GIFT CARD). AS WELL, THE YOUTH ARE TOLD THAT NO INFORMATION ABOUT WHAT IS SAID IN THE INTERVIEW WILL BE REPORTED BACK TO HIS/HER RESPECTIVE CAS WORKER, AND THIS INCLUDES THE KINSHIP SUPERVISOR, MS. XXX.

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Using convenience-sampling techniques, Ms. Dill will determine the sample required for this study on the need to reach the level of saturation in relation to the themes and issues generated (Cresswell, 1998; Morse & Richards, 2002; Northcutt & McCoy, 2004; Padgett, 1998). The concept of saturation in qualitative studies is vastly different from that in quantitative studies, in the sense that one cannot predetermine the number of respondents required for the sample population. Only when Ms. Dill actually begins the initial data analysis will the re-emergence of themes and the occurrence of saturation begin to become apparent (Charmaz, 2006; Hsiung & Raddon, 2002).

The size of the sample population per site is initially proposed because it is likely that this number will lead to saturation of data. Grounded theory suggests that a sample population number cannot be predetermined; instead, the data gathered dictate whether the incidence of re-emerging themes constitutes saturation. The proposed sample population is 36 (caregivers, CAS workers AND youth 12 and older) but this is not a fixed number and, if Ms. Dill still has not attained saturation after all of these interviews have been conducted, she will recruit further triad populations (youth, caregivers and CAS workers) to ensure that the themes and issues are fully explored.

Population Sample

Study sites: Three CAS's

The population sample will be broken down into two sub-categories:

Kinship Triad
- Two youth will be interviewed at each of the three study sites = 6 youth.
- Two caregivers will be interviewed at each of the three study sites = 6 caregivers.
- Two CAS workers will be interviewed at each of the three study sites = 6 CAS workers.

N=18 (6 participants @ 3 study sites = 18)

Foster Care Triad
- Two youth will be interviewed at each of the 3 study sites = 6 youth.
- Two caregivers will be interviewed at each of the 3 study sites = 6 caregivers.
- Two CAS workers will be interviewed at each of the 3 study sites = 6 CAS workers.

N=18 (6 participants @ 3 study sites = 18)

This study is seeking a total sample population of 36 (18 + 18) subjects. More participants may need to be recruited, depending on the level of saturation reached.

A total of 12 interviews (kinship and foster) will be conducted at each of the three study sites.
DATA ANALYSIS

Grounded theory methodology requires that the researcher create a framework for understanding the "story" of kinship placements, which can then be contrasted with the "story" of foster placements. This form of methodology generates themes that are based on an iterative process of reviewing the data (Strauss & Corbin, 1994). Using the "constant comparative analysis" framework, the researcher strives to attain saturation of material related to themes that emerge. The goal is the generation of an overarching conceptual framework. By constantly comparing emerging themes, the researcher can determine whether the same themes are appearing again and again to the point of saturation.

Using NVivo software, Ms. Dill will review the data and develop various themes by inserting elements of the data into different categories. In the context of grounded theory methodology, there are three different types of data analysis: open, axial and selective coding. These types of analyses often occur simultaneously.

OPEN CODING

Strauss and Corbin have defined the concept of open coding as "the analytic process through which concepts are identified and their properties or dimensions are discovered in the data" (Strauss & Corbin, 1998, p. 102). Open coding is the preliminary form of data analysis. There are different methods of open coding, including line-by-line (most detailed), paragraph or whole document. One of the predominant features of this preliminary analysis will be the identification of relationships among themes and issues that are present in the data in order to start developing comparisons between kinship and foster placements.

AXIAL CODING

Axial coding is defined by Strauss and Corbin as "the process of relating categories to their subcategories, termed axial because coding occurs around the axis of a category, linking categories at the level of properties and dimensions" (Strauss & Corbin, 1998, p. 143). At this point in the data analysis process, the data are divided into files with subcategories. For example, one of the categories that may emerge in the study is financial support; its subcategories may include the ways in which financial pressures impact youths' overall satisfaction with their placements. Subcategories might be grouped under the following headings: (a) financial stress in kinship placements; (b) financial stress in foster placements; and (c) the differences and similarities between financial stresses experienced in the two kinds of placements. In essence, this type of coding creates a "filing cabinet" for emerging ideas.

SELECTIVE CODING

The process of selective coding involves "the process of integrating and refining the theory" (Strauss & Corbin, 1998, p.143). This is the final stage in the data analysis process, when the "data becomes the theory" (Strauss & Corbin, 1998, p.143). This is an iterative process whereby the data begin to consolidate and ideas become translated into a theoretical model. In the proposed study, for example, a theoretical concept that might emerge is the difference in children's responses to placements: a kinship placement might sometimes be appropriate, while at other times the structure of a foster placement might be more suitable. This might depend on the child's needs, the situation in the child's current home, and the CAS worker's overall assessment.

MEMOING

Memoing is an important task in the context of data analysis. Memos are used to provide further reflection on and analysis of the interview guide (Charmaz, 2006; Hsiung & Raddon, 2002). They are notes to oneself after an interview that allow the researcher to highlight issues and themes that can be further investigated during the process of data analysis, and also to link key themes and issues. For example, an interview with a youth might indicate issues of placement stability and permanence that may not emerge in the actual text of the
interview, but that can be retained for further analysis. A memo might be seen as a kind of “sticky note” or journal entry about key themes and issues that begin to emerge during the interview process.

An issue that may present itself during the data analysis process is how to deal with the emergence of different views between members of two populations or of divergent views within triads. For example, a youth in a kinship home may describe an experience that is very different from the experience of, say, a caregiver or assigned CAS worker. In such a situation, the practice of memoing and drawing out themes immediately following an interview will be critical to building a foundation of knowledge that will be used in the interview process and in subsequent analysis.

The use of memos allows the researcher to track and describe emerging themes, and also allows for a review of continuously emerging themes. Memos enable the researcher to begin to distinguish the repetition of themes. In turn, this perception helps the researcher to determine a point at which saturation is attained.

13. PARTICIPANTS OR DATA SUBJECTS

Describe the participants that will be recruited, or the subjects about whom personal information will be collected. Where active recruitment is required, please describe inclusion and exclusion criteria. Where the research involves extraction or collection of personal information, please describe from whom the information will be obtained and what it will include.
14. EXPERIENCE

For projects that involve collection of sensitive data, methods that pose greater than minimal risk to participants, or involves a vulnerable population, please provide a brief description of the researcher's/research team's experience with this type of research.

The researcher is Katharine Dill, MSW (Toronto), Res.Dip.S.W. (Diploma in Social Work Research at University of Toronto), doctoral candidate, Faculty of Social Work, University of Toronto.

Ms. Dill is in her fourth year of the doctoral program in the Factor-Inwentash Faculty of Social Work at the University of Toronto. Prior to returning to school, she spent 16 years in child welfare as a front-line staff member, supervisor, CAS trainer and project manager. She has had extensive experience working with kinship and foster caregivers and children and youth in need of protection, as well as with children and youth who are SITUATED in child welfare placements. Because of her years of experience as both a worker and supervisor, she also has a sound understanding of the child welfare workforce and of issues related to front-line workers, foster and kin caregivers and, in particular, children and youth.

In 2003, Ms. Dill participated in the Canadian Incidence Study (CIS) as a site researcher (led by Dr. Nico Trocmé). This provided Ms. Dill with experience in gathering quantitative data on vulnerable populations such as children in need of protection. This study involved collecting data from workers who had completed the CIS study forms, checking the questionnaires for validity and then forwarding the material to the research team in the Faculty of Social Work at the University of Toronto.

More recently, Ms. Dill was a co-investigator, in collaboration with Professor Marion Bogo, on a study that examined clinical supervision in child welfare practice. This study has provided Ms. Dill with significant exposure to the concepts of qualitative interviewing, data analysis and subsequent detailing of the findings in journal publications. In February 2008, Prof. Bogo and Ms. Dill's paper, entitled "Moving Beyond the Administrative: Supervisory Perspectives on Clinical Supervision in Child Welfare," was accepted for publication by the Journal of Public Child Welfare. Prof. Bogo and Ms. Dill are currently working on a second publication from this qualitative study.

Ms. Dill recently completed a qualitative interviewing course with Dr. Ping Chun Hsiung in the Department of Sociology at the University of Toronto, receiving an “A” grade.

Ms. Dill's doctoral thesis committee includes Dr. Robert MacFadden, Dr. Aron Shlonsky and Dr. Lynn McDonald, all from the Faculty of Social Work at the University of Toronto, as well as Dr. Robert Flynn from the Department of Psychology at the University of Ottawa. The members of this committee will ensure rigour and adherence to the ethical obligations of this study.
15. RECRUITMENT

Where there is formal recruitment, please describe how and from where the participants will be recruited. Where participant observation is to be used, please explain the form of insertion of the researcher into the research setting (e.g. living in a community, visiting on a bi-weekly basis, attending organized functions).

Attach a copy of any posters, advertisements, flyers, letters, or telephone scripts to be used for recruitment.

Recruitment Strategies

Agency Approval

After this study receives approval by the Health Sciences Research Ethics Board, the Executive Directors at each of the three study sites must first consider their CAS’s participation in this prospective study. If approved, the research must be vetted through the research ethics committees at each of the three CASs. Each CAS will receive a copy of the approval letter from the University of Toronto Health Sciences Research Ethics Board.

Following the approval process at each CAS, Ms. Dill will visit the CAS agencies and distribute flyers. Her goal is to promote the purpose and content of the study to each study site. She will encourage staff members to participate in the study and to disseminate the recruitment flyer to CAS workers, caregivers and youth. CAS staff persons will only be asked to post the flyers and will not be involved in recruiting or screening. CAS staff will not be informed about who does or does not participate in the research.

Ms. Dill will contact each study participant directly. She will call each potential study participant and invite him or her to the office for an individual interview session. The interviews will be spaced in a way that attempts to ensure the privacy of each study participant.

When Ms. Dill makes contact with caregivers, she will invite both caregivers to attend the interview. She will ensure that each individual signs his or her own consent form.

Ms. Dill will pilot her interview questions with youth by interviewing two youth at a particular study site. Ms. Dill will use this opportunity to refine the interview questions with these two youth.

Please see attached flyers.

16. COMPENSATION

(a) Will participants receive compensation for participation?
(b) If Yes, please provide details.

- CAS workers will be compensated with a $20.00 Tim Hortons gift certificate.
- Caregivers will be compensated with a $20.00 Wal-Mart gift certificate.
- Youth will be compensated with EITHER a $20.00 iTunes gift card OR a $20.00 movie pass.

All caregivers will be offered financial compensation for any child-care costs up to a maximum of $40.00. Caregivers will be reimbursed for their travel costs. For Caregivers who are traveling from outside city limits, where there is no public transportation available, Ms. Dill will compensate him or her for their mileage at a rate of .40 cents per kilometre.

Youth will be reimbursed for their travel costs. If the interview must occur in the evening and there are concerns about the personal safety of the youth, Ms. Dill will arrange for a CAS volunteer driver to provide the youth with round trip transportation. Ms. Dill will compensate the agency for any mileage-related costs. Ms. Dill will be paying for the costs of these incentives.

It is clearly articulated in all of the information letters and consent forms that even if an individual chooses to withdraw from the study, they are still allowed to keep their gift certificate. This is reiterated in the risks and benefits section.

Participants will be told that if they choose not to answer any or all interview questions, that there will be no consequences and they will still be able to maintain their recruitment incentives (i.e. gift certificate). This is clearly delineated in the information letter as well as in the consent form. Youth and caregivers will be told that, if they withdraw from the study, they will continue to receive the usual child welfare related services from their respective agencies.

(c) Where there is a withdrawal clause in the research procedure, if participants choose to withdraw, how will you deal with compensation?

Participants will be told that if they choose not to answer any or all interview questions, that there will be no consequences and they will still be able to maintain their recruitment incentives (i.e. gift certificate). This is clearly delineated in the information letter as well as in the consent form. Youth and caregivers will be told that, if they withdraw from the study, they will continue to receive the usual child welfare related services from their respective agencies.
SECTION C – DESCRIPTION OF THE RISKS AND BENEFITS OF THE PROPOSED RESEARCH

17. POSSIBLE RISKS

1. Indicate if the participants as individuals or as part of an identifiable group or community might experience any of the following risks by being part of this research project:

   (a) Physical risks (including any bodily contact or administration of any substance)? Yes ☒ No ☐

   (b) Psychological/emotional risks (feeling uncomfortable, embarrassed, anxious or upset)? Yes ☒ No ☐

   (c) Social risks (including possible loss of status, privacy and/or reputation)? Yes ☐ No ☒

   (d) Is there any deception involved? (See Debriefing, #21) Yes ☐ No ☒

2. If you answered Yes to any of the above, please explain the risks, and describe how they will be managed and/or minimized.

All three study populations (CAS workers, caregivers and youth) require a risk management strategy that relates to the following two conditions:

1. Risk Condition One: the individual in the interview becomes emotionally distraught as a result of the information he or she has shared during the course of the study interview;

2. Risk Condition Two: Ms. Dill is required to make a formal report to a designated official if any concerns arise that relate to issues of child abuse or neglect, danger to oneself or others, or matters that require testimony in court.

The following is a risk management strategy for all three study populations that are linked to these two existing conditions. The relevant risk management strategies are linked to the study information letters and consent forms. The information letters and consent forms all contain the same qualifiers: "confidentiality will be upheld as required by law. These situations could include issues of child abuse or neglect, danger to oneself or others, or matters that require testimony in court proceedings".

Youth:

Risk Condition One: There is the possibility that the youth may become upset relating information in the interview. Ms. Dill will not share this information with anyone unless the youth provides express permission to do so in his or her youth notification letter. Ms. Dill will ensure that all youth receive a copy of the Kids Help Phone line number in case the youth wishes to talk to someone anonymously about any feelings.

Risk Condition Two: youth are informed throughout the study process that Ms. Dill is required to make a formal report to a designated official if any concerns arise that relate to issues of child abuse or neglect, danger to oneself or others, or matters that require testimony in court.

Caregivers

Risk Condition One: if the caregiver requires any emotional support following the interview, he or she can speak directly with their assigned CAS worker.
Risk Condition Two: all caregivers are informed throughout the study process that Ms. Dill is required to make a formal report to a designated official if any concerns arise that relate to issues of child abuse or neglect, danger to oneself or others, or matters that require testimony in court.

CAS workers

Risk Condition One: CAS workers may be emotionally upset by some of the issues raised in their interviews. However, it should be noted that CAS workers are trained professionals who, on a routine basis, manage the emotional impact of many issues related to the trauma of abuse and/or neglect suffered by children and youth on their caseload. The possibility of an individual suffering from an emotional impact resulting from an interview with Ms. Dill is minimal. However, if a CAS worker is upset following the interview, he or she will be provided with the phone number for their CAS’s employee assistance program as a way of providing them with a venue to discuss their concerns.

Risk Condition Two: All CAS workers are informed throughout the study process that Ms. Dill is required to make a formal report to a designated official if any concerns arise that relate to issues of child abuse or neglect, danger to oneself or others, or matters that require testimony in court.

18. POSSIBLE BENEFITS

Discuss any potential direct benefits to the participants from their involvement in the project. Comment on the (potential) benefits to the scientific/scholarly community or society that would justify involvement of participants in this study.

There are no direct benefits for individual participation in this study.

All participants will receive some minimal form of incentive (iTunes gift card OR MOVIE PASS for youth; Wal-Mart gift certificate for caregivers; Tim Hortons gift certificate for CAS workers) to participate.

The possible benefit for all participants is the realization that their perspectives will contribute significantly to an understanding of both kinship and foster placements. The benefits to the scholarly community and child welfare practice that justify the participation of individuals in this study include the following:

The study information will be used to generate an in-depth understanding of the underlying issues relating to both types of placements (kinship and foster care) and, in turn, to develop a qualitative comparison between these two kinds of placement. The results from the study will generate further knowledge that can support the development of child welfare policy and enhance research in this area. The data may also lead to further knowledge dissemination and professional development among child welfare practitioners. Given that this is one of the first exploratory, qualitative studies of its kind in Canada, it is anticipated that the study findings will yield information for child welfare practitioners about the following related issues:

• The emotional, physical and social supports required to ensure the long-term stability of kinship placements as compared to foster placements.
• The different requirements for training foster parents versus kinship caregivers.
SECTION D – THE INFORMED CONSENT PROCESS

19. THE CONSENT PROCESS

Describe the process that the investigator(s) will be using to obtain informed consent. Please include the experience of the team member with this participant population and/or training that this person will receive prior to recruitment. If there will be no written consent form, please explain (e.g. discipline, cultural appropriateness, etc.). Please note, it is the quality of the consent, not the format that is important. If the research involves extraction or collection of personal information from a data subject, please describe how consent from the individuals or authorization from the custodian will be obtained.

For information about the required elements in the information letter and consent form, please refer to [http://www.research.utoronto.ca/ethics/eh_best.html](http://www.research.utoronto.ca/ethics/eh_best.html).

Where applicable, please attach a copy of the Information Letter/Consent Form, the content of any telephone script, letters of administrative consent or authorization and/or any other material which will be used in the informed consent process.

The following documents have been developed to ensure the informed and voluntary consent (or assent in the case of youth) of those participating in the study:

Information letters include:

- INFORMATION LETTER TO CAS WORKERS
- INFORMATION LETTER TO CAREGIVERS (NOT OF PARTICIPATING YOUTH)
- INFORMATION LETTER TO YOUTH
- YOUTH NOTIFICATION LETTER

CONSENT FORMS INCLUDE:

- CAS WORKER INFORMED CONSENT
- CAREGIVER INFORMED CONSENT
- YOUTH ASSENT

A number of steps will be taken to ensure informed, voluntary consent or assent (in the case of youth) of those participating in the study. At all stages of the research process, Ms. Dill will ensure that participants understand the information that they have been given.

In communications with youth, all materials will be explained in ways that fit their comprehension levels. the confidentiality of the study and the risks and benefits of taking part will be explained. youth will be told that they do not have to participate, can withdraw at any time, and can also refrain from answering any or all questions.

Youth will be asked a series of questions to ensure that they understand the consent form that they are signing. Ms dill will read both the information letter and the consent form out loud to the participant. following this, Ms. Dill will ask the following questions:
• Can you tell me what this research is about?
• Can you tell me if it is okay to say no to me if you don't want to participate in this research?
• What is the reward for participating?
• What will happen if you decide not to go through with the research?
• How old do you need to be to participate in this research?
• are you given the choice to decide if you want to let anyone know if you are participating in this study?
• What happens if you don’t want to be audio-taped in the interview?
• Are you allowed to see what you said in your interview when I have typed it up?
• When I write up my report, will I tell people that you said certain things?
• Will you get your money back for taking the subway or bus to get to the interview?
• Are there certain things that I can't keep confidential and, if so, what are those things that I can't keep private?
• What happens if I am asked to go to court with my notes?
• Will your CAS worker, caregiver or parent know about your participation in this study?

Ms. Dill will answer any questions about the study and will leave printed information about who may be contacted if subsequent questions or concerns develop. Each participant will be told that participation is voluntary. The potential benefits and risks of participation will be explained and set out in the information letters and the consent and assent forms. The letters and forms will stress that participants can withdraw at any time, without explanation and without consequences, and that participants do not have to answer any or all of the questions in the interview. All relevant materials (information sheets, surveys and other items) will be translated if necessary.

All participants who sign a consent form will be advised that they will be provided with a copy of the consent form. Youth will be asked for their consent to participate in the study

All participants will be advised that the interviews will be audio-taped, but if an individual would prefer not to be taped then Ms. Dill will take handwritten notes that will be shredded following transcription of the interview material. The consent form asks the participant whether they would like to be audio-taped or not.

In the information letter and subsequent consent forms, participants will be given the opportunity to indicate (via a check box) whether they would like to review their transcripts. If the individual indicates if the respondent would like to review their transcribed notes, Ms. Dill will ensure that the participant is given the opportunity to review the notes either in person or via email.
20. CONSENT BY AN AUTHORIZED PARTY

If the participants are children, or are not competent to consent, describe the proposed alternate source of consent, including any permission/information letter to be provided to the person(s) providing the alternate consent as well as the assent process for participants.

The youth will sign an consent form to ensure that they understand the process that they are participating in. A notification letter has been developed that asks the youth if there is anyone he or she wishes to advise about their participation in the study.

Ms. Dill consulted with Ms. Jill Parsons the Health Sciences Research Ethics Board in the development of this ethics protocol, specifically as it relates to the consent and consent for youth.

21. DEBRIEFING

(a) If deception will be used in the research study, please explain what information/feedback will be provided to participants after participation in the project.

Please provide a copy of the written debriefing form, if applicable.

(b) How will participants be informed of study results?

Participants will be informed about the results of the study via the following strategies:

• A one-page summary of the findings will be developed for CAS workers, caregivers and youth, resulting in a total of three separate summaries written for each of the three target populations. This summary sheet will be either mailed or emailed to all study participants. The consent form will ask each individual whether they would like to receive a copy of the findings and, if so, would he/she prefer to have a hard copy mailed to them or the findings sent via email.
• A summary of the findings will be submitted to the quarterly journal of the Ontario Association of Children's Aid Societies. This publication will include key findings from the study and future directions that have emerged. This journal publication will also be distributed to all study participants, if they so desire. CAS workers, in particular may choose to have a copy of these findings sent to them.

22. PARTICIPANT WITHDRAWAL

(a) Where applicable, please describe how the participants will be informed of their right to withdraw from the project. Outline the procedures which will be followed to allow them to exercise this right.

All study participants have the right to withdraw from the study at any time and can inform Ms. Dill of this decision at any point in the study process, starting from the initial recruitment through participation in the interview, or at some point after the interview, when they may choose to have their taped interviews erased. All participants will be advised throughout the study process that they have the right to withdraw at any time without consequence. Individuals who choose to withdraw from the study will still receive their gift certificate. If individuals choose to withdraw, this choice will remain confidential and will not be reported to anyone else. All of this information is detailed in the information letters for youth, caregivers and CAS workers, and is also provided in the letters of consent.

(b) Indicate what will be done with the participant’s data and any consequences which withdrawal may have on the participant.

Upon withdrawal, all relevant data will be destroyed. Tapes will be erased, and face sheets will be shredded and destroyed immediately.

All the interviews will be stored in a locked filing cabinet in a locked room at the University of Toronto. No information will be kept at any cas study site. The computer will be password protected so that no one other than Ms. Dill can review this material.

(c) If participants will not have the right to withdraw from the project at all, or beyond a certain point, please explain.
SECTION E – CONFIDENTIALITY AND PRIVACY

23. CONFIDENTIALITY

(a) Will the data be treated as confidential? Yes ☑ No ☐

(b) Describe the procedures to be used to ensure anonymity of participants or informants, where applicable, or the confidentiality of data during the conduct of research and dissemination of results.

Participants’ names will not be used at any stage of the research. The interview is confidential, and each respondent will be identified by a number code that will ensure privacy. This information is included in the information letters for the study and the consent forms. Ms. Dill has also specified that, in order to ensure the confidentiality of all participants, any summary of the research findings will not contain any transcribed text.

(c) Explain how written records, video/audio tapes and questionnaires will be secured, how long they will be retained, and provide details of their final disposal or storage.

The written records will be destroyed and the audio tapes erased immediately upon transcription. All paper documents will be shredded. Written documents will be destroyed within seven years of completion of the study (2016).

(d) If participant anonymity or confidentiality is not appropriate to this research project, please explain.

24. PRIVACY REGULATIONS

For research involving extraction or collection of personal information, provincial, national and/or international laws may apply. My signature as Principal Investigator, in Section G of this protocol form, confirms that I understand and will comply with all relevant laws governing the collection and use of personal information in research.
SECTION F – CONTINUING REVIEW OF ONGOING RESEARCH

RISK MATRIX: REVIEW TYPE BY GROUP VULNERABILITY AND RESEARCH RISK – check one:

<table>
<thead>
<tr>
<th>Group Vulnerability</th>
<th>Research Risk</th>
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<tbody>
<tr>
<td></td>
<td>Low</td>
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<tr>
<td>Low</td>
<td>1 ☐</td>
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<tr>
<td>Medium</td>
<td>1 ☐</td>
</tr>
<tr>
<td>High</td>
<td>2 ☐</td>
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</table>

See the Instructions for Ethics Review Protocol Submission Form for detailed information about the Risk Matrix.

Briefly explain/justify the level of risk and group vulnerability reported above (max 100 words):
The group vulnerability and research risk for this project are HIGH/medium. There is no coercion or deception involved in this study. However, there is a potential risk for participants, particularly youth and caregivers, to become emotionally distraught because of some of the information that they may disclose in the interview. This study therefore requires a full review by the ethics review board to ensure that all aspects of risks to participants have been considered and dealt with adequately.

Review Type

Based on the level of risk, please submit the appropriate number of copies of the Protocol Submission Form for Review Type:

Risk level = 1: Expedited Review          Risk level = 2 or 3: Full Review

Information about individual REBs, including the number of copies required for each review type, can be found here: www.research.utoronto.ca/ethics/eh_rebs.html

Please note that the final determination of Review Type and program of Continuing Review will be made by the University of Toronto REB and the Ethics Review Office.
SECTION G – SIGNATURES

All researchers and their respective Departmental Chair/Dean or designate must sign below:

As the **Investigator** on this project, my signature confirms that I will ensure that all procedures performed under the project will be conducted in accordance with all relevant University, provincial, national and international policies and regulations that govern research involving human participants. Any deviation from the project as originally approved will be submitted to the Research Ethics Board for approval prior to its implementation.

For **student researchers**, my signature confirms that I am a registered student in good standing with the University of Toronto. My project has been reviewed and approved by my advisory committee (where applicable). If my status as a student changes, I will inform the Ethics Review Office.

| Signature of Investigator: see electronic signature on amendment form-signature cannot be embedded into this form. | Date: July 20, 2009 |

For **Graduate Students** the signature of the **Faculty Supervisor** is required. For **Post-Doctoral Fellows and Visiting Professors or Researchers**, the signature of the **Faculty Sponsor** is required.

As the **Faculty Supervisor** of this project, my signature confirms that I have reviewed and approve the scientific merit of the research project and this ethics protocol submission. I will provide the necessary supervision to the student researcher throughout the project, to ensure that all procedures performed under the research project will be conducted in accordance with relevant University, provincial, national or international policies and regulations that govern research involving human subjects. This includes ensuring that the level of risk inherent to the project is managed by the level of research experience that the student has, combined with the extent of oversight that will be provided by the Faculty Supervisor and/or On-site Supervisor.

As the **Faculty Sponsor** for this project, my signature confirms that I have reviewed and approve of the research project and will assume responsibility, as the University representative, for this research project. I will ensure that all procedures performed under the project will be conducted in accordance with all relevant University, provincial, national or international policies and regulations that govern research involving human participants.

| Signature of Faculty Supervisor/Sponsor: see electronic signature in amendment form. Signature cannot be embedded into this form | Date: |

As the **Departmental Chair/Dean**, my signature confirms that I am aware of the proposed activity. My administrative unit will follow guidelines and procedures which ensure compliance with all relevant University, provincial, national or international policies and regulations that govern research involving human participants. My signature also reflects the willingness of the department, faculty or division to administer the research funds, if there are any, in accordance with University, regulatory agency and sponsor agency policies.
Name of Departmental Chair/Dean (or designate):

<table>
<thead>
<tr>
<th>Signature of Departmental Chair/Dean:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(or designate)</td>
<td></td>
</tr>
</tbody>
</table>
Information Letter to Children’s Aid Society Workers

Research Project: Finding the Best Home

Dear Sir or Madam:

I am writing to ask for your help with my doctoral research, which I am conducting as a student of the Factor-Inwentash Faculty of Social Work, University of Toronto. The goal of this research is to explore the similarities and differences between kinship and foster placements.

What is the purpose of the project?

In Ontario, an increasing number of child welfare agencies are using kinship (i.e. extended family and community) placements as an alternative to foster care. My study plans to examine the similarities and differences between these two kinds of placements. This study will help those in the child welfare field to identify the children and youth who will be best served by kinship care and those who might receive greater benefit from foster care.

Who is being asked to participate and what will participants do?

Children’s Aid Society (CAS) workers, caregivers and youth (ages 12 years and older) from various agencies across Ontario will be participating in this study.

As the researcher, I will be interviewing participants. I will be asking you a series of questions related to your understanding of kinship and/or foster placements as they relate to your work.

Time and place of the interview

The interview will take place at your CAS office at a time that best suits you. The interview will be approximately 1.5 hours in length.
Taping, transcription and keeping your interview safe

The interview will be taped and transcribed, and all identifying information will be removed from the transcribed notes. All of the tapes will be destroyed immediately after transcription. The interview will be stored in a locked filing cabinet in a locked room at the University of Toronto. No information will be kept at your CAS office.

If you have concerns about the interview being taped, I will instead take handwritten notes that will be shredded immediately after the notes have been transcribed. You can indicate your preference on your consent form.

If you decide to participate in this study, you can also indicate on your consent form whether you would like to review your interview transcripts at a later date.

All of the information collected will be treated as confidential. The names of study participants, including your name, will not be released in any material related to the study. Transcribed interview notes will not contain names, only numbers, to ensure proper anonymity. In order to ensure the protection and confidentiality of everyone who participates in the study, no quotations will be included in the summary of study findings.

What are the risks and benefits of the study?

There are no direct benefits to participating in the study. An indirect benefit is the contribution that you will make to our emerging knowledge of kinship and foster placements. An incentive for your participation in the study is a $20.00 gift certificate for Tim Hortons.

There are no physical risks inherent to participation in the study. One effect that may be experienced is emotional upset from sharing your perspective about these issues. If you are upset in any way, please let me know so that I can provide you with details of your CAS employee assistance program.

Is the study voluntary and confidential?

Participation in the study is completely voluntary and every attempt will be made to maintain confidentiality. Confidentiality will be upheld except as required by law. These situations could include issues of child abuse or neglect, danger to oneself or others, or matters that require testimony in court proceedings. If there is a court case that requires me to hand over my transcribed notes from the study then I will need to comply with the court’s request.

I will not be talking with your supervisor or caregivers or youth on your caseload about your participation or non-participation in the study.

Your decision to participate is voluntary, and your participation will remain confidential with the exceptions detailed above. Any topic that we discuss during this research project and anything that you say will in no way affect your working relationship with your employer. You are free not to answer any or all of the questions.
You may decide not to participate in or to withdraw from the study at any time without any kind of negative consequence. If you decide to withdraw from participation in the research, you are still entitled to keep your Tim Hortons gift certificate. Withdrawal from the study will not be reported to your supervisor and should not affect your working relationship at your CAS.

Who should you contact if you have concerns or questions?

If you have any questions at any time, you can reach me by email at katharine.dill@utoronto.ca or by phone at 416-519-6151. My doctoral thesis supervisor is Robert MacFadden, 416-978-5818.

If you need to debrief with someone following the interview, I will provide you with the number of your CAS employee assistance program.

What are your rights?

You waive no legal rights by participating in this study. If you have questions about your rights as a research participant, please contact the Office of Research Ethics at the University of Toronto by phone at (416)-946-3273 or by email at ethics.review@utoronto.ca.

Results of the study

A summary of the results of this study will be made available to participants in various ways, including an anticipated publication in the quarterly journal of the Ontario Association of Children’s Aid Societies. If you wish, the key findings can be sent to you electronically or by regular mail.
The opinions that you will provide as a CAS worker are an important aspect of this study. I hope you will agree to participate.

Yours truly,

Katharine Dill, PhD Candidate
Factor-Inwentash Faculty of Social Work
University of Toronto
246 Bloor Street West
Toronto, Ontario
M5S 1A1
Phone: 416-519-6151
Email: katharine.dill@utoronto.ca
Informed Consent for Children’s Aid Society Workers

Research Project: Finding the Best Home

Researcher: Katharine Dill, PhD candidate under the supervision of Dr. Robert MacFadden, Factor-Inwentash Faculty of Social Work at the University of Toronto.

I, ______________________________, understand that this is a study being conducted by Katharine Dill, doctoral student in the Factor-Inwentash Faculty of Social Work, University of Toronto. The study is about the differences and similarities between kinship and foster placements in the field of child welfare, and the study has been explained to me by Ms. Dill.

I understand that the interview with Ms. Dill will take about 1.5 hours.

I understand that I am free not to participate in the study and that I can leave at any time during the course of the interview. I can also choose not to answer any or all questions without consequence.

I have been made aware of the potential risks and benefits associated with my participation in this study. I understand that, if I want to speak with someone about personal issues that arise during the interview with Ms. Dill, I can contact my employee assistance program and Ms. Dill will provide me with the phone number for this program.

All of my questions about the study have been answered to my satisfaction. I understand that my participation in the study is completely voluntary and every attempt will be made to maintain confidentiality. Confidentiality will be upheld except as required by law. These situations could include issues of child abuse or neglect, danger to oneself or others, or matters that require testimony in court proceedings. I understand that if there is
a court case that requires Ms. Dill to hand over her transcribed notes from the study then she will need to comply with the court’s request.

I further understand that I can withdraw from the study at any time without explanation and with no consequences. If I choose to withdraw from the study, I can still keep my Tim Hortons gift certificate. I am also aware that, if I choose to withdraw from the study, at either the beginning or part way through, no supervisor or senior manager will be provided with any specific information relating to my interview or my decision to withdraw.

I understand that Ms. Dill will not recruit my supervisor, or any youth or caregivers on my current caseload.

I understand that the interview will be taped and transcribed and that all identifying information will be removed from the transcripts. I understand that all of the taped interviews will be destroyed immediately after they have been transcribed. I understand that the interview will be stored in a locked filing cabinet in a locked room at the University of Toronto. No information will be kept at my Children’s Aid Society office. The electronic file of my interview will be password protected so that no one other than Ms. Dill can review the data from this study.

I understand that if I have concerns about the taping of the interview, Ms. Dill will instead take handwritten notes that will be shredded immediately after transcription.

I am aware that Ms. Dill will make me a copy of my consent form to take with me following this interview.

I consent to Ms. Dill audio-taping the interview:
Yes ______
No ______

I would like to see the transcripts of my interview at a later date:
Yes ______
No ______

I would like to receive a copy of the study findings:
Yes ______
No ______

If yes, please indicate how you would like the findings to be delivered to you:
If you wish to receive an email copy of the report, please provide your email address:
Email address: ______________________________
If you wish to receive a hard copy of the report, please provide your mailing address:
Mailing address: ______________________________
______________________________
______________________________
I hereby consent to participate in this study.

__________________________________________  ____________________________
Name of Children’s Aid Society worker       Signature
(please print)

__________________________________________  ____________________________
Name of person who obtained consent       Signature
(please print)

Date: ____________________________

If you have any questions about this study, please contact:
Katharine Dill
Factor-Inwentash Faculty of Social Work
University of Toronto
246 Bloor Street West
Toronto, Ontario
M5S 1A1
Children’s Aid Society Worker Interview Guide

1. What are the issues and challenges that children and youth encounter when entering the child welfare system?

2. What are the challenges for children and youth when they exit the child welfare system?

3. What are the similarities between kinship and foster placements?

4. What are the differences?

5. If you could change one thing about child welfare placements for children and youth, what would it be?
Children’s Aid Society Worker Demographics
All of the following information will be kept confidential by the researcher.
Name: ______________________________
Age: ______________________________

Educational background
List educational qualifications: ______________________________
Length of time as a child welfare worker (in years): ______________________________

Contact information
CAS address: ______________________________

________________________________________
________________________________________
________________________________________

Telephone (day): ______________________________
Email address: ______________________________

************************************************************************
Administrative use only
Code number: ______________________________
Information Letter to Caregivers

Research Project: Finding the Best Home

Dear Sir or Madam:

I am writing to ask for your help with my doctoral research, which I am conducting as a student of the Factor-Inwentash Faculty of Social Work, University of Toronto. The goal of this research is to explore the similarities and differences between kinship and foster placements.

What is the purpose of the project?

In Ontario, an increasing number of child welfare agencies are using kinship (i.e. extended family and community) placements as an alternative to foster care. My study plans to examine the similarities and differences between these two kinds of placements. This study will help those in the child welfare field to identify the children and youth who would be best served by kinship care and those who might receive greater benefit from foster care.

Who is being asked to participate and what will participants do?

Children’s Aid Society (CAS) workers, caregivers and youth (ages 12 years and older) from various agencies across Ontario will be participating in this study.

As the researcher, I will be interviewing participants. I will be asking you a series of questions related to your understanding of kinship and/or foster placements as they relate to your work.

Time and place of the interview

The interview will take place at your CAS office at a time that best suits you. The interview will be approximately 1.5 hours in length.
Interview questions
Examples of interview questions that may be asked include:

- What has your experience as a caregiver been like?
- What would you like to change about your experience as a caregiver?
- What changes need to be made for youth in care?
- From your perspective, what are the differences between foster and kin placements?

You can set the direction for this interview, and I invite you to come to the interview with questions or issues that you feel are relevant to the study.

Taping, transcription (typed-up notes) and keeping your interview safe

The interview will be taped and transcribed, and all identifying information will be removed from the typed-up notes. All of the tapes will be destroyed immediately after transcription. The interview will be stored in a locked filing cabinet in a locked room at the University of Toronto. No information will be kept at your CAS office.

If you have concerns about the interview being taped, I will instead take handwritten notes that will be shredded immediately after the notes have been transcribed. You can indicate your preference on your consent form.

If you decide to participate in this study, you can also indicate on your consent form whether you would like to review your interview transcripts at a later date.

All of the information collected will be treated as confidential. The names of study participants, including your name, will not be released in any material related to the study. Transcribed interview notes will not contain names, only numbers, to ensure proper anonymity. In order to ensure the protection and confidentiality of everyone who participates in the study, no quotations will be included in the summary of study findings.

What are the risks and benefits of the study?

An indirect benefit is the contribution that you will make to our emerging knowledge of kinship and foster placements. An incentive for your participation in the study is a $20.00 gift certificate for Wal-Mart.

There are no physical risks inherent to participation in the study. One effect that may be experienced is emotional upset from sharing your perspective about these issues. If you are upset in any way, then you can contact your CAS worker.

Is the study voluntary and confidential?

Participation in the study is completely voluntary and every attempt will be made to maintain confidentiality. Confidentiality will be upheld except as required by law. These situations could include issues of child abuse or neglect, danger to oneself or others, or matters that require testimony in court proceedings. If there is a court case that requires me to hand over my transcribed notes from the study then I will need to comply with the court’s request.
I will not be talking with your CAS worker or youth in your care about your participation or non-participation in the study.

Your decision to participate is voluntary, and your participation will remain confidential with the exceptions detailed above. Any topic that we discuss during this research project and anything that you say will in no way affect your working relationship with your CAS. You are free not to answer any or all of the questions.

You may decide not to participate in or to withdraw from the study at any time without any kind of negative consequence. If you decide to withdraw from participation in the research, you are still entitled to keep your Wal-Mart gift certificate. Withdrawal from the study will not be reported to your CAS worker and will not affect your working relationship at your CAS.

**Expenses**

If you agree to participate in the study, you will be compensated for care-giving costs up to $40.00. You will also receive reimbursement for any subway or bus fares. If you are driving from outside city limits, and no public transportation is available, you will be paid for your mileage at a rate of 40 cents per kilometre.

**Who should you contact if you have concerns or questions?**

If you have any questions at any time, you can reach me by email at katharine.dill@utoronto.ca or by phone at 416-519-6151. My doctoral thesis supervisor is Robert MacFadden, 416-978-5818.

If you need to debrief with someone following the interview, you may choose to contact your CAS worker.

**What are your rights?**

You waive no legal rights by participating in this study. If you have questions about your rights as a research participant, please contact the Office of Research Ethics at the University of Toronto by phone at (416)-946-3273 or by email at ethics.review@utoronto.ca.

**Results of the study**

A summary of the results of this study will be made available to participants in various ways, including an anticipated publication in the quarterly journal of the Ontario Association of Children’s Aid Societies. If you wish, the key findings can be sent to you electronically or by regular mail.
The opinions that you will provide as a caregiver are an important aspect of this study. I hope you will agree to participate.

Yours truly,

Katharine Dill, PhD Candidate
Factor-Inwentash Faculty of Social Work
University of Toronto
246 Bloor Street West
Toronto, Ontario
M5S 1A1
Phone: 416-519-6151
Email: katharine.dill@utoronto.ca
Informed Consent for Caregivers

Research Project: Finding the Best Home

Researcher: Katharine Dill, PhD candidate under the supervision of Dr. Robert MacFadden, Factor-Inwentash Faculty of Social Work at the University of Toronto.

I, ______________________________, understand that this is a study being conducted by Katharine Dill, doctoral student in the Factor-Inwentash Faculty of Social Work, University of Toronto. The study is about the differences and similarities between kinship and foster placements in the field of child welfare, and the study has been explained to me by Ms. Dill.

I understand that the interview with Ms. Dill will take about 1.5 hours.

I understand that I am free not to participate in the study and that I can leave at any time during the course of the interview. I can also choose not to answer any or all questions without consequence.

I have been made aware of the potential risks and benefits associated with my participation in this study. I understand that, if I want to speak with someone about personal issues that arise during the interview with Ms. Dill, I can speak with my Children’s Aid Society worker or whomever I choose to gain support from.

I have been advised by Ms. Dill that I will be compensated to a maximum of $40.00 for caregiving costs and will be reimbursed for the cost of subway or bus fares. I am aware that if I am traveling from outside of the city limits and public transportation is not available, Ms. Dill will compensate me with 40 cents per kilometre to cover the cost of gas.
All of my questions about the study have been answered to my satisfaction. I understand that participation in the study is completely voluntary and every attempt will be made to maintain confidentiality. Confidentiality will be upheld except as required by law. These situations could include issues of child abuse or neglect, danger to oneself or others, or matters that require testimony in court proceedings. I understand that my participation is completely voluntary and that my decision to participate or not in the study will be kept confidential. Exceptions to the confidentiality of my interview include situations that are reportable by law. These matters might include cases of child abuse, danger to myself or others, or matters that require testimony in court proceedings. I understand that if there is a court case that requires Ms. Dill to hand over her transcribed notes from the study then she will need to comply with the court’s request.

I further understand that I can withdraw from the study at any time without explanation and with no consequences. If I choose to withdraw from the study, I can still keep my Wal-Mart gift certificate. I am also aware that, if I choose to withdraw from the study, my Children’s Aid Society worker or his or her supervisor will not be provided with any specific information relating to my interview or my decision to withdraw from the study.

I understand that Ms. Dill will not recruit people that I know from my CAS including other CAS workers, caregivers or youth.

I understand that the interview will be taped and transcribed and that all identifying information will be removed from the transcripts. I understand that all of the taped interviews will be destroyed immediately after they have been transcribed. I understand that the interview will be stored in a locked filing cabinet in a locked room at the University of Toronto. No information will be kept at my Children’s Aid Society office. The electronic file of my interview will be password protected so that no-one other than Ms. Dill can review the material from this study.

I understand that if I have concerns about the taping of the interview, Ms. Dill will instead take handwritten notes that will be shredded immediately after transcription.

I am aware that Ms. Dill will make me a copy of my consent form to take with me following this interview.

I consent to Ms. Dill audio-taping the interview:

Yes  _____
No   _____
I would like to see the transcripts of my interview at a later date:
Yes  _____
No   _____

I would like to receive a copy of the study findings:
Yes  _____
No   _____

If yes, please indicate how you would like the findings to be delivered to you:
If you wish to receive an email copy of the report, please provide your email address:
Email address: ______________________________
If you wish to receive a hard copy of the report, please provide your mailing address:
Mailing address:  ______________________________
                        ______________________________
                        ______________________________
I hereby consent to participate in this study.

______________________________  ______________________________
Name of caregiver     Signature
(please print)

______________________________  ______________________________
Name of person who obtained consent   Signature
(please print)

Date: _________________________

If you have any questions about this study, please contact:
Katharine Dill
Factor-Inwentash Faculty of Social Work
University of Toronto
246 Bloor Street West
Toronto, Ontario
M5S 1A1
Caregiver Interview Guide

1. As a caregiver, what kind of experiences have you had with Children’s Aid Societies?

2. If you were asked to name one thing that helps children and youth when they enter the child welfare system, what would it be?

3. If you could change one thing about your experience as a caregiver within the child welfare system, what would it be?

4. What is the most important thing that child welfare professionals need to understand about kinship or foster placements?

5. What are the similarities between kinship and foster placements?

6. What are the differences?

7. What types of things need to change when children and youth come into care?
**Caregiver Demographics**

All of the following information will be kept confidential by the researcher.

Name: ______________________________
Age: ______________________________
Length of time as a kinship or foster caregiver: ______________________________

Contact information

Address: ______________________________
          ______________________________
          ______________________________

Telephone (day): ______________________________
Telephone (evening): ______________________________
Email address: ______________________________

**************************************************************************

Administrative use only
Code number: ______________________________
Information Letter to Youth

Research Project: Finding the Best Home

Dear (Name of Youth)

I am writing to ask for your help with my doctoral research, which I am conducting as a student of the Factor-Inwentash Faculty of Social Work, University of Toronto. The goal of this research is to understand what is the same and different about kinship and foster care placements.

In order to participate in the study, you must be 12 years of age or older.

What is the purpose of the project?

In Ontario, there are a lot of CAS’s that are using kinship (i.e., extended family and community) placements as an alternative to foster care. My study plans to look at the similarities and differences between these kinds of homes. If we know more about these kinds of placements, then CAS workers can make better decisions about which kinds of homes work best for youth.

Who is being asked to participate and what will participants do?

Children’s Aid Society (CAS) workers, caregivers and young people (ages 12 years and older) from various agencies across Ontario will be taking part in this study.

As the researcher, I will be talking to participants about his or her understanding and experiences of kinship and/or foster placements.

Time and place of the interview

The interview will take place at your CAS office at a time that best suits you. The interview will be approximately 1.5 hours in length.

Telling other people

It is up to you whether you would like me to tell anyone about your participation in the study. I will ask you to put this information on a form called a “youth notification letter.” I will give you a copy of the notification letter that also contains the Kids Help Phone number.
If you don’t want other people to know about your participation in the study, that’s okay too.

**Interview questions**

Here is a list of questions that I would like to ask you in the interview. You might want to add some questions or ideas:

1. What was life like before living in your current home?
2. Can you describe the different places that you lived in before coming to this home?
3. What was it like living with your own family before coming into care?
4. What is your relationship like with your family?
5. Do you see your family?
6. Do you have any contact with your sisters or brothers and, if so, how often?
7. What is it like now, living with your current family (foster or kin)?
8. If you have had challenges in your life, how were you able to overcome them? Can you provide some examples?
9. Before coming to this home, were there things about yourself that you found challenging – like feeling sad or depressed, having difficulties at school or getting into trouble?
10. Have things changed since you moved to this home? If so, in what way? Can you describe how things have changed?
11. If you could change one thing about your experience in care, what would that be?
12. What things do you think Children’s Aid Society workers and caregivers need to understand about what it is like for children and youth to come into care (kinship and/or foster and/or group care)?

**Taping, transcription (typed-up notes) and keeping your interview safe**

The interview will be taped and transcribed. Once the notes are typed-up, I will make certain to take out any information that could identify who you are. Your name will not be included in any of my type-written notes. The tapes will be destroyed once I finish typing everything up. The interview will be stored in a locked filing cabinet in a locked room at the University of Toronto. No information will be kept at your CAS office.

In the consent, you can tell me if you are okay with being taped and if you aren’t okay with this, I will take hand-written notes in the interview. I will shred those notes once I finish typing them up.

If you decide to participate in this study, you can also tell me on your consent form whether you would like to see what you said in your interview. I can share this information with you at a later date.
All of the information that is shared is confidential. Transcribed interview notes will not contain names, only numbers, to make sure things are kept private. When I write up this study, and get it published, I will not include quotes of what people said in the interviews to ensure that everything is kept private and confidential.

**What are the risks and benefits of the study?**

If you participate in the study, you will help professionals understand better about what it is like to live in kinship and/or foster placements. As a way of thanking you for participating in the study, I will give you with either a $20.00 iTunes gift card or a movie pass.

There are no physical risks in being involved in this study. One thing that might happen is that you become upset during or after the interview. If you are upset in any way, you can speak with anyone you choose, including the person you might have listed in your ‘youth notification letter’. If you want keep things confidential, you can always speak with someone at the *Kids Help Phone*.

**Is the study voluntary and confidential?**

Participation in the study is completely voluntary and every attempt will be made to maintain confidentiality. Confidentiality will be upheld except as required by law. These situations could include issues of child abuse or neglect, danger to oneself or others, or matters that require testimony in court proceedings. If there is a court case that requires me to hand over my transcribed notes from the study then I will need to comply with the court’s request.

I will not be talking with your caregiver or social worker about your participation or non-participation in the study.

If you decide to withdraw from participation in the research, you can still keep your iTunes gift card or movie pass. Any topic that you discuss with me will not be reported back to your parent(s), CAS worker or caregiver. The study should not impact on your relationship with your parent(s), CAS worker or caregiver.

You may decide not to participate in or to withdraw from the study at any time and there is no problem with this. If you decide not to go through with participating in the study, your decision will not be shared with your parent(s), CAS worker or caregiver.

**Expenses**

If you decide to participate in the study, I will pay you back for any money you paid out for subway or bus fare to get to the study interview.

**Getting to the interview**

I want to make sure that it is easy for you to get to the interview and, as I said, I will pay you back for any subway or bus fares that you had to pay out in order to get to the interview. If you live in a rural area or if the interview needs to take place in the evening
then there may be concerns about your safety. In this case, I will arrange with your CAS to have a volunteer driver get you to and from the office for the interview.

Who should you contact if you have concerns or questions?
If you have any questions at any time, you can reach me by email at katharine.dill@utoronto.ca or by phone at 416-519-6151. My doctoral thesis supervisor is Robert MacFadden, 416-978-5818.

I will give you the phone number of the Kids Help Line if you want to talk to someone confidentially about what you said in the interview.

What are your rights?
If you have questions about taking part in this research study, please contact the Office of Research Ethics at the University of Toronto by phone at (416)-946-3273 or by email at ethics.review@utoronto.ca.

Results of the study
A summary of the results of this study will be made available to other people and professionals in different ways. I hope to get the results of the study published in the quarterly journal of the Ontario Association of Children’s Aid Societies. If you wish, the key findings can be sent to you electronically or by regular mail.

What you say in the interview will form a very important part of the study results. I hope you will agree to participate.

Yours truly,
Katharine Dill, PhD Candidate
Factor-Inwentash Faculty of Social Work
University of Toronto
246 Bloor Street West
Toronto, Ontario
M5S 1A1
Phone: 416-519-6151
Email: katharine.dill@utoronto.ca
Consent Form for Youth

Research Project: *Finding the Best Home*

Researcher: Katharine Dill, PhD candidate under the supervision of Dr. Robert MacFadden, Factor-Inwentash Faculty of Social Work at the University of Toronto.

I am aware that I need to be 12 years of age or older to participate in this study. My date of birth is: ________________.

I, ________________, understand that this is a study being conducted by Katharine Dill, doctoral student in the Factor-Inwentash Faculty of Social Work, University of Toronto. The study is about the differences and similarities between kinship and foster placements in the field of child welfare, and the study has been explained to me by Ms. Dill.

I understand that the interview with Ms. Dill will take about 1.5 hours.

I understand that I am free not to participate in the study and that I can leave at any time during the course of the interview. I can also choose not to answer any or all questions without consequence.

I have been made aware of the potential risks and benefits associated with my participation in this study. I understand that, if I want to speak with someone about personal issues that arise during the interview with Ms. Dill, I can speak with my Children’s Aid Society worker or whomever I choose to gain support from. I can also call the *Kids Help Phone* at 1-800-668-6868 if I want to talk to someone else.

I have been advised by Ms. Dill that she will reimburse me for any subway or bus fares that I have to pay in order to get to the interview and transportation will be provided if necessary.
All of my questions about the study have been answered to my satisfaction. I understand that participation in the study is completely voluntary and every attempt will be made to maintain confidentiality. Confidentiality will be upheld except as required by law. These situations could include issues of child abuse or neglect, danger to oneself or others, or matters that require testimony in court proceedings. I understand that my participation is completely voluntary and that my decision to participate or not in the study will be kept confidential. Exceptions to the confidentiality of my interview include situations that are reportable by law. These matters might include cases of child abuse, danger to myself or others, or matters that require testimony in court proceedings. I understand that if there is a court case that requires Ms. Dill to hand over her transcribed notes from the study then she will need to comply with the court’s request.

I further understand that I can withdraw from the study at any time without explanation and with no consequences. If I choose to withdraw from the study, I can still keep my iTunes gift card or movie pass. I am also aware that, if I choose to withdraw from the study, Ms. Dill will not provide my parent(s), Children’s Aid Society worker or caregiver with any information relating to my interview or my decision to withdraw from the study.

I understand that Ms. Dill will not recruit anyone from my CAS that I know, including Children’s Aid Society workers, caregivers, or other youth.

I understand that the interview will be taped and transcribed and that all identifying information will be removed from the transcripts. I understand that all of the taped interviews will be destroyed immediately after they have been transcribed. I understand that the interview will be stored in a locked filing cabinet in a locked room at the University of Toronto. No information will be kept at my Children’s Aid Society office. The electronic file of my interview will be password protected so that no one other than Ms. Dill can review the material from this study.

I understand that if I have concerns about the taping of the interview, Ms. Dill will instead take handwritten notes that will be shredded immediately after transcription.
I consent to Ms. Dill audiotaping the interview:

Yes  
No

I would like to see the transcripts of my interview at a later date:

Yes  
No

I am aware that Ms. Dill will make me a copy of my consent form to take with me following this interview.

I would like to receive a copy of the study findings:

Yes  
No

If yes, please indicate how you would like the findings to be delivered to you:

If you wish to receive an email copy of the report, please provide your email address:
Email address: ______________________________

If you wish to receive a hard copy of the report, please provide your mailing address:
Mailing address: ______________________________
______________________________
______________________________

I hereby consent to participate in this study.

______________________________  ______________________________
Name of Youth    Signature
(please print)

______________________________  ______________________________
Name of person who obtained consent   Signature
(please print)

Date: _________________________
If you have any questions about this study, please contact:
Katharine Dill
Factor-Inwentash Faculty of Social Work
University of Toronto
246 Bloor Street West
Toronto, Ontario
M5S 1A1
Youth Interview Guide

1. What was life like before living in your current home?
2. Can you describe the different places that you lived in before coming to this home?
3. What was it like living with your own family before coming to this home?
4. What is your relationship like with your family? Did you have any challenges?
5. Do you see your family?
6. Do you have any contact with your sisters or brothers and, if so, how often?
7. What is it like now, living with your current family (foster or kin)?
8. If you have some challenges in your life, how were you able to overcome them? Can you provide some examples?
9. Before coming to this home, were there things about yourself that you found challenging – like feeling sad or depressed, having difficulties at school or getting into trouble?
10. Have things changed since you moved to this home? If so, in what way? Can you describe how things have changed?
**Youth Demographics**

All of the following information will be kept confidential by the researcher.

Name: ______________________________
Age: ______________________________

Educational background
Grade level: ______________________________

Other related questions
How many placements have you had since leaving your birth family home? ______________________________
How long (in months) have you been with your current family? ______________________________
How long (in months) have you been with your current Children’s Aid Society worker? ______________________________
How old were you when you first came into care? ______________________________

Contact information
Home address: ______________________________
Telephone (day): ______________________________
Email address: ______________________________

************************************************************************

Administrative use only
Code number: ______________________________
**Youth Notification Letter**

Is there anyone you would like to notify about your participation in this study and if so, who would that person(s) be?

Name of individual(s) ______________________________
Relationship:  ______________________________
Address:  ______________________________
Telephone:  ______________________________
Email address:  ______________________________

If you don’t want anyone else to know about your participation in the study, you can contact the *Kids Help Line* at 1-800-668-6868.
Dear Prof. MacFadden and Ms. Dill:

Re: Your research protocol entitled, “Finding the Best Home...A Comparative Analysis of Kinship and Foster Care Placements in the Ontario Child Welfare System”

ETHICS APPROVAL

<table>
<thead>
<tr>
<th>Original Approval Date: August 20, 2008</th>
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<tbody>
<tr>
<td>Expiry Date: August 19, 2009</td>
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<td>Continuing Review Level: 3</td>
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We are writing to advise you that the Health Sciences Research Ethics Board has granted approval to the above-named research study, for a period of one year. Ongoing projects must be renewed prior to the expiry date.

The following consent documents (received August 20, 2008) have been approved for use in this study: Appendix 1 - Information to Children's Aid Society Workers, Appendix 2 - Information Letter to Caregivers and Appendix 3 - Information Letter to Youth.

Any changes to the approved protocol or consent materials must be reviewed and approved through the amendment process prior to its implementation. Any adverse or unanticipated events should be reported to the Office of Research Ethics as soon as possible.

Best wishes for the successful completion of your project.

Yours sincerely,

Jill Parsons
Research Ethics Officer – Health Sciences
University of Toronto  
Office of the Vice-President, Research  
Office of Research Ethics  

PROTOCOL REFERENCE #22668  

November 14, 2008  

Dr. Robert MacFadden  
Factor-Inwentash Faculty of Social Work  
246 Bloor Street West  
Toronto, ON M5M 1A1  

Ms. Katharine Dill  
Factor-Inwentash Faculty of Social Work  
246 Bloor Street West  
Toronto, ON M5M 1A1  

Dear Dr. MacFadden and Ms. Dill:  

Re: Your research protocol entitled, “Finding the Best Home: A comparative analysis of kinship and foster care placements in the Ontario child welfare system”  

We are writing to advise you that a member of the Health Sciences Research Ethics Board has granted approval to an amendment (received November 10, 2008) to the above referenced research study under the REB’s expedited review process. This amendment involves changing site location and addition of interview questions.  

Any changes to the approved protocol or consent materials must be reviewed and approved through the amendment process prior to its implementation. Any adverse or unanticipated events should be reported to the Office of Research Ethics as soon as possible.  

Best wishes for the successful completion of your project.  

Yours sincerely,  

Daniel Gyewu  
Research Ethics Coordinator
University of Toronto
Office of the Vice-President, Research
Office of Research Ethics

PROTOCOL REFERENCE #22668

June 2, 2009

Professor Robert MacFadden
Factor-Inwentash Faculty of Social Work
246 Bloor Street West
Toronto, ON M5S 1A1

Ms. Katherine Dill
Factor-Inwentash Faculty of Social Work
246 Bloor Street West
Toronto, ON M5S 1A1

Dear Prof. MacFadden and Ms. Dill:

Re: Your research protocol entitled, "Finding the Best Home: A Comparative Analysis of Kinship and Foster Care Placements in the Ontario Child Welfare System" by Prof. R. MacFadden (supervisor), Ms. K. Dill (PhD candidate)

We are writing to advise you that a member of the Health Sciences Research Ethics Board has granted approval to an amendment (received May 21, 2009) to the above referenced research study under the REB's expedited review process. The amendment is for three new study sites ( ), each site will be asked to recruit one population: youth or caregivers or workers, with a minimum sample size requirement indicated for each sub-group.

The following documents have been approved for use in this study: Information Letters 1) to CAS workers, 2) to caregivers (not of participating youth), 3) to youth, and 4) youth notification letter, and Consent/Assent Forms: 1) CAS workers, 2) caregivers and 3) youth assent.

Any changes to the approved protocol or consent materials must be reviewed and approved through the amendment process prior to its implementation. Any adverse or unanticipated events should be reported to the Office of Research Ethics as soon as possible.

Best wishes for the successful completion of your project.

Yours sincerely,

(Marianna Richardson)

Marianna Richardson
Research Ethics Coordinator
Dear Prof. MacFadden and Ms. Dill:

Re: Your research protocol entitled, “Finding the Best Home: A Comparative Analysis of Kinship and Foster Care Placements in the Ontario Child Welfare System” by Prof. R. MacFadden (supervisor), Ms. K. Dill (PhD candidate)

We are writing to advise you that a member of the Health Sciences Research Ethics Board has granted approval to an amendment (received June 15, 2009) to the above referenced research study under the REB’s expedited review process. **The amendment will allow for researchers to conduct study interviews outside of the CAS office location.**

**Any changes to the approved protocol or consent materials must be reviewed and approved through the amendment process prior to its implementation. Any adverse or unanticipated events should be reported to the Office of Research Ethics as soon as possible.**

Best wishes for the successful completion of your project.

Yours sincerely,

Marianna Richardson
Research Ethics Coordinator
Dear Prof. MacFadden and Ms. Dill:

Re: Your research protocol entitled, “Finding the Best Home: A Comparative Analysis of Kinship and Foster Care Placements in the Ontario Child Welfare System” by Prof. R. MacFadden (supervisor), Ms. K. Dill (PhD candidate)

We are writing to advise you that a member of the Health Sciences Research Ethics Board has granted approval to an amendment (received August 4, 2009) to the above referenced research study under the REB’s expedited review process. The amendment will allow for a revised recruitment strategy to increase participation from the 2 constituent populations: kinship youth and kinship caregivers; also compensation has increased from $20 to $30 for a Wal-Mart gift certificate.

The following documents (revised documents received August 4, 2009) have been approved with this amendment: Recruitment Flyers for Youth and Recruitment Flyers for Kinship Caregivers.

Any changes to the approved protocol or consent materials must be reviewed and approved through the amendment process prior to its implementation. Any adverse or unanticipated events should be reported to the Office of Research Ethics as soon as possible.

Best wishes for the successful completion of your project.

Yours sincerely,

Mariana Richardson
Research Ethics Coordinator
University of Toronto
Office of the Vice-President, Research
Office of Research Ethics

PROTOCOL REFERENCE #2268

September 17, 2009

Professor Robert MacFadden
Factor-Inwentash Faculty of Social Work
246 Bloor Street West
Toronto, ON M5S 1A1

Ms. Katherine Dill
Factor-Inwentash Faculty of Social Work
246 Bloor Street West
Toronto, ON M5S 1A1

Dear Prof. MacFadden and Ms. Dill:

Re: Your research protocol entitled, "Finding the Best Home: A Comparative Analysis of Kinship and Foster Care Placements in the Ontario Child Welfare System" by Prof. R. MacFadden (supervisor), Ms. K. Dill (PhD candidate)

We are writing to advise you that a member of the Health Sciences Ethics Board has granted approval to an amendment (received September 4, 2009) to the above referenced research study under the REB's expedited review process. This amendment now approved will allow Ms. Dill to recruit youth through the [blurred] and to distribute the recruitment flyer through the [blurred] network.

The following document (revised versions received September 4, 2009) has been approved with this amendment: Recruitment Flyer.

Any changes to the approved protocol or consent materials must be reviewed and approved through the amendment process prior to its implementation. Any adverse or unanticipated events should be reported to the Office of Research Ethics as soon as possible.

Best wishes for the successful completion of your project.

Yours sincerely,

(Marianna Richardson)

Marianna Richardson
Research Ethics Coordinator

University of Toronto  
Office of the Vice-President, Research  
Office of Research Ethics

PROTOCOL REFERENCE #2268  
October 6, 2009

Professor Robert MacFadden  
Factor-Inwentash Faculty of Social Work  
246 Bloor Street West  
Toronto, ON M5S 1A1

Ms. Katharine Dill  
Factor-Inwentash Faculty of Social Work  
246 Bloor Street West  
Toronto, ON M5S 1A1

Dear Prof. MacFadden and Ms. Dill:

Re:  Your research protocol entitled, “Finding the Best Home: A Comparative Analysis of Kinship and Foster Care Placements in the Ontario Child Welfare System” by Prof. R. MacFadden (supervisor), Ms. K. Dill (PhD candidate)

We are writing to advise you that a member of the Health Sciences Research Ethics Board has granted approval to an amendment (received September 29, 2009) to the above referenced research study under the REB’s delegated review process. This amendment involves changing the recruitment strategy for youth: asking the [redacted] Children’s Aid Society Kinship Supervisor, [redacted] to contact the youth directly to seek their permission to have Ms. Dill contact them to set up the study interview, if they agree.

All your most recently submitted documents have been approved for use in this study.

Any changes to the approved protocol or consent materials must be reviewed and approved through the amendment process prior to its implementation. Any adverse or unanticipated events should be reported to the Office of Research Ethics as soon as possible.

Best wishes for the successful completion of your project.

Yours sincerely,

[Signature]

Mariana Richardson  
Research Ethics Coordinator