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Evaluation of a Training Programme for Foster Carers in an Independent Fostering Agency

Davies, P., Webber, M., & Briskman, J.

Abstract

The aim of this study was to evaluate a parenting programme designed for foster carers from an independent fostering agency. programme (Park's Parenting Approach) adapted existing parenting programmes to be more specific to the needs of looked-after children. Sixty-one carers consented to take part in the evaluation of the training and 55 (90%) completed the programme. The training was delivered over 9 weeks, once a week for 2 hours, and pre- and post-course evaluations were carried out at the first and last sessions of the course. The evaluation included carers' ratings of their foster-child's most challenging problems, parenting style, carer efficacy, and a survey of carer-satisfaction with training. Results showed a decrease in foster children's problem behaviours, and an increase in carer confidence. Carers expressed a high level of satisfaction with the programme, and 100% felt that they would be able to retain the information and skills they had acquired on the course. The implications of providing training within an independent foster care context are discussed.

keywords: foster carers, training, evaluation, independent fostering agency, attachment theory

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INTRODUCTION

In the Department for Education's report, *Children Looked After in England* (DfE, 2013) it was stated that the number of looked-after children had increased by 2%, from 67,080 to 68,110 between March 2012 and March 2013, with 75% of these children being placed in some form of foster care.

Local authorities have been unable to find sufficient foster placements from among their own carers since the mid-1990s, although the shortage of foster carers pre-dates this (Sellick, 1999). Pallett et al (2002) also reported that local authorities were not only finding it increasingly difficult to recruit and retain foster carers, but also to maintain, equip and support them in facing a challenging and demanding role. In 2010 a survey undertaken by Fostering Network reported that the "ability to recruit and retain foster carers is an on-going challenge and priority for fostering services" (Clarke, 2010, p.4). The report acknowledged that foster carers are expected to provide placements for children with problems that are beyond their experience and areas of expertise. In the same report, Clarke (2010) predicted that there would be a further increase in the number of children placed into local authority care as a result of high-profile neglect and abuse cases which would add to the existing shortfall of carers in the UK. She goes on to state that both local authorities and independent fostering agencies (IFAs) reported that they were not able to recruit carers who had the appropriate skills to meet looked after children's needs.

Background to Independent Fostering Agencies:

IFAs have helped to meet the shortfall in recruitment of foster carers by local authorities (Sellick, 1999). The costs of placing young people with a foster carer employed by an IFA is reported to be much higher than in local authorities (Sellick, 2007), but this is frequently because many of the young people have complex and specialist needs.

In 2011 29% of looked-after children were cared for by private sector provision (DfE, 2011). However, in the age of austerity local authorities are concerned about achieving value for money in commissioning placements from IFAs and using them only as a 'last resort' (Sellick, 2011), perhaps making it more important for IFAs to deliver high quality services.

Foster carers generally report satisfaction with the support they receive from IFAs (Farmer et al., 2007). An evaluation of a 'team parenting' approach developed by one IFA to support foster carers found high levels of satisfaction by them (Staines et al., 2011). It also

found high levels of satisfaction amongst the young people, supported by social worker comments that the standard of care that the agency provided appeared to be high (Selwyn et al., 2011). However, with the exception of this study, there is a dearth of research on IFAs and the training they provide to their foster carers.

The need for standards in foster carer training:

The improvement of standards in foster care training was one of the commitments set out in Every Child Matters (DfE, 2005). This commitment was again reinforced in the Care Matters White Paper (DfES, 2007) with an emphasis on equipping foster carers with the skills they required to carry out their responsibilities, which included increasing their access to specialist training. The House of Commons, Children, Schools and Families Committee (2009) additionally stated that foster carers cannot rely on 'normal' parenting skills when caring for children who have a history of ill-treatment, neglect or challenging behaviour. The National Minimum Standards (NMS) (DfES, 2011), which is applicable to all fostering services and forms the regulatory framework under the Care Standards Act 2002, requires that any fostering provider must ensure that its foster carers are equipped to provide a high standard of care, that is, that they are trained to meet the needs of the children with whose care they have been entrusted.

It has been established that children who are cared for in a family environment achieve better outcomes as they are more likely to receive care that is tailored to their own needs (Warman et al 2006). In order to meet the diverse needs of the looked-after child, foster carers require a service that is adaptive to their needs and to the challenges that they are expected to manage. Children in foster care are very likely to have experienced adverse life events, such as abuse, trauma, neglect, loss, separation and poor or inadequate parenting (Golding 2008). For these damaged and vulnerable children sensitive parenting by foster carers will go some way towards reversing the emotional damage they have suffered and provides the support they need in order to achieve their potential in adult life (Schofield et al 2005). Foster carers therefore require specialised training to cope with the problems that arise as a result of these experiences.

In 2007 the government introduced a national requirement for all foster carers to undertake training to meet new standards set out by the Children's Workforce Development Council (CWDC 2007). There is still very little guidance as to how these standards should be met and what type of training is required in order that foster carers may develop their skills so

as to be able to meet the complex needs of the young people now entering the care system (Warman et al 2006).

Programmes for Foster Carers

Parenting programmes provided for foster carers need to take into account the attachment needs and life experiences of children who are being looked after away from home. Whilst this type of course offers foster carers much needed skills and education, they will continue to need support and guidance to understand the impact that fostering can have on them as individuals. They usually receive this type of support and guidance from their supervising social worker and other relevant training that is offered by the agency or local authority they foster for. The level of support and training will vary depending on the resources and priorities of each individual agency or local authority and the individual knowledge and skills of the supervising social worker.

Parenting programmes aimed at birth parents have been well researched; these include the 'Positive Parenting Programme' (Sanders et al 2002) and 'The Incredible Years' (Webster-Stratton, 1992). These programmes have "demonstrated lasting effects for two-thirds of families treated and up to four years follow up" (Golding & Picken 2004, p.25).

There is emerging evidence for the effectiveness of programmes specifically designed for foster carers. Pallett et al (2002) set up a project in an inner London borough to support foster carers in developing practical skills to parent the children in their care. Carers felt that the course had improved their sense of confidence, with 97% reporting they felt more confident about managing most child behaviours. There was also a significant decrease in the behaviours the carers had identified as most problematic for them.

A further evaluation of the *Fostering Changes* Programme, a specialised programme designed for foster carers (Pallett et al 2005), showed positive changes in child behaviour and carer confidence following the training course. Professor Scott and colleagues at the National Academy for Parenting Research, Institute of Psychiatry, King's College London, UK, carried out a randomised controlled trial of a revised version of the *Fostering Changes* Programme on behalf of the Department for Education (Briskman et al 2012). They found a decrease in child problem behaviours among those foster children whose carers had attended the 12-week training, as well as increases in carer confidence and evidence that carers were putting the skills they had learned on the course into practice. No equivalent improvements in child problem behaviours or in carer confidence were found among the waiting list

controls in this randomised trial. In the USA, Price and colleagues have conducted an effectiveness trial of the Keeping Foster Parents Trained and Supported programme (Price et al 2009) and found that on 'termination' of the treatment, carers in the intervention group reported significantly fewer child behaviour problems than those in the control group.

Park's Parenting Approach

The 'Park's Parenting Approach' was developed for use in an IFA. Various programmes had been run with the carers of this IFA, but it had not been felt that these were sufficiently tailored to the needs of carers who were coping with very challenging behaviour, and there had been little evidence of improvement in carer or child outcomes following training.

The Parks Parenting Approach is designed for all carers, from new carers to those with many years of fostering experience, and the principles underlying the training are applicable to children of all ages (0 to 18 years). An advantage of this approach is that carers do not have to have a child currently in placement to attend the course. The programme is delivered over a period of 9 weeks, consisting of weekly 2-hour sessions.

The Course Content

The format of the Park's Parenting Programme was influenced by previous parent training programmes (e.g. Pallet 2002 and Webster-Stratton 1992) and the principles underlying attachment theory and social learning theory underpin all aspects of the course structure and teaching. One of the fundamental principles of attachment theory is that "the infant and young child should experience a warm intimate and continuous relationship with his mother (or permanent mother substitute) in which both find satisfaction and enjoyment" (Bowlby 1951, p. 13). Social learning theory is commonly used in parenting classes to help parents understand and manage their child's behaviour (Aldgate et al. 2006). The aim of training was, therefore, to support carers in managing challenging behaviour by developing positive relationships with their foster children. The effect of increasing carer confidence also gives them the motivation to put new skills into practice, because they believe that their own actions can have a positive effect on child outcomes.

Core Skills

Behaviour Management: Throughout the programme behaviour was discussed in terms of underlying motivations and emotions. Carers were encouraged to think about challenging

behaviour as a result of patterns of learning and reinforcement, and to understand these behaviours in the context of the previous experiences of the child. Foster carers were encouraged to keep a behaviour diary or tally sheet which tracked behaviour, whilst thinking about how to describe the behaviour in terms of its antecedents.

Practical skills

Emphasis was placed on positive interactions such as positive praise, rewarding positive behaviour, noticing desired behaviour and positive family time. Consequences for misbehaviour were considered and discussed; carers were supported to think about how behaviour was being maintained by giving undue attention to mis-behaviour. Conflict reduction was an important part of the course, along with the need to improve self-esteem of both the child and the foster carer. Foster carers practiced new strategies such as positive praise, family conferences and playing in the group setting.

How fostering impacts upon the carer

The impact of the role and responsibilities on the quality of life of the carer was explored as part of the course. An important part of the programme was to encourage carers to acknowledge their own needs and to be able to admit to the need for respite, and to accept that they could make mistakes.

Aims

The aims of this study were to identify the impact that Park's Parenting Approach had on foster carers' confidence, feeling of being supported and children's behaviour.

The main hypotheses were that:

- Training will increase carer confidence
- Training will result in a reduction in child behaviour problems
- Carers will feel that they have benefitted from the programme

Methods

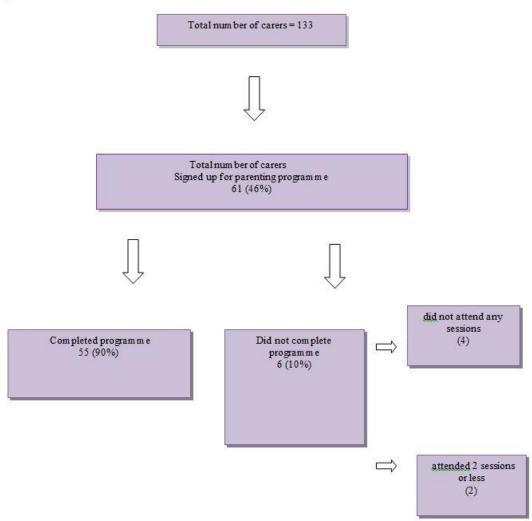
Setting and Sample

The setting for the study was an IFA based in the Midlands region of the UK, which covered a large geographic area and employed local carers who were 99% White British. The service

was made up of mainly social workers, support workers and administration staff, who offered support and supervision to the foster carers. The children placed with the agency foster carers were mainly from Stoke-on-Trent, Staffordshire, Cheshire, Derbyshire, Manchester, East and West Midlands.

The Parks Parenting Approach was offered to all 133 foster carers approved by the IFA, regardless of whether or not they currently had a child in placement. 46% (n=61) of carers volunteered to attend the parenting programme. The remainder were unable to attend because of child care issues or other commitments such as work, or because the courses reached their maximum quota (Figure 1). 56 carers (90% of volunteers) completed the training (68% female and 32% male).

Figure 1



Measures

Standardized measures of parenting practice, carer efficacy and child problem behaviour were used for the evaluation, as well as qualitative assessments of carer satisfaction. Foster

carers with a child in placement for the duration of the parenting programme were asked to complete a set of the following questionnaires at the beginning and on completion of the programme for each child they had in placement:

- The Visual Analogue Scale (VAS), which was adapted from the measurement of feelings/mood in a health setting (Atkin 1969) by Scott et al (2001) for use with foster carers. The VAS was a line which measured 10cm in length. At the left of the line was written 'couldn't be worse' and at the right of the line was written 'not a problem'. Respondents were asked to mark their response on the line according to where they positioned themselves between these two options. To record their response we used a ruler to measure the distance in centimetres from the left edge of the line to the place they marked on the line. Their response was measured to the nearest millimetre. A different line was used for each problem behaviour identified by the foster carer. They were asked to rate the same problem behaviours at the end of the 9 week course using the same scale. The pre-post change was then analysed by measuring the difference (if any) between the marks recorded before and after the training. Only foster carers with a child in placement completed the VAS.
- The 12-item short form Alabama Parenting Questionnaire (APQ) (Elgar et al, 2006). This is an assessment tool that "identifies aspects of positive and negative parenting styles important to conduct problems" (Dadds et al, 2006, p.2) which has both good validity and reliability. The APQ consists of 12 items which carers were asked to rate on a five point Likert scale, (never, almost never, sometimes, often and always). Following recoding of items which were reversed so that a high score indicated a positive response, a total score was calculated from the sum of the 12 items. Questions included; 'You ask your foster child about his/her day in school', 'you compliment your foster child when he/she does something well' and 'your foster child is out with friends you don't know'. A high score indicated a positive parenting style. Only foster carers who had a child in placement at the time of undertaking the course completed this questionnaire.
- The Carer-Child Dysfunctional Interaction scale (Pallett 2005) from the Parenting Stress Index (Bigras et al 1996, Lloyd & Abidin 1985) was used to measure carer behaviour and carer-child interaction. Typical questions include; 'whatever I do, my foster child will remain difficult' and 'I can make an importance difference to my foster child'. These were rated on a 5 point scale by the carer from 'strongly disagree' to 'strongly agree'. The final measure was the total of all 15 items, after recoding

reverse coded items. This was completed by those foster carers with a child in placement when undertaking the course.

Additionally, the 'consumer satisfaction questionnaire was issued to all participants regardless of whether they had a child in placement or not on completion of the course (Webster-Stratton 1989). The questionnaire was divided into three areas: 'course content', 'trainer' and 'you as a carer'. 'Course content' and 'you as a carer' were open ended questions for carers to put their own thoughts and comments. The 'trainer' section included items which were rated on a scale from 1-6 regarding the trainer's delivery style and preparation. It also included open ended questions.

Procedures

Carers were provided information about the study, including how their data would be used to evaluate the training programme. They were invited to participate prior to the first training session. Participants were allocated a unique reference number in order to maintain confidentiality. Carers were paid mileage expenses for attending the course and a crèche was provided for those with young children or children out of education.

Evaluation of the programme was carried out before and after the attendance of the parenting programme. Foster carers were given time in the first and last session to self-complete the questionnaires. A brief explanation of each questionnaire was provided and no foster carer required additional support to complete them. Completion of the questionnaires took between 20 and 30 minutes.

Analysis

Analysis was performed using the SPSS 15.0 for Windows. Repeated measures ANOVA was used to analysis the data from the 'Views from Training Questionnaire'. A paired-t-test was used to analyse the data from the VAS, Alabama and carer-confidence questionnaires.

Ethical Approval

Ethical approval was obtained from the King's College London Psychiatry, Nursing & Midwifery Research Ethics Sub-committee (REC Protocol Number/09/10-15).

Results

Participant Characteristics

Foster children (n=57) who were placed with carers whilst they undertook the training ranged in age from 1 month to 18 years of age. The mean age was 11.4 years (s.d.=4.6 years). 34 children (60%) were male.

Foster carers (n=54) ranged in age from 27 to 66 (mean age=49; s.d.=8). The IFA used in the study was a relatively new agency, so carers had only been fostering with the agency from between 1 and 6 years (mean=3 years; s.d.=1.6 years). Foster carers had looked after between 1 and 59 children (including respite care) with a median of 4 children per carer.

Carers were looking after up to 3 children whilst attending the training, with the majority (59%) looking after one child. 22% of carers (n=12) did not have a child in placement for the duration of the training.

VAS

There was a mean decrease in ratings over all three concerns. The difference between the mean VAS scores pre- (6.550) and post- (3.603) for the primary problem was 2.7 (on a scale of 1 to 10), which was statistically significant (t=5.660, df=38, p<0.001). The difference between mean pre- (6.548) and post-scores (3.635) for concern two was 2.8 (t=6.081, df=36, p<0.001) and the difference between the mean pre- (6.523) and post-scores (4.211) for concern three was 2.1 (t=3.104, df=26, p<0.005).

The behaviours that carers found difficult ranged from risk taking behaviours, manipulation, peer relationships, 'testing out' behaviours, stealing and lying. Pallet et al (2002) and Minnis (2001) reported similar behaviours being raised by the carers in their studies.

Carer-Child Dysfunctional Interactional Scale

There was a mean increase in the total ratings regarding carer confidence. The mean difference between pre-course total and post course total was 3.5 which was statistically significant (t= 4.450, df=44, p<0.001).

The confidence foster carers had in the future also increased (mean increase=0.333, p<0.008). They also reported an increase in confidence about managing the behaviour of the children in their care (mean=0.222, p<0.011).

APQ Short Form

There was no statistically significant difference between the pre and post means on the APQ (38.9 and 37.4 respectively). It is possible that the APQ was designed as an assessment tool and may not be sensitive to small changes in parenting styles.

User Satisfaction Questionnaire

95% (n=39) of the foster carers completed the User Satisfaction Questionnaire and the feedback was extremely positive. 100% (n=39) of foster carers felt that they would be able to use the skills/ideas that had been taught on the course, with 34% (n=13) stating that it would be easy to retain the skills. 72% (n=28) believed it had improved their understanding of children's behaviour. When asked about the course content and the training style, 34% (n=13) felt the course content was easily understood and that the training style and use of practice examples supported their learning. However, 15% (n=6) stated that the course or course sessions were too long (Table 1).

When carers were asked to list five things they had learnt from the course, they primarily felt they had gained insight into the behaviour of the children they cared for; and that positive praise and interaction were useful tools. The style and presentation of the training in general was well received, although some carers felt that more role-play of managing difficult situations would have been useful along with more time to discuss the experiences they were having. They commented that the training was fun, and that both the humour and a 'down to earth' approach helped. Carers also valued the 'homework' they were given and felt this supported them to consolidate their skills and learning, along with the group process.

Table 1. User Satisfaction Questionnaire (n=39)

Measure	
Had improved understanding of children's	72% n=31
behaviour	
The ideas learnt on the course would be	53% n=21
easy to hold on too	
Will use ideas/skills gain on the course	100% n=39
Positive training style and use of practice examples	87% n=34
Enjoyed being part of a group	34% n=13
The course content was easily understood	34% n=13
The length of course or sessions were too	15% n=6
long	

Discussion

Results revealed a statistically significant increase in carer confidence on completion of the course. There was also a significant reduction in child behaviour problems on all three of the carer-nominated concerns.

Foster carers reported finding the group work process helpful and that it increased their confidence, as they felt they were not alone in the problems they experienced. The parenting programme supported this by encouraging discussions and providing 'homework' (e.g. practice positive praise), which was reported back in the following session. The programme developed foster carers' existing knowledge and skills, whilst adding new information. It was a practically based programme which was accessible to everyone. Encouraging foster carers to use behaviour diaries to chart their progress also developed their ability to reflect upon their actions/inaction which in turn promoted self-learning (Warman,

2006). Our findings supported previous studies. Golding and Picken (2004) reported that carers in their group projects found the experience increased their confidence and improved their skills. Warman et al (2006) argued that it is the process of active learning which helps foster carers to acquire skills and knowledge

There was a high attendance and completion rate for this course. The programme was accessible to more carers than other programmes because foster carers without a child currently in placement were still able to attend.

The study demonstrated that when foster carers are supported to target and understand a child's behaviours which they identified as a problem, there is a significant reduction in those problems. There was clear evidence that the group process supported foster carers to learn from practice and of the value they placed on this.

While the Parks Parenting Programme needs further evaluation to consider the longer-term effects, these initial findings are encouraging. At a time when foster care is under immense pressure there is a need for foster carers to be supported as well as equipped in the job they undertake. The study has highlighted the value and, at least in the short term, the effectiveness of providing training that is practical as well as educational.

Limitations

The participant demographics make it difficult for this study to be generalised as all participants on the parenting programme were of White British origin. The programme also needs to be piloted in a different region to help evaluate the extent to which these findings were context-specific.

The study lacked a control group so it is not possible to attribute the changes we observed solely to the training. A comparison between local authority foster carers and those from an independent agency would also have been beneficial. Ultimately, a randomised controlled trial would be the best method to evaluate this training intervention and minimise the potential for selection bias.

The use of the APQ to measure child behaviour change rather than assessments made by independent observers was a further limitation. The assessment of problems such as conduct or hyperactivity is reliable, but it may be more useful in measuring the longer term effect. A follow-up evaluation is required to assess the longer term impact of the training.

Participants using the VAS selected the three behaviours which they found to be the most problematic for them; this resulted in the primary, secondary and tertiary behaviours being different for each participant. Whilst there was a reduction in the problematic behaviour for each participant, there is clearly a limitation when grouping behaviours together and testing for change across different behaviours.

Although feedback from foster carers without children was gained through the satisfaction questionnaire, it was not possible to evaluate changes in their confidence in relation to managing children's behaviour.

Implications for social work practice

This study has found that specialist parenting programmes for foster carers in an IFA can increase carer confidence and reduce reported child behaviour problems. As IFAs are finding homes for increasing numbers of children with complex needs and behavioural difficulties, this study highlights the importance of providing bespoke training which can support foster carers in their roles. Social workers using IFAs to place children can have some confidence that where bespoke training is provided, which is built on strong theoretical and empirical foundations, outcomes for foster carers and children can be improved.

Conclusion

This study has found preliminary evidence for the effectiveness of a parenting programme for foster carers employed by an independent fostering agency. Given the growing numbers of children and young people in the care of independent fostering agencies, there is a need for further research on the effectiveness and cost-effectiveness of programmes such as this. The Parks Parenting Programme could equally be delivered to local authority foster carers, but further research is required to evaluate the effect of this on child behaviour and foster carer's confidence.

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