

# **Birth parents' experiences of contact sessions with their children in foster care**

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To my Heavenly Father, from whom all blessings flow, thank You.

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# ABSTRACT

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by

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Foster care plays a significant role in child protection services worldwide and so too in the South African social services context. Foster care involves four role players, namely the child, the foster parent/s, social worker/s and birth parent/s. From relevant literature, it is evident that the birth parent's perspective of foster care is currently an understudied component.

Parents who have children in care often experience stigmatization, lead complex lives, face a multitude of social issues and have few opportunities to practice parenting skills. These issues add to their poor engagement with child welfare services and reduced likelihood of contact and visitation with their children. Birth parents are generally encouraged by child welfare services to maintain contact with their children in care, as it is seen to maintain the child's psychological identity and wellbeing, as well as maintain the attachment between the parent and the child. However, contact is often a strenuous and highly emotive experience for both children and their parents. The strain experienced by both birth parents and their children during contact sessions often lead to lessened contact, making the possibility of reunification or quality contact sessions slimmer.

In trying to gain insight into birth parents' experiences of contact sessions with their children in foster care, the researcher conducted a qualitative, applied study using a collective case study design. A review of foster care literature forms the knowledge base of the study.

In-depth, one-to-one interviews were conducted with ten birth parents who currently have or have had, children in foster care and have had numerous contact sessions with them. This empirical study adds to the foster care knowledge base by offering insight into birth parents' experiences not only of contact sessions with their children, but also of their experiences of child protection agencies, social workers and the presence of the foster parents during contact sessions.

From this empirical study, it was concluded that birth parents find contact sessions highly emotive and stressful and that they are not adequately prepared for and supported during contact sessions. In addition to the above, it was concluded that in general birth parents have a need for more communication from social workers and that they experience that they do not have a voice within the foster care system.

The study was concluded with recommendations by the participants to improve the quality of contact sessions. This was followed by recommendations by the researcher to child protection agencies, social workers and foster parents in terms of improving contact sessions, as well as service delivery to birth parents in general. This included a checklist for social workers of aspects to be worked through with birth parents once contact commences. Finally, recommendations were made for future research.

The following key concepts are used in this study:

- Foster care
- Child in foster care
- Birth parent
- Foster parent
- Social worker
- Child protection agency
- Social services
- Preparation
- Experiences
- Contact session

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# CHAPTER ONE

## INTRODUCTION TO THE STUDY

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### 1.1. INTRODUCTION

Foster care plays a huge role in child protection services worldwide. According to Children Count (Statistics on children in South Africa..., 2011), in South Africa alone, 511,479 children were recipients of a foster child grant in 2009.

With the exception of very severe cases of child abuse, birth parents are generally encouraged to maintain contact with their children in care. Parent-child contact is regarded as important for various reasons, but essentially because it can maintain a child's psychological identity and wellbeing, as well as maintain the attachment between the parent and the child and in some cases make reunification possible (Salveron, Lewig & Arney, 2009:267). This is illustrated by child care legislation in the United Kingdom which places a responsibility on local authorities to not only encourage contact between children in care and their families but also to promote contact when it is in the best interest of the child (Triseliotis, 2010:60). Contact between birth parents and their children in foster care is generally in the child's interest and should be encouraged.

However, contact is often a strenuous and highly emotional experience for both children and their parents (Triseliotis, 2010:60). Parents who have children in care often experience stigmatisation, lead very complex lives and have few opportunities to practise parenting skills. They also face a multitude of social issues, such as drug and alcohol dependency, domestic violence and mental illness, which affect their ability and capacity to look after their children. These issues add to their poor engagement with child welfare services and their reduced likelihood of contact and visitation with their children (Salveron et al., 2009:268). The strain experienced by both birth parents and their children during contact sessions often lead to lessened contact, making the possibility of reunification or quality contact sessions slimmer.



If the best-interests-of-the-child standard is to be applied in child welfare service delivery (Children's Act, 2005), quality contact sessions between children in care and their birth parents should become a priority as it affects the child's psychological wellbeing and adjustment to his/her foster care placement.

The following concepts are applicable to this study:

- **Birth parents**

The concept of birth parents in this study refers to "an individual's genetic mother and father" (Barker, 2003:45). Generally, four distinct role players in foster care exist, namely the child, the social worker/s involved, the foster parent/s and the birth parents. This particular study will focus on the experiences of the birth parent/s of children in foster care.

- **Contact sessions or parent visitation**

Since the term "contact session" seems to be a more contemporary term used to describe parent visitations, the researcher was unable to find a definition for this term. However, the following definition of parent visitation might suffice as it has the same purpose as a contact session between birth parents and their children. Haight, Black, Mangelsdorf, Giorgio, Tata, Schoppe and Szewczyk (2002:173) define parent visitation as "the scheduled face-to-face contact between parents and their children in foster care". This particular study will focus on this point of contact between birth parents and their children who have been placed in foster care.

- **Children in foster care**

*The Social Work Dictionary* (Barker, 2003:167) describes foster care as follows: "The provision of physical care and family environments for children who are unable to live with their natural parents or legal guardians." Collins, Jordan and Coleman (2010:28) describe it as a situation where parents temporarily take care of and rear children born to others. The length of time in which a child is fostered can vary from several days to most of their childhood. Although the majority of foster families have a formal agreement with child welfare authorities, fostering arrangements can also be made informally with friends or family. In the context of this study, children in foster care

refer to children between the ages of 0 and 18 years who have been placed through a court order in the care of screened foster parent/s.

## **1.2. LITERATURE REVIEW**

The intention of reviewing current literature is to contribute towards a clearer understanding of the problem that has been identified and to put the study that is to be undertaken into perspective. It is also important to note that case study researchers should enter the field already with an understanding of the relevant literature (Fouché & Schurink, 2011:321; Nieuwenhuis, 2007:76). The researcher attempts to gain insight into the history and scope of the research problem from the literature by identifying whether any previous research of this nature has been undertaken and whether any gaps in past research exist that need to be addressed (Fouché & Delpont, 2011:134). In the section to follow, the focus will be on the relevance and importance of contact between foster children and their birth parents as well as to gain an understanding of the birth parents as role players in contact sessions and the experiences of birth parents during contact sessions.

Families whose children have been placed in care are often in severe distress; not only are they struggling with the issues that precipitated the loss of their child or children, but they also have to deal with the trauma of the loss itself (Gerring, Kemp & Marcenko, 2008:6; Van Schalkwyk, 2012:88). Gerring et al. (2008:6) point out that one of the most complex tasks in child welfare practice is working with the parents of children placed in foster care. In this regard, social workers are challenged with building supportive relationships with the birth parents while at the same time holding them accountable for the issues that precipitated the removal of the child. On the other hand, the parents' relationship with the social workers is most often tainted by feelings of fear, shame, guilt and anger (Gerring et al., 2008:6). Van Schalkwyk (2012:89) makes the statement that, conversely, foster carers often question why the children in their care need contact with their birth parents when they are now in a safe environment where all their needs are being met. In short, foster care poses several challenges to all involved parties.

Although contact sessions between foster children and their birth parents are often a difficult and very emotive experience for both parties, the benefits seem to make these sessions worthwhile (Van Schalkwyk, 2012:89). Gerring et al. (2008:8) stress the corollary values in working with birth parents, foster parents and children. These values are, firstly, that the birth family has a lot of value to offer their child. Secondly, maintaining the parent-child relationship is the right and compassionate thing to do based on common human decency and, lastly, linking birth and foster families is a very practical way to provide on-going care for the child and a strong foundation for the child's adolescence and adulthood.

For many foster children, contact with their birth parents is in *their* best interest. Triseliotis (2010:60) emphasise that many studies have contended that children who have regular contact with their birth parents:

- are more likely to return home;
- have better self-images than those who do not;
- have fewer fostering breakdowns and generally adjust better to their foster placement;
- experience the strengthening of their genealogical and physical identity;
- are reassured that the birth parents are well and still care about them;
- have lessened feelings of loss, rejection, anxiety and guilt; and
- are more likely to view their parents realistically.

Bonding or attachment is another very important aspect to take into account. Thomas (2005:368) defines *bonding* as:

...the strong mutual emotional attachment or bond that occurs between the new born and an immediate nurturing adult. This bond tends to continue over the following years, even in the face of harsh treatment of the child by the adult.

Here it ought to be noted that in many cases where children have been placed in foster care, at some point in their lives, they lived with one or both birth parents and formed some sort of attachment with the parent.

When a warm and trusting relationship has been built over time, the child forms a set of expectations about the availability of attachment figures and the likelihood that

they will provide support in times of stress. This image serves as an internal working model for the child. The internal working model becomes an important part of the personality and serves as a manual for future relationships. By way of illustration, according to Berk (2006:426), the quality of the attachment between mother and child has implications for the child's capacity to form future trusting relationships. However, for many children in foster care, their early experiences with their mothers or caregivers did not result in a warm and trusting relationship, and their internal working model may be one of *not* trusting adults to meet their needs. Contact sessions provide birth parents with the opportunity to improve, repair and develop a more secure relationship with their child (Van Schalkwyk, 2012:90). The availability of an attachment to a significant person is of interminable value to any child, but especially to those in foster care.

The benefits of contact also extend to the birth parents. It may decrease their own trauma in terms of the removal of their child or children (Van Schalkwyk, 2012:89). They also feel more empowered, it helps them to face the reality of their own situation, and they have the opportunity to learn and practise new skills and behaviours (Making the most of visitation..., 2000). From the above, it can thus be derived that positive contact sessions between birth parents and their children benefit both parties in a variety of ways.

It is, however, important to note that these benefits are not guaranteed. Factors such as the individual child's past experiences, how parents use the contact, the quality of their relationship with the child, their support and sanctioning of the foster placement, the relationship between the birth and foster parents and the absence of undermining attitudes and menacing behaviour have a definite influence on the advantages of contact (Triseliotis, 2010:61). If these factors are present, it is crucial to address them in order to maximise the benefits of contact.

The British Association for Adoption and Fostering (BAAF) conducted extensive research in 2010 about foster children who have returned to their birth parents' care. One aspect of the research focused on birth parents' experiences of contact with their children. Many parents described difficulties with regards to supervised contact, contact restrictions, the children's behaviour, transport, the setting and the parent's

own circumstances. Some birth mothers even stated that they experienced contact as intimidating or daunting and that they were unsure about what they were allowed to do and say (Farmer, Sturgess, O'Neill & Wijedasa, 2011:46). The experiences of birth parents during contact sessions with their children often provide insight into the emotional complexities birth parents experience. Haight et al. (2002:192) quote a mother as she describes her experience of taking leave of her child at the end of a visit: "It's like tearing my heart out. It is the most hurtful thing to be on a schedule to see your own child. It is just something that is inconceivable." This particular study highlighted the mother's experiences of not only having to deal with managing her own hurt and anger but also that of her children.

In conclusion, a review of literature illustrates that despite the emotive and stressful nature of contact sessions between birth parents and their children in foster care, in many cases, the benefits are worth the effort of maintaining regular contact.

### **1.3. THEORETICAL FRAMEWORK**

The specific theoretical framework applicable to this study to direct fieldwork and the interpretation of the gathered information (De Vos, Strydom, Shulze & Patel, 2011:6) is the ecological systemic theory of Urie Bronfenbrenner. Bronfenbrenner's theory is currently regarded as one of the most influential contextual theories, along with that of Vygotsky (Tudge, 2008:560).

Ecological systemic theory views the child as "developing within a complex system of relationships affected by multiple levels of the surrounding environment" (Berk, 2009:26). Bronfenbrenner views this environment as a series of nested structures, which include, but also extend beyond, the home, school and neighbourhood in which a child spends his/her everyday life (Berk, 2009:26). According to this theory, the environment can be divided into four levels: the microsystem (the child's immediate surroundings), the mesosystem (home, school, neighbourhood and childcare centre), the exosystem (formal organisations, religious institutions, community) and the macrosystem. The macrosystem is the outermost layer of Bronfenbrenner's model and refers to the subcultures and cultures in which the microsystem, mesosystem and exosystem are embedded (Berk, 2009:28; Louw &

Louw, 2007:27). This multi-dimensional approach of viewing a child's life provides a perspective on the complexities of foster care.

Thus, the ecological systemic theory is suited to this specific research study as it provides a framework for the bigger picture in which a foster child's life situation can be understood. It highlights the significance of various systems in a foster child's life and how a foster child cannot be fully understood without taking cognisance of these systems within which the child functions. Minuchin et al. (in Gerring et al., 2008:10) also advocate a cooperative model when working with birth and foster families. This model stems from an ecological, family systems perspective, in which foster and birth parents form a "constructive, problem solving network around the child through the period of placement". In short, a child in foster care cannot be seen isolated from the complex system that he or she is a part of.

#### **1.4. RATIONALE AND PROBLEM STATEMENT**

According to Alpert (2005:365), birth parents' perspective of foster care services is currently an understudied element of foster care. She continues to argue, "...this area of research has the potential to be an important first step in accomplishing several necessary goals in the field of child protection". Such research will serve to inform and alert agency administrators and field workers to factors worth considering throughout the foster care service plan. It may also present constructive advice for the design and implementation of service plans in which parents are mandated to participate. Triseliotis (2010:59) shares a similar view. He states a lack of empirically based theory and agreed criteria and guidelines exist when judgements are made about whether there should be any contact at all, the frequency of visits and the assessment of the quality of the contact. Although quality of contact has become the key issue, according to this author, judging quality lacks coherent and empirically based theory and guidelines.

Triseliotis (2010:59) holds that "no script for parents on how to conduct themselves, what to do and not to do, what to say and not to say" exists. In turn, Alpert (2005:365) suggests that research on the perspective of the birth parents will "perhaps most

importantly... give voice to the parents of children in foster care, allowing them to influence a system that is, for parents, completely life altering”.

In conclusion, the researcher would like to suggest that in order to act in the best interest of the child, foster children should have, when possible, frequent contact sessions with their birth parents. This does not only benefit the relationship between the parents and the child but also facilitates better adjustment of the child in foster care. These contact sessions are, however, a source of stress for both the child and parent/s and are often unutilised opportunities for birth parents to learn and practise new skills and behaviours, which may eventually contribute positively towards reunification. As suggested by Alpert (2005:365), the birth parents’ perspective of foster care service delivery has not been researched sufficiently to allow for more constructive service plans.

Thus, this study aims to answer the following research question: What are birth parents’ experiences of contact sessions with their children who are in foster care? In the section to follow, the specific goal and objectives will be discussed in detail.

## **1.5. GOAL AND OBJECTIVES**

### **Goal**

To explore and describe birth parents’ experiences of contact sessions with their children in foster care.

### **Objectives**

- To contextualise foster care as out-of-home placement with regard to the following:
  - Foster care in the South African context
  - Reunification services
  - Relationship between birth parents and their children in foster care
- To explore and describe the birth parents’ experiences of contact sessions with their children in foster care with regard to:
  - The role of the social worker before, during and after the contact session
  - The role of the foster parent

- The emotional experiences of the birth parent
- To make recommendations to social workers responsible for reunification services regarding the experiences of birth parents in order to identify key aspects in preparing birth parents for quality contact sessions with their children in foster care.

## **1.6. RESEARCH APPROACH**

The research approach for this study is the qualitative approach. This methodology has been selected as the researcher utilises an exploratory approach to find answers to seemingly complex phenomena (Fouché & Delpont, 2011:64). The data collection method most suited to reaching the objectives is personal, one-to-one interviews with the birth parents of children in foster care. In so doing, the birth parents can contribute toward a better understanding of how they experience contact sessions with their children in foster care and how these experiences may be improved (Nieuwenhuis, 2007a:87). In particular, the researcher is interested in the “rich descriptive” data the participants will be able to provide.

## **1.7. TYPE OF RESEARCH**

Applied research addresses a specific concern that endeavours to offer practical results (Neuman, 2011:27). This study will take the form of applied research since the goal is to explore the experiences of birth parents when they have contact with their children in foster care. In gaining a better understanding of birth parents' experiences, social workers may be able to facilitate better quality contact between birth parents and their children in foster care. In practice, this may contribute towards less stressful contact for both the birth parents and the child and better utilisation of the opportunity to make contact with each other.

## **1.8. RESEARCH DESIGN**

The researcher aimed to become better acquainted with the experiences of birth parents during contact sessions with their children in foster care. This would require the researcher to obtain information from birth parents that have had contact



sessions with their children in foster care. The information thus obtained assisted to identify patterns and themes in order to gain insight into the research topic (Fouché & Schurink, 2011:320). A single interview would not suffice, as a multi-perspective analysis is needed to gain a deeper understanding of birth parents' perspective of this topic (Nieuwenhuis, 2007a:75). Consequently, this research project uses a collective case study design, as the researcher would interview a number of participants to collect the necessary data.

It can thus be concluded that a collective case study design is most suitable for this specific study as it provides the opportunity to look at the cases collectively, to make comparisons and to identify themes and patterns from the whole.

## **1.9. RESEARCH METHODS**

Sampling is used in qualitative research; however, sampling is less structured, less quantitative and not as strictly applied as in quantitative research. In this particular study, the researcher used purposive sampling, as participants were selected because they had the potential to provide the richest sources of information to answer the research question (Nieuwenhuis, 2007:79). The researcher purposively selected birth parents according to specified criteria. These parents were sourced through the foster care screening social worker and reunification social workers of the Christian Social Council (CSC) North in Pretoria.

The purpose of the research guided the researcher to choose the most effective data collection method. In this specific study, the researcher was interested in exploring the experiences of a specific population. Data collection in this study took place by way of semi-structured interviews. This type of interview was particularly useful as a data collection method as it allowed for probing and clarifying answers since participants were able to provide a fuller picture (Greeff, 2011:352; Nieuwenhuis, 2007:87). The researcher prepared an interview schedule beforehand to define the line of inquiry. Interviews were recorded with the permission of the participants.

Analysis is the process of making sense of the collected data by identifying themes, patterns, trends and relationships. The researcher used Creswell's (2013:180) data analysis strategy. The data analysis process was as follows:

The researcher firstly transcribed the interviews conducted with the participants. The data from the interviews was then organised into files and then read in their entirety in order to gain a sense of the database as a whole. To aid the initial process of exploring the database, the researcher made use of handwritten notes and memos in the margins during the interviews.

The next step was to move from reading and memoing to describing, classifying and interpreting the data (Creswell, 2013:184). During this stage of the research, the researcher focussed on developing codes and categories that represent the essence of the qualitative data analysis. The researcher made sense of the data by linking her own interpretation to the larger research literature developed by others.

Lastly, the researcher represents the data in text. When this stage in the research process was reached, the researcher determined how participants experienced contact sessions with their children.

For the pilot study, the researcher interviewed two birth parents with children in foster care and had a minimum of three contact sessions with their children for the purpose of the pilot study. The interview schedule was tested during the pilot study.

## **1.10 LIMITATIONS OF THE STUDY**

There are naturally limitations in conducting research. The following limitations were a part of this study:

### **1.10.1 Generalising research results**

Even though the 10 participants in this study are hardly representative of the very large population of birth parents with children in foster care in South Africa, these participants were nevertheless able to provide valuable insights from their own

experiences and contribute to a better understanding of the research topic. The research study also provided a foundation for further research.

### **1.10.2 The profile of the participants**

All the participants in this study were birth parents who actively pursued contact with their children in foster care. This reflected something of their commitment to their children. In practise, many birth parents only make sporadic contact or no contact at all with their children who are in foster care. This study is thus not representative of a wide range of birth parents, but specifically of birth parents that are motivated to stay in contact with their children and actively pursued contact with their children.

Another aspect in terms of the profile of the participants is that none of the participants' children had been removed from their care due to abuse, but rather due to neglect or because of circumstances, such as unemployment, inadequate housing or instability. It is the researcher's experience that when a child has been removed from their parents' care due to abuse, the dynamics in terms of contact change and more stringent protective guidelines are applied to contact sessions. This implies once again that the findings of the study cannot be applied to birth parents in *general*, but only to a certain population of birth parents.

## **1.11 CHAPTER OUTLINE**

The researcher provides the following as an outline of the research process and the research report with timeline estimates:

The focus of chapter one is to introduce the research study. This includes the introduction, an overview of literature that pertain to the topic, the theoretical framework within which the study is undertaken, the rationale and problem statement, goal and objectives and ethical considerations.

Chapter two provides a review of literature that pertains to the research study. This comprises a description of foster care and the different role players in foster care, an exploration of the importance of contact between birth parents and their children in

foster care and an overview of the characteristics of a quality contact session and the skills and behaviours required of birth parents that will contribute toward quality contact.

Chapter three discusses the research methodology and the findings of the empirical study.

Chapter four includes the conclusions and recommendations from the results of the research conducted.

## **1.12 CONCLUSION**

Chapter one focused on introducing the study. Three main concepts that are pivotal to the study were identified and defined. A short review of literature was done about the relevance and importance of contact between children in foster care and their biological parents. The theoretical framework of the study was discussed and the rationale, goal and objectives clearly stated. The research approach, type of research, research design and methods were discussed as it applies to the study. Limitations of the study were highlighted and an outline of the chapters provided.

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# CHAPTER TWO

## FOSTER CARE AS ALTERNATIVE PLACEMENT FOR CHILDREN

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### 2.1 INTRODUCTION

The social work profession deals with people and all people are part of a family in one way or another. Much of social work has to do with families. For most people part of their life cycle will involve becoming parents to children – the most vulnerable group of the human population. It is generally accepted that children’s relationships with their parents are crucial to their development and sense of well-being (Anderson, 2005:43). This principle serves as a guide in child welfare policy worldwide.

In most countries in the world, the policy of child welfare agencies is that children should grow up primarily with their birth families. Ideally, children should enjoy their lives and play, learn and develop in the safety and love provided by their families, but many children’s lives fall short of this ideal (Noble, 2008:243). The maltreatment of children is the primary reason that parents and children are referred or reported to child welfare agencies. These agencies are concerned with protecting children from any form of abuse or neglect by strengthening the families’ abilities to protect their children. However, when children have been maltreated, they may be removed from their families and placed in alternative care through statutory intervention. Alternative care includes different forms of foster care, such as kinship foster care or foster care with unrelated families and residential group care (Pecora, 2008:271). However, when out-of-home placements become necessary, a fundamental principle remains that children should continue to stay in contact with their birth families (Ellingsen, Stephens & Storksen, 2012:427). It is this aspect of foster care-contact that often becomes a source of contention and frustration to all the parties involved.

Although reunification of children with their birth parents is the ideal, the reality often differs. However, whether a child stays in foster care for a brief period or for longer,

contact with birth parents is essential in building and maintaining relationships. This chapter will focus on foster care as an out-of-home care option for children who have been removed from their birth parents' care.

## **2.2 CONCEPTS RELEVANT TO THE RESEARCH STUDY**

The following concepts are relevant to this study: birth parents, contact sessions or parent visitations and children in foster care. These concepts were described and can be referred to in the introduction of chapter one (page 1).

## **2.3 FOSTER CARE**

### **2.3.1 The nature of foster care**

Fostering is a recognised resource for caring for children in public care and there has been a notable increase worldwide in the number of children who enter the foster care system (Biehal, 2007:808; Shaw, 2006:1375). Children enter the foster care system for a multitude of reasons and through various processes. Placement may occur at a parent's request for temporary help, an order of the court or legal actions that require out-of-home care (Everett, 2011:224). Though the reasons for entry into the alternative care system may differ, foster care has become the preferred option.

With the move away from residential care in the 1970's, the majority of looked after children are placed with foster carers (Greeson, Briggs, Kisiel, Layne, Ake, Ko, Gerrity, Steinberg, Howard, Pynoos & Fairbank, 2011: 92; Cocker & Allain, 2011:89; Koh, 2010, Nutt, 2006:3). In South Africa the Children's Act 38 of 2005 states that if a child is to be removed from the care of his or her parent, guardian or care-giver, the possibility of placing the child in foster care with relatives or non-relatives who are geographically as close as possible to the parent or care-giver, is the most desirable option in terms of an alternative care position for a child.

Foster care is divided into two main types of care: kinship and non-kinship care (Koh, 2010:389). In South Africa, there is also the option of group foster care facilities, which is a fairly new practice in the country, introduced to address the increased

demand for foster placement and care (Children's Act 38 of 2005:70; Republic of South Africa [RSA], the Presidency, 2009). These facilities are however the minority in terms of care options. Koh (2010:389) explains that for many years child welfare professionals saw kinship care as a last resort as many believed that abusive or neglectful parents had learned their dysfunctional behaviours from their family of origin. However, with the increase of children entering the public child welfare systems and the decrease in availability of foster parents, child protection agencies started turning to kin caregivers for children in the system.

The theoretical purpose of fostering is to provide a temporary or transitory safe home for a child because his or her parents are not able to do so. The primary goals of foster care are seen to be maximum protection of children, permanency and the preservation of families. These goals often carry inherent tensions between them, but the ultimate aim of foster care is the reunification of foster children with their birth families, adoption by the foster parents or preparation for independent living (Browne & Maloney, 2007:35, Everett, 2011:224, McWey, Acock & Porter, 2010:1338). Attempts at reunification with birth parents are however usually the initial focus.

The goal for the majority of children in foster care is being reunified with their birth parents (McWey et al., 2010:1338). If foster care is per definition seen as a temporary situation for children in need of care, reunification services are of vital importance. In the United States, only about half of parents are successful in their reunification attempts (D'Andrade & Chambers, 2012:2131) and according to Landman (2014), in South Africa less than 15% of foster children are reunited with their birth families. In light of these statistics, many authors and researchers (Alpert & Britner, 2009:135; D'Andrade & Chambers, 2012:2131) state that improving the reunification rate is an important goal of the child welfare system.

Changes in child welfare legislation in the United States, United Kingdom and with the new Children's Act 38 of 2005 in South Africa, have changed the focus to more proactive efforts to support children in their families whenever possible therefore increasing the threshold for admitting children to care. Consequently, the flow of children entering the care system has declined, but those who are in the system tend to stay longer (Biehal, 2007:810). Children have become less likely to be admitted for

less serious reasons, such as short-term family crises. Family support services tend to target children considered at risk of abuse and neglect rather than a broader group of children in need (Biehal, 2007:810, Nutt, 2006:9). Greeson et al. (2011:93) indicate that children who currently enter the foster care system have usually experienced multiple traumatic events perpetrated by a caregiver. These traumatic experiences are often multifaceted, chronic and associated with an array of severe and complicated reactions across developmentally prominent areas of functioning. The legislative changes have resulted in changes in the profile of the foster care population and as a result have influenced current reunification efforts and services.

### **2.3.2 Foster care in the South African context**

Section 28 of the Constitution of South Africa acknowledges that “children are by nature more vulnerable than adults due to their young age and therefore require a set of rights tailored to their specific needs over and above their constitutional rights they have in common with everyone else” (RSA, The Presidency, 2009). It is due to this vulnerability that some children may be in need of care during their developmental years, provided by someone other than their birth parents.

An increase in foster placements over the last couple of years in South Africa is attributed to increasing levels of poverty, unemployment, unwanted teenage pregnancies, AIDS related deaths and the rapid increase of alcohol and drug abuse (Lesch, Deist, Booysen & Edwards, 2013:1101). According to the Situational Analysis of Children in South Africa (RSA, The Presidency, 2009) the number of beneficiaries receiving the foster child grant has grown sharply from 44 000 in 1998 to 454 000 in 2008. Statistics provided by the South African Social Security Agency (2011) indicate that 510 760 social grants were paid to foster parents in South Africa during the 2010/2011 financial year. Due to these large numbers of foster placements and the subsequent fiscal implications, foster care is becoming an increasingly significant issue for the child welfare system in South Africa.

In a report by the Presidency (RSA, the Presidency, 2009), Dr. Tshabalala-Msimang affirmed that the Constitution of South Africa, section 28 of the Bill of Rights, states that “every child has the right to family care, parental care or to appropriate



alternative care when removed from family care”. When alternative care for children becomes a necessity, the South African Children’s Amended Act 2007 (2007:175) describes the intention of foster care as:

To protect and nurture children by providing a safe, healthy environment with positive support; and promote the goals of permanent planning, first towards the family reunification, or by connecting children to other safe and nurturing family relationships intended to last a lifetime.

Social workers are the leading professionals in foster care processes in South Africa. They are responsible for removing children from neglectful and/or abusive parents, placing the children in foster homes and then providing reunification services to the birth parents (Lesch et al., 2013:1101). In theory, the intentions of the Children’s Act describe the ethos of foster care very well, but as Lesch et al. (2013:1101) found during their research, at grassroots level social workers in South Africa find it to be a complex and challenging component of child protection services.

### **2.3.3 The role players in foster care**

Foster care services have four main role players, namely: the child protection organisation and social worker/s, the birth parents, the child in foster care and the foster carers. These role players are all meant to be part of an intricate process towards reunification, but practice shows that the inherent tensions between the different roles often result in a process where one or more of the role players do not fulfil the expectations of the other/s. Each role player has a distinct, important and significant place within the foster care system (Landman, 2014). This section aims to explore the roles these role players perform and the challenges they face.

#### **2.3.3.1 The birth parents**

Literature about foster care point out that the parents of children in foster care is an understudied component (Alpert & Britner, 2009:135). One would surmise that when a child is removed from his or her parental home, that there are a variety of complexities inherent to the functioning of the particular family. The majority of birth parents who have children in foster care have difficult, complicated lives with limited support networks to turn to in times of need (Gerring, Kemp & Marcenko, 2008:6;

Haight et al., 2002:186; Salveron et al., 2009:268). The social issues that these parents experience often play a large part in their poor engagement with services, their reduced likelihood of contact and visitation and make their attendance of parenting programs troublesome (Salveron et al., 2009:268). These challenges have a direct influence on birth parents' attempts at reunification with their children.

Many of the parents involved with the child welfare system are coping with a "constellation of complex issues", including poverty, alcohol and drug abuse, mental health issues, domestic violence and the stressful demands of single parenting. These concerns have a profound effect on their ability to provide adequate parenting (Salveron et al., 2010:229). The issues they face are complicated and likely to challenge and confuse parents' ability to access services and thus may reduce the family's chances of reunification. D'Andrade and Chambers (2012:2132) and Salveron et al. (2010:242) propose that these parents ought to be purposely assisted in addressing these problems by connecting them to the relevant services.

Birth parents in general report emotional suffering, grief, depression, rage, fear and powerlessness due to their forced separation from their children and their involvement with child protection services (Haight et al., 2005:461). Bowyer (2009:25) relates that the birth parents who participated in her research project experienced an "overwhelming feeling" of their "lives being out of control". In some cases one key event, such as a parent being incarcerated, triggered the care proceedings, but more often parents described a long "process of anxiety" concluded in their child / children going into care. Post-removal issues include stigmatisation because of having children in care, isolation, low self-esteem and shame (Salveron et al., 2009:267). Not only do birth parents have to deal with the issues precipitating the removal of their children, but also with the overwhelming emotions accompanying the removal of the child / children and the resulting sense of shame.

The vast majority of birth parents express the desire for their children to return to their care, but practise has shown that returning home is rarely an easy process for children and their birth families. In many instances birth families seemed to receive less support than foster families for dealing with "equally difficult" children (Malet, Mcsherry, Larkin, Kelly, Robinson & Schuboltz, 2010:78). Studies have shown that

birth parents' attributes that contribute toward a successful return home has been linked to a good attachment relationship between the child and the birth parent, as well as the parents' motivation to change and seek help. Support from social services in the form of purposeful and appropriately supported contact, a regularly assessed and steady-paced return process and after-care support services contributed positively to successful reunification (Malet et al., 2010:78). The ideal in working towards returning foster children to their birth parents is a partnership between motivated parents and assistance and careful planning by an involved caseworker.

### **2.3.3.2 The foster child**

A general assumption in the nineteenth century was that by separating children from their origins, they are “rescued” and will have minimal problems. However, it is now believed that many of these children have problems even after being “saved” and are not seen as “children without families”, but as “children from families with problems” (Nutt, 2006:7). The foster child is a child who in all probability enters the foster care system with insecure attachments, developmental and/or cognitive delays, behavioural disorders, psychiatric disorders and/or chronic medical health problems (Whenan, Oxlad & Lushington, 2009:752). This sets the stage for a situation where much is required of the foster parents in re-parenting a child who has suffered many wrongs in the care of their birth family.

The significance and importance of secure caregiver-child relationships in children's well-being, is widely recognised. Thomas (2005:368) defines *bonding* as “the strong mutual emotional attachment or bond that occurs between the newborn and an immediate nurturing adult. This bond tends to continue over the following years, even in the face of harsh treatment of the child by the adult”. Children form attachments with their birth parents and depending on the quality of the parent-child relationship, different attachment styles develop (McWey et al., 2010:1339). These attachment styles can be classified as a secure attachment, ambivalent-insecure attachment, avoidant-insecure attachment or a disorganised-insecure attachment (Lesch et al., 2013:1102). The nature and quality of the attachment a child has formed with his or her caregiver has an enormous impact on any future significant relationships.

Securely developed attachments in young children have positive consequences that can extend into adulthood. Children who are securely attached to a caregiver are more likely to cooperate with the caregiver, have positive self-esteem and positive relationships with others. The child would have learnt that others can be relied upon for emotional and social support and that he/she is worthy and loveable (Lesch et al., 2013:1101). When a warm and trusting relationship has been built over time, the child forms a set of expectations about the availability of attachment figures and the likelihood that they will provide support in times of stress. This image serves as an “internal working model” for the child, a term originated by John Bowlby (Berk, 2009:427). The internal working model becomes an important part of the personality and serves as a manual for future relationships.

The concept of bonding or attachment is fundamental in understanding the relationship between children in foster care and their birth parents. In the majority of cases where children have been placed in foster care, they lived with one or both birth parents at some point in their lives and formed a certain type of attachment to their parent/s. For many children in foster care, their early experiences with their mothers or caregivers did not result in a warm and trusting relationship, and their internal working model may be one of not trusting adults to meet their needs (Lesch et al., 2013:1101). Many children who enter the foster care system are pre-schoolers - an age where the parent-child relationship undergoes considerable development and is especially vulnerable to disruption (Haight et al., 2002:177). When birth parents have had difficulties with substance abuse, mental illness and/or domestic violence, it affects their ability and capacity to look after their children and an unhealthy or insecure attachment is likely to develop (Salveron et al., 2009:268). Consequently, foster children are at a high risk for developing attachment disorders (Lesch et al., 2013:1103). The existence of an attachment disorder has significant bearing on the foster child’s ability to form a relationship with his / her foster parent/s and the “success” of the foster placement.

In many instances, foster children do not only have the disadvantage of disrupted and insecure attachments, but the vast majority of foster children have histories of recurrent interpersonal trauma brought about by their caregivers. This type of trauma is often referred to as complex trauma and specifically refers to exposure to at least

two of the following interpersonal traumas: physical abuse, sexual abuse, emotional abuse, neglect and domestic violence (Greeson et al., 2011:92). Greeson et al. (2011:92) conducted a study through the National Child Traumatic Stress Network (NCTSN) in which 2 251 youth in foster care, were involved. All of the participating youth had been referred to the NCTSN for treatment. An overwhelming 70, 4% of the youths had been exposed to at least two of the traumas that constitute complex trauma and 11, 7% reported being exposed to all five types. These researchers concluded that children who have complex trauma histories have significant higher rates of internalising problems, posttraumatic stress and clinical diagnosis than youth with other types of trauma.

From the above discussion, one can conclude that children who have been removed from their parents' care "arrive" in foster care placements with much emotional damage and trauma that will most probably have a significant impact on their functioning within the foster family. Foster carers thus have a significant role to play in parenting the children who have been placed in their care.

#### **2.3.3.4 The foster carers**

Fostering is by definition a temporary arrangement, but, at the same time, a foster carer is responsible for all the ordinary and regular experiences associated with a child's life: peer relationships, academics, community activities and a normal family setting - fostering is about providing a "normal" life" (Nutt, 2006:7). Foster carers can range from being friends of the birth family, extended family or "stranger carers" to the child. In most countries, any person may apply to be a foster carer, but they are obligated to undergo a thorough assessment process before being approved. Once they have been approved and registered with a local child welfare agency, they are expected to work in a partnership with the agency in order to care for the children placed with them (Nutt, 2006:9). Being a foster carer means fulfilling a demanding and challenging role that forms part of a network that has been formed around a child removed from their parents' care.

Foster carers are often seen as extra-ordinary people because much is expected of them in their role in the foster care system. The children who have been placed in

their care are often there because of the abuse and neglect they had suffered at the hands of their birth parents (Crum, 2010:185). The foster carers typically find themselves caring for children who have insecure attachments, behavioural disorders, psychiatric disorders, developmental and/or cognitive delays, academic difficulties and chronic medical health problems (Whenan et al., 2009:752). Nutt (2006:10) points out that foster carers do not only have to demonstrate the concern of a parent, but also act as though foster children are a professional responsibility – they have to be “parents plus”.

Foster carers are usually provided with training by the social agency that screened them. Aspects that are covered during their training include (Van Schalkwyk, 2012:2):

- The legal status and responsibilities of the foster parent
- Helping a child transition from one placement to another
- The relevance of attachment and trauma in the life of the foster child
- Dealing with the foster child’s experience of loss and grief
- The legal status and rights of the birth parents
- Aspects with regards to contact with birth parents – preparing the foster child for contact and dealing with emotions and behaviour after contact.

Empirical evidence has demonstrated that inadequate training is associated with higher placement failures and poor parenting to at-risk children (Crum, 2010:186). Despite adequate training, foster carers often feel unprepared to manage or understand the behaviour and needs of the child / children placed in their care. Because of severe shortages of foster carers, many are asked to provide care beyond the scope of their training and/or of their perceived capacity to deal with this group of children. Issues regarding confidentiality and privacy further compound the problem as foster carers are often left in the dark when it comes to the experiences of the child placed in their care. This may result in foster carers having little insight into the underlying issues surrounding their foster child’s behaviour and emotional difficulties (Whenan et al., 2009:753). Training and support of foster parents are of paramount importance in providing the best possible chance of a successful placement.

The overall objectives for foster carers are to stabilise the foster child's life, ensure access to appropriate services and to assist with good physical and mental health development. These objectives need to be attained in the face of all the considerable adjustments a child in foster care has to make (Whenan et al., 2009:752). Of primary importance though is the formation of healthy attachments between the foster carers and the child in their care. When healthy attachments are not formed and the foster parents have to deal with the exhausting task of providing for the basic needs of foster children, placement disruptions may occur. This may lead to long-term difficulties for foster children as it reinforces their distrust of adults and the care system (Crum, 2010:185). In light of these demands and the responsibilities placed on the foster carer/s, their motivation to become involved in fostering is often the driving force in their commitment to the fostering process.

Nutt (2006:13) reviewed much research in terms of the motivating factors in becoming a foster carer. Many foster carers believe that they have something to offer needy children, that even though fostering is difficult and demanding, it is worthwhile and that fostering fulfils compelling and unconscious needs of the carer. In light of this, it is evident that foster care breakdowns would cause heartache and disruption not only for the foster child, but also for the foster carers involved.

Placement breakdowns are one of the most significant contributors to foster parent attrition (Brown, 2008:539). The question is then: what would contribute towards successful fostering? Successful fostering is often related to the outcomes for the *child* - whether the child has benefited and been helped - rather than for the carers (Nutt, 2006:13). Brown (2008:539) refers to fostering literature and states that there is evidence that contributors toward successful foster placement are present both *within* and *outside* the foster family. Qualities of a foster parent (Brown, 2008:539; Nutt, 2006:13) to have a positive impact on the success of the placement are:

- Being motivated by a desire to be of help in the community
- Being warm and having an enjoyment of children's company
- Having a responsive and balanced parenting style
- Being knowledgeable about good parenting, problem solving and child discipline techniques

- Being willing to integrate the child into their family
- Being available to their foster child/children, and
- Being willing to work in an inclusive way - that is, with both the child's birth family and the child protection agency.

When one takes into consideration that the harm that was done to a child who has been removed from their parents' care, has been mainly within the parent-child relationship, the role of the foster parent/s in the life of that child is incredibly significant. Within this relationship, the major part of a child's healing can take place.

### **2.3.3.5 The social worker**

The role of the social worker in foster care is filled with many tensions and complexities. Alpert and Britner (2009:136) argue that the foster care system is inherently punitive – the presence of state authority that holds the power to permanently remove foster children from their birth parents, permeates the foster care process. It is within this environment that the social worker is expected to communicate empathy and respect for parents, gain their trust, highlight their strengths and develop their competencies and resources. The reality is that these parents often are not only grappling with the issues that precipitated the loss of their child or children, but also with the trauma of the loss itself. This inevitably leads to feelings of fear, shame, guilt and immense anger in their relationship with their caseworker. The social worker is faced with the challenge of building and maintaining supportive relationships with birth parents while holding them accountable for the concerns that precipitated the removal of their child (Alpert & Britner, 2009:136; Gerring et al., 2008:6; Haight et al., 2002:175). From a review of literature done by Alpert and Britner (2009:135), they summarised the role of the social worker in foster care as involving:

- Respect for parents
- Listening to and addressing their concerns
- Focusing on strengths
- Helping them stay emotionally connected to their children
- Breaking down the power differential between client and worker, and



- Communicating empathy and concern for all family members while clarifying and gently asserting authority.

These authors emphasise the importance of caseworkers to be willing to take into account the parents' perspectives and to respect and incorporate parents' knowledge about their families. This should be used to develop a service plan, in partnership with the parents, based on the parent's personal goals. When these principles are in place and a strong worker-parent relationship is formed, the outcomes are generally positive. Respect and trust allows for open and honest communication and provides birth parents with the opportunity to express their grief and anger over their child's removal without fear of blame or judgement. Alpert and Britner (2009:137) and Gerring et al. (2008:9) emphasize that parental self-esteem, engagement in services and service completion tend to increase as parents feel more empowered, supported, respected and understood.

As much as these objectives for foster care services are important, humane and critical, social workers seem to struggle in practise with many difficulties and frustrations. Studies have shown that foster care workers often struggle with their own emotions of grief, anger and powerlessness, as well as burnout and secondary trauma. Some social workers have even expressed condemnation of birth parents, scepticism regarding the ability of parents to rehabilitate or admitted to developing a punitive approach when a parent has abused their trust. Caseloads are often large and caseworkers experience a lack of time and resources that impede on family centred service delivery (Alpert & Britner, 2009:136; Haight et al., 2002:175, Kovalesky, 2001:765). The assumption is therefore that in light of the immense challenges that social workers in foster care face, that they would be adequately supported and equipped to deal with these challenges.

Gerring et al. (2008:6) point out that social workers are often not adequately trained in "the relational and therapeutic skills that give power to development and growth". They recommend that social workers be trained in how to help birth parents to engage in services, on the damaging impact of multiple family stressors on any parent, developing a working knowledge of parents' defensive patterns and developmental needs and an understanding of "relational processes".

Building a relationship and getting to know the child client in foster care is also an essential but often neglected aspect in foster care services. Greeson et al. (2011:105) identify the following basic goals for the children that are served by social workers: reduced placement disruptions, better academic and health outcomes and improved emotional and social functioning. In a study done by Jones and Kruk (2005:417) the key system problems identified by youth were inconsistent workers, constant moves and high caseloads. They quote a foster child in their research who wrote the following: “(Social workers) need more time and less caseloads so that they can spend time to know the individual youths and foster parents and see the whole picture to make the right decisions”. These researchers mention that although many foster children in their research made positive comments about their social workers, there were also many criticisms such as “...they didn’t listen when I just needed to vent”; “they don’t care” and “they were too busy to hang out”.

Another key aspect in foster care services is the monitoring of parental visitations. These visitations provide social workers with the opportunity to better understand the parent-child relationship but also place the social workers in a position where they have multiple and sometimes conflicting roles. Haight et al. (2002:195) indicates that social workers are expected to support children’s attachment to their parents to facilitate reunification, protect children from possible harm from their parents and evaluate the parent’s progress and the quality of the parent-child relationship.

Working with birth parents, the foster child and foster carers requires excellent communication and negotiation skills and often places social workers in a position with many conflicting demands, needs and expectations. Support and training by the child protection agencies for the social workers are a necessary in order to develop specialised skills in this demanding field of family social work.

## **2.4 REUNIFICATION**

### **2.4.1 The nature of reunification**

A generally accepted social work principle is that effective work with children should take into account their origins, family networks, cultural background and upbringing.

This belief was generated by ecological theory – the child placed away is “a product or symptom of a dysfunctional interaction between the family and its environment” (Nutt, 2006:7). Consequently, any help to a child should involve the whole family and today most child welfare agencies support a family-centred approach to foster care case work. Alpert and Britner (2009:135) argue that the crux of this approach is a collaborative parent-caseworker relationship as a means to maintaining parents’ engagement in services, with the assumption that continued engagement will drive parents toward reunification.

According to Biehal (2007:808), there are three commonly held assumptions among social work practitioners about reunification. Firstly, if professionals can ensure that children remain in care for only a short period, preferably no longer than six weeks, there is a greater chance that they will return home. Secondly, there is the view that regular contact with birth parents will lead to a return home. Lastly, there is the common assumption that reunion with their families is a positive outcome for children in care. Biehal (2007:809) questions whether these assumptions are still realistic in light of the changed childcare population of today and the multi-faceted problems that the parents of children in care, face.

In a South African study conducted by Lesch et al. (2013:1107) the researchers came to conclusions that support Biehal’s notion. Social workers in this study indicated that they were very much aware of the importance of nurturing and promoting the relationships between foster children and their birth parents, but because they rarely experienced cooperation from birth parents and were faced with a lack of resources in order to assist parents, reunification between foster children and their birth parents has become a rare occurrence in practice. The researchers concluded that social workers are forced to concentrate their limited resources rather on supporting a successful foster placement, than working towards reunification with birth parents.

#### **2.4.2 Contact between birth parents and their children in foster care**

One could argue that if foster care is by definition a *temporary* care position, working towards reunification of the child in foster care with his birth family should be of

paramount importance. Jones and Kruk (2005:407) make the following statement: “Children’s attachment to their biological families... seems to endure in spite of the obstacles created by foster care, adoption or maltreatment”. These authors also refer to research done by Daniel, Wassel and Gilligan, in which they conclude that social workers should take heed to appreciate the complexities and depth of children’s ties to their caregivers (Jones & Kruk, 2005:408). Consistent contact through parental visitations is considered the primary intervention in maintaining the parent-child relationship and an important aspect of family preservation efforts (McWey et al., 2010:1339; Shaw, 2006:1389). Although this may pose challenges to all the role players involved in foster care, it is necessary that contact should not be neglected.

Certain studies have indicated that when family ties are maintained while a child is in the foster care system, the odds of re-entry into the system after reunification, is lowered (Shaw, 2006:1389). The majority of studies associated with the importance of visitation for children in foster care and their birth parents, show that continued contact with at least one of the birth parents positively correlate to children’s psychological well-being, promotes reunification and helps to preserve links and cultural identity. These studies found that regular and purposeful contact is a significant protective factor against internalising and externalising problems, promotes resilience in foster care and that these children have fewer difficulties in forming new relationships (Anderson, 2006:48, McWey et al., 2010:1339, Salveron et al., 2010:230). Salveron et al. (2010:229) point out that the degree and reasons for contact should however differ according to the treatment goals of each specific case. If the goal of the placement is eventual reunification of a child with their family, frequent family contact is vital. If, on the other hand, a child is to remain in permanent out-of-home care, increasingly less frequent contact is generally encouraged. In the second case the objective of contact is mainly to preserve a child’s ties with his/her biological and/or cultural heritage.

There is, however, also contradictory evidence in this regard. Salveron et al. (2010:230) indicate that recent research shows that while contact is related to reunification, the relationship is not causal because factors associated with frequent and better quality contact are also linked to factors that are likely to lead to family reunification. Other studies found that children who had solid relationships with both

their foster parents and their birth parents, experienced greater loyalty conflict and that children in foster care often experience stress that can be linked to contact with their birth parents (Browne & Maloney, 2002:36; McWey et al., 2010:1339). It is also common to hear that visits with birth parents are emotionally distressing for children and may lead to emotional and behavioural problems. Many social workers and foster parents believe that in practice, children's continued contact with birth parents can be disruptive, cause their behaviour to deteriorate and negatively affect their adaptation to their foster placement (McWey et al., 2010:1339). A question that may be posed then is that if it were possible to improve the quality of contact sessions, would the impact on children be less negative and at the same time promote attachment between the birth parent and the child.

Empowering, engaging, respecting and supporting parents whose children have been removed from their care can be an important factor in improving contact between children and their birth parents (Alpert & Britner, 2009:137; Salveron et al., 2010:231). Haight et al. (2002:195) raise the concern that birth parents are often not adequately supported and coached for dealing with the psychological and interpersonal complexities of contact with their children. In a study by Haight et al. (2005:461), the researchers found that birth parents' experiences of stress and trauma due to the forced separation from their children often affect their energy levels, emotional availability to the child and ability to work together with other adults during visits and consequently affect the quality of visits.

In research done by Bowyer (2009:25), birth parents identified two key areas in maintaining relationships with their children: information about their children and contact with their children. Parents expressed how much they valued regular updates about their children's academics, school activities and health, as well as information about their children's day-to-day activities and interests. Being kept up to date with this kind of information helped parents manage conversations with their children and informed them in terms of their choice of, for instance, birthday presents. Parents' access to this sort of information depended largely on the attitudes and efficiency of the social workers and foster carers.

It is generally accepted that when children have been removed from their parents' care, efforts at reunification should be at the top of the agenda. However, there are many challenges in this regard as this requires active case planning, the connecting of clients to resources and maintaining and improving the attachment between children and their birth parent/s through regular, meaningful contact. Contact in itself is often stressful to all the parties involved and yet is essential in maintaining and possibly even improving the attachment between the child in foster care and his/her birth parent/s.

## **2.5 CONCLUSION**

Although children should ideally grow up in their birth parent's care, reality may differ from this ideal. Foster care serves as an alternative care position when children are removed from their parents' care through statutory intervention. Foster care is by definition a temporary care position with the ultimate aim of reuniting foster children with their birth families. Reunification services by child welfare agencies are therefore of paramount importance. However, in practise it is evident that the minority of foster children are returned to their birth parents. This seems largely due to changed child welfare legislation that has resulted in increasing the threshold of children entering the care system. These children generally enter as a result of serious reasons, such as multiple traumatic events perpetrated by the caregiver.

South Africa has seen a dramatic increase in children placed in foster care since 1998. This has had enormous fiscal implications for the country, as well as for social workers and child protection agencies. Although certain guidelines and protective measures have been put in place through the Constitution and the Children's Act of 2005, social workers in this field report that they face many challenges on grassroots level.

There are four main role players in foster care, namely - the social worker and child protection agency, the child in foster care, the birth parents and the foster carer/s. These role players should theoretically work together towards reunification, but the inherent tensions of each of these positions, make for a complex and difficult process. A crucial component of this process is the birth parent-case worker

relationship. Birth parents often experience this relationship as having underlying punitive qualities making it difficult for them to fully engage in the process. The many difficulties they face in their day-to-day lives, as well as having to deal with the emotions as a result of the loss of their child / children from their care, complicates this relationship even further. The relationship between these two parties requires exceptional interpersonal and negotiating skills on behalf of the social worker and specialised training is often valuable and most beneficial.

In order to maintain and possibly even strengthen the relationship between the birth parent/s and their child / children in foster care, contact is essential. Many studies have shown that regular contact is beneficial to the child on many levels. There is however also research and the reports of social workers and foster parents, that have shown the contrary. Nevertheless, if reunification is at all an option in any given case, contact is an absolute necessary part of the process and all the role players should be committed to support, encourage and work towards the success of it.

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## CHAPTER 3

# THE EMPIRICAL PROCESS

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### 3.1 INTRODUCTION

The question this study aims to answer is: What are birth parents' experiences when they have contact with their children who are in foster care? The goal was to explore and describe these experiences by interviewing birth parents and deriving meaning from the data that had been collected during the research project. This chapter provides an overview of the research methodology used for drawing the empirical findings and conclusions. The ethical aspects that guided the empirical process will also be discussed.

### 3.2 RESEARCH APPROACH

The researcher, in her role as a social worker in a family protection organisation, had often supervised contact sessions between birth parents and their children in foster care. The researcher's observation was that often, instead of contact sessions being a meaningful occurrence between a parent and the child they had been separated from, it was a stressful event for all the concerned parties. It became clear through searching foster care related literature that there was a need to explore the various experiences of birth parents. This motivated the researcher to explore birth parents' experiences of contact with their children in foster care through one-to-one interviews with the aim to contribute towards an improvement of the services rendered to them.

The research approach used in this study was thus a qualitative approach. This methodology was selected as the researcher used an exploratory approach to find answers to seemingly complex phenomena through personal and in-depth data (Fouché & Delpont, 2011:64). The data collection method that was most suited to reaching the objectives was to conduct personal, one-to-one interviews. In so doing, the birth parents were able to contribute toward a better understanding of how they experience contact sessions with their children and how these experiences may be improved (Nieuwenhuis, 2007a:87). The researcher was particularly interested in the



“rich descriptive” data the participants would be able to provide when given the opportunity to relate their experiences, as well as providing the researcher with an opportunity for probing when clarification and a deeper understanding was needed.

### **3.3 TYPE OF RESEARCH**

Applied research addresses a specific concern that endeavours to offer practical results (Neuman, 2011:27). This study took the form of applied research since the goal was to explore the individual experiences of birth parents when they have contact with their children in foster care. In gaining a better understanding of birth parents’ experiences, social workers may be able to facilitate improved, quality contact between birth parents and their children. In practice, this may contribute towards less stressful contact for the birth parents and the child / children concerned and better utilisation of the opportunity to maintain or improve the attachment between the child and the birth parent.

### **3.4 RESEARCH DESIGN AND METHODOLOGY**

#### **3.4.1 Research design**

Mouton (2005:55) defines the research design as “a plan or blueprint of how you intend conducting the research”. In accordance with the goal of the study, the researcher was interested in becoming better acquainted with the experiences of birth parents during contact sessions with their children in foster care. This required of the researcher to obtain information from birth parents that have had contact sessions with their children. The information that was obtained was used to identify patterns and themes in order to gain insight into the research topic (Fouché & Schurink, 2011:320). A single interview would not have sufficed, as a multi-perspective analysis was needed to gain a deeper understanding of birth parents’ perspective of this topic (Nieuwenhuis, 2007a:75). Consequently, this research project required a collective case study design as the researcher interviewed a number of participants to collect the necessary data.

Disadvantages of the design were that issues around validity and generalizability could arise. However, an advantage is that the design provided descriptive data and greater insight into and understanding of this specific situation. These are essential characteristics of a qualitative approach (Fouché & Schurink, 2011:322; Nieuwenhuis, 2007a:80). It can thus be concluded that a collective case study design was most suitable for this specific study as it provided the opportunity to look at the cases collectively, make comparisons and identify themes and patterns from the whole.

### **3.4.2 Research population, sample and sampling method**

Sampling is used in qualitative research; however, sampling is less structured, less quantitative and not as strictly applied as in quantitative research (Strydom & Delpont, 2011b:390). Since the qualitative researcher does not know the size of the population or members of the population beforehand, non-probability sampling is used. Furthermore, Strydom and Delpont (2011b:390) emphasise that the important matter in sampling is that the researcher finds individuals, groups or settings where the processes being studied are most likely to occur.

In this particular study, the researcher made use of purposive sampling, as participants were selected because of their potential to provide the richest sources of information to answer the research question (Nieuwenhuis, 2007:79). The researcher purposively selected birth parents according to the following criteria:

- Birth parents who have children in foster care and who are receiving reunification services from the Christian Social Council North
- Birth parents should be a couple, either married or cohabiting
- The child or children should have been in foster care for a period longer than six months
- Birth parents should have had a minimum of three contact sessions with their child/children
- A contact session should have occurred within the last six months

The researcher's initial goal was to purposively select 10 to 15 birth parents and if necessary, use systematic sampling should the list exceed 15 birth parents, but identifying birth parents, who met the above criteria, was more difficult than initially envisioned. These birth parents were sourced through the family reunification social workers of the Christian Social Council (CSC) North in Pretoria. The interviews with the participants involved in the pilot study were also included, as the participants provided valuable information. Saturation was reached when participants started giving similar responses. In the context of this study, the researcher reached the point of saturation by the tenth interview.

### **3.4.3 Data collection method**

For the purpose of this specific study, data was collected in face-to-face interviews "in order to gain a detailed picture of a participant's beliefs about, or perceptions or accounts of, a particular topic" (Greeff, 2011:351). As such, the researcher conducted semi-structured interviews with the assistance of an interview schedule. In order to ensure the appropriateness and effectiveness of the interview schedule, a pilot study was conducted to test it (Bless et al., 2006 in Strydom (2011b:237). The pilot study was carried out by interviewing two participants who met the necessary criteria (Strydom & Delport, 2011b:394). It was clear from the interviews that the open-ended questions used in the interview schedule were well suited to the particular study, as it seemed that the participants had an overwhelming need to relate their experiences with regards to the research topic. The five questions that were formulated seemed to cover the different aspects that were necessary for the purpose of the study. Therefore, the researcher made no changes to the interview schedule and used it as is. As mentioned earlier in the chapter, the information shared by the two participants in the pilot study was included with the other data that was collected, as the researcher found the information to be rich and meaningful.

After conducting the pilot study, the various participants were seen individually at their homes during home visits. Conducting the interviews in the homes of the participants and not at the organisation's offices as originally intended, proved to have been a better option. It was clear from the interviews that the majority of the participants had a very negative experience of the "Welfare's" offices and this might

have negatively influenced or inhibited participants sharing their experiences during the interviews. With the permission of the participants, an audio recorder was used to capture the data from the interviews. The researcher ensured participants of the confidentiality of information that was shared, as this was a concern to many of them.

#### **3.4.4 Data analysis**

The researcher made use of Creswell's (2013:180) data analysis strategy in this phase of the research process. Creswell suggests that the process of data analysis is flexible and circular rather than fixed and linear. This process consists of firstly preparing and organising the data, then reducing the data to themes and finally presenting the data in tables and through discussion (Schurink, Fouché & de Vos, 2011:403). The researcher's data analysis process was characterised by the following steps:

- **Organising the data**

The researcher firstly meticulously transcribed the interviews conducted with the participants and then organised the transcribed interviews into separate files. According to Creswell (2013:183), it is important to read the interviews in their entirety in order to gain a sense of the database as a whole. The researcher read and re-read the transcripts to become acquainted with it. To aid the initial process of exploring the database, the researcher made handwritten notes and memos in the margins.

- **Describing and classifying the data**

The next step was to move from reading and memoing to describing, classifying and interpreting the data (Creswell, 2013:184). During this stage, the researcher focussed on developing colour codes and categories that represent the essence of the qualitative data analysis. Coding involved combining the data into small categories of information and then assigning a label to the code. The researcher then moved beyond coding and identified six general themes that have emerged from the data.

- **Interpreting the data**

Creswell (2013:187) describes the next step of interpretation as “abstracting out beyond the codes and themes to the larger meaning of the data”. The researcher

endeavoured to make sense of the data by linking her own interpretation to the larger research literature developed by others.

- **Representation of the data**

Lastly, the researcher presents her data in the form of a research report written under supervision of Prof. C.E. Prinsloo from the Department of Social Work and Criminology at the University of Pretoria. When this stage in the research process had been reached, the researcher would have determined how participants experienced contact sessions with their children. The experiences, perceptions, understandings and needs of the participants would have been of great value to the researcher. The researcher used an inductive analysis to allow research findings to emerge from frequent or significant themes found in the raw data.

### **3.4.5 Trustworthiness**

An important consideration in this phase is that of trustworthiness. Lietz, Langer and Furman (2006:444) express the opinion that social work's mission is to raise awareness of the needs of underprivileged populations. Qualitative research in social work should thus reflect the thoughts, feelings and experiences of the people involved in this field of research as closely as possible and in so doing establish trustworthiness. In this particular study, the researcher endeavoured to do this by making use of semi-structured interviews with the intent of giving the participants the opportunity to express their thoughts, feelings and experiences. After each point of the research schedule, the researcher reflected her understanding of the information the participant shared in order to verify whether her understanding is accurate.

Threats to trustworthiness can include problems such as reactivity and biases from both the researcher and the participants (Lietz et al., 2006:444). In this particular study the researcher endeavoured to address these threats firstly through peer debriefing. This included engaging in dialogue with colleagues, the researcher's supervisor at the CSC and the researcher's study leader, Prof. C.E. Prinsloo. Secondly, the researcher kept an audit trail throughout the data analysis process by describing the research procedures and allowing critical thinking to occur. The

researcher also ensured member checking as she verified with participants if she understood their responses correctly.

### **3.5 THE PILOT STUDY**

A pilot study is a prerequisite for the successful implementation and completion of a research project and is a fundamental part of the research process. It is necessary for the exact formulation of the research problem and for the researcher's tentative planning of the modus operandi and scope of the investigation (Strydom, 2011b:236). Strydom (2011b:237) finds Bless, Higson-Smith and Kagee's (2006:184) definition of the pilot study the most encompassing: "A small study conducted prior to a larger piece of research to determine whether the methodology, sampling, instruments and analysis are adequate and appropriate." The importance of a pilot study cannot be underestimated and is an essential component of the research process.

In qualitative research, the pilot study is normally informal and a few participants who have the same characteristics as those in the main investigation can be involved in such a study (Strydom & Delpont, 2011b:394). In this specific research project, the researcher planned to interview two birth parents that have children in foster care and have had a minimum of three contact sessions with their children for the purpose of the pilot study. The interview schedule the researcher used in the main project was tested during the pilot study.

### **3.6 ETHICAL CONSIDERATIONS**

In social science, the object of study is humans and as such brings about unique ethical issues (Berk, 2009:65). Strydom (2011a:113) states that data should never be gained at the expense of human beings, while Mouton (2005:238) describes the ethics of science simply as concerning "what is wrong and what is right in the conduct of research". The researcher obtained the written consent of the director, Mrs. E. Schieke of the CSC North, in order to interview birth parents of children who are in the care of approved foster parents of the CSC North. Furthermore, the researcher considered the following ethical issues, as they may have been a concern in her particular research study:

- **Avoidance of harm**

In all research, the avoidance of harm is a critical issue (Babbie, 2011:481; Neuman, 2011:148). The researcher informed participants of the potential emotional impact of the interview in that it may trigger certain unresolved emotions in the participant. Should one of the participants have felt that he or she is not willing to subject him/herself to possible emotional harm, he/she was allowed to withdraw from the research project. If participants did feel negatively impacted by the interview, they could have been referred to the social worker or psychologist at the CSC's Children's Centre for counselling. The researcher found however that the participants were more than willing to share their stories and seemed to find a sense of relief in the candid sharing of their experiences and thoughts.

- **Voluntary participation**

When the researcher contacted potential participants, she made it clear that participation in the research study is voluntary and that they should not feel pressurised or obligated in any way to become involved (Strydom, 2011a:116). Some of the birth parents seemed eager to participate and expressed the hope that in sharing their own experiences they would be able to help others in similar circumstances. Some birth parents expressed their disdain for social services and/or fear of being penalised for the sharing of their viewpoints. These birth parents preferred not to participate.

- **Informed consent**

Written informed consent should clearly indicate to a participant the goal of the investigation, the expected duration of involvement, the procedures that will be followed, the possible advantages, disadvantages and dangers that respondents may be exposed to, as well as the credibility of the researcher (Strydom, 2011a:117). The researcher took time before the start of the interview to explain the goal of the study, the expected duration of the interview, the procedures that would be followed and the possibility of them experiencing some emotional triggers when interviewed. The researcher then provided each participant with an informed consent form with all the relevant information to peruse and to sign if he/she was still willing to participate (Babbie, 2011:480; Strydom, 2011a:117). Participants were informed that they could

withdraw from the study at any time without any negative consequences. They were informed that the interviews would be audio-recorded for the purposes of transcribing the data.

- **Deception of subjects and/or participants**

A fundamental principle of integrity during research is that researchers should in no way deceive those people involved in their research study. Deception of subjects can be described as withholding information or offering incorrect information in order to ensure the involvement of participants when they would otherwise possibly have refused (Corey et al., 1993 in Strydom, 2011a:119). In this particular study there was no motive for deceiving participants. However, many of the participants seemed suspicious of social workers in general. The researcher, being a social worker herself, thus provided all relevant information to participants by using the informed consent letter, so that they would not feel deceived in any way (Neuman, 2011:149). Participants were thus informed of all relevant aspects of the research study.

- **Violation of privacy/anonymity/confidentiality**

The safeguarding of the privacy and identity of respondents is very important (Neuman, 2011:152-153). Some of the participants in this particular research project expressed their concern that access to their children may be jeopardised in some way if they are honest in their responses. Participants were thus informed of all the steps that would be taken to protect their identity or privacy, as well as the measures that will be taken to ensure that the information they provide will be safeguarded (Strydom, 2011a:119). These steps involved ensuring that no names or identifying particulars are used by making use of pseudonyms, when recording interviews or reporting on the findings of the research.

- **Debriefing of participants**

Debriefing sessions can be used after the study to work through participants' experiences of the study and its possible aftermath. Researchers also need to rectify any misunderstandings or false impressions that may have been formed by participants after completion of the project (Strydom, 2011a:122). There was a concern that by interviewing participants on the particular subject of the study, that they may have a negative emotional reaction to the sharing of their experiences. The



researcher understands however that the interviews served as a cathartic experience for all of the participants. Even though many of the participants became emotional during the interviews, the interviews ended with a sense of relief. The majority thanked the researcher for the opportunity to have relayed their experiences in an open and frank manner. Debriefing at the end of the interviews thus served the purpose of handling the emotional responses and ending the process in a relaxed way. Participants were aware that their contribution could have emotional effects but that the responses could result in recommendations about contact visits between birth parents and their foster children.

- **Actions and competence of researchers**

Researchers are obliged to ensure that they are competent and adequately skilled, especially when sensitive exploration is involved. Research can be unsuccessful or produce invalid results if even well intentioned researchers or fieldworkers are not sufficiently qualified or equipped and if the project is not adequately supervised (Strydom, 2011a:123). The researcher is a social worker with many years of experience in the field of social work and in particular in working with families and children. The researcher attempted to conduct the interviews in a professional and sensitive manner and it took place under the guidance of a research supervisor and the researcher's manager at the CSC.

- **Publication of the findings**

Introducing the reading public to the findings of a study is essential for it to be viewed as research. The findings of the study should be presented in written form, and information must be formulated and communicated clearly and unambiguously (Strydom, 2011a:126). An ethical obligation rests on all researchers to ensure that the investigation proceeds correctly and that there is no deception in any form (Babbie, 2011:487). The researcher complies with the standards and regulations of the University of Pretoria regarding the publication of findings. The research proposal was submitted to the Postgraduate Committee of the Faculty of Humanities and to the Ethical Committee of the Faculty of Humanites, University of Pretoria, and the researcher adhered to all necessary research regulations stipulated by the university. Both the participants and the CSC were informed that the research report would be published and data would be stored in the Department of Social Work and

Criminology, University of Pretoria, for a period of 15 years. The researcher explained to the participants and the CSC that the final report remained the property of the University of Pretoria.

### 3.7 PRESENTATION OF EMPIRICAL DATA

The relevant biographical information of the ten participants interviewed for the research study is summarised in the table below. Pseudonyms have been used to protect the identity of the participants.

**Table 1: Biographical information**

| Name    | Gender | Marital status        | Number of children in foster care | Period in foster care | Number of contacts             | Last contact                        |
|---------|--------|-----------------------|-----------------------------------|-----------------------|--------------------------------|-------------------------------------|
| James   | Male   | Married               | 2 children                        | 6 years<br>5 years    | Many (once a month)            | 1 month prior to interview          |
| Nicole  | Female | Married               | 2 children                        | 6 years<br>5 years    | Many (once a month)            | 1 month prior to interview          |
| Belinda | Female | Married               | 2 children                        | ± 1 year              | 5 times                        | 2 months prior to interview         |
| Hendrik | Male   | Married               | 2 children                        | ± 1 year              | 5 times                        | 2 months prior to interview         |
| Anne    | Female | Co-habiting           | 1 child                           | ± 4 years             | Many times                     | Child is 19 years, frequent contact |
| Renier  | Male   | Married               | 1 child                           | 7 years               | Many times (every second week) | Two weeks prior to interview        |
| Maria   | Female | Married               | 1 child                           | 7 years               | Many times (every second week) | Two weeks prior to interview        |
| Hannes  | Male   | Divorcing             | 2 children                        | 5 years<br>2 months   | Many (currently once a month)  | Three months prior to interview     |
| Barend  | Male   | Engaged to be married | 1 child                           | 7 months              | 6 times                        | 2 weeks prior to interview          |
| Colette | Female | Engaged to be married | 1 child                           | 7 months              | 6 times                        | 2 weeks prior to interview          |

Ten birth parents who have children in foster care participated in the study. One couple's son went into foster care recently (less than one year), but the majorities' children have been in foster care for over a year and some for a period longer than 5 years. The majority of participants have had multiple, regular contacts with their children with one couple who have only had five contacts in a period of more than one year.

### **3.8 DISCUSSION OF THEMES AND SUBTHEMES**

#### **3.8.1 Introduction**

It is important to note that the empirical research results will also be discussed in light of Urie Bronfenbrenner's ecological systems theory, as this was the theoretical framework used in this study. Ecological systems theory views the child as "developing within a complex system of relationships affected by multiple levels of the surrounding environment" (Berk, 2009:26). Although the focus of this study is on birth parents (and not on the foster child as such), they form an integral part of the child in foster care's ecological system and more specifically, a part of the child's mesosystem. The foster parents, social workers and the child protection agency involved with both the child and the birth parents, form an essential and significant part of the child's ecological system and are in mutual interaction with each other with changes in the one system affecting others (Jack, 2012:129). Hong, Algood, Chiu and Lee (2011:864) point out that understanding these complex relationships between the child and his or her social ecology, are also important in the development of appropriate intervention and policy processes for foster children and caregivers.

According to Hong et al. (2011:863) in the context of foster care and the ecological systems theory, the microsystem refers to the foster carers of the child, the mesosystem to the birth parents, the exosystem to the social-support network outside the family, the macrosystem to policies surrounding foster care and child protection, and the chronosystem to welfare reform.

### 3.8.2 Identified themes and subthemes

**Table 2: Identified themes and sub-themes**

| Theme   | Subthemes   |
|---|---|
| <b>Theme 1:</b><br>The removal of children from birth parents' care             | <ul style="list-style-type: none"> <li>• <b>Subtheme 1:</b> Birth parents' emotional experiences of the removal of their child / children</li> <li>• <b>Subtheme 2:</b> The lack of help and support in dealing with the pain of the removal</li> <li>• <b>Subtheme 3:</b> Experiences of the social workers' involvement in the removal of the child / children</li> </ul>                                     |
| <b>Theme 2:</b><br>Interaction with social worker and child protection services | <ul style="list-style-type: none"> <li>• <b>Subtheme 1:</b> Experiences of the manner in which participants' are treated by Child Protection Services</li> <li>• <b>Subtheme 2:</b> Negative experiences of social workers</li> <li>• <b>Subtheme 3:</b> Positive experiences of social workers</li> </ul>  |
| <b>Theme 3:</b><br>Contact sessions with children                               | <ul style="list-style-type: none"> <li>• <b>Subtheme 1:</b> Emotional experiences in anticipation of and during contact sessions</li> <li>• <b>Subtheme 2:</b> Practicalities surrounding contact sessions</li> <li>• <b>Subtheme 3:</b> The involvement of social workers during the contact sessions</li> <li>• <b>Subtheme 4:</b> The presence of the foster parent/s during the contact sessions</li> </ul> |
| <b>Theme 4:</b><br>The voice of birth parents                                   | <ul style="list-style-type: none"> <li>• <b>Subtheme 1:</b> Practicalities</li> <li>• <b>Subtheme 2:</b> Time and opportunity to bond</li> <li>• <b>Subtheme 3:</b> Open communication lines</li> </ul>   |

### 3.8.3 Theme 1: The removal of children from birth parents' care

- **Birth parents' emotional experiences of the removal of their child / children**  
 The reason/s for the removal of the children from the participants' care was not part of the scope of this study and was therefore not included as a question in the interview schedule. However, seven of the participants felt the need to explain the circumstances surrounding the removals to the researcher. Relaying these stories allowed for the expression of the emotions surrounding these incidents. The researcher was struck by the intensity of these emotions, in some instances seven years after the removal took place. The son of Colette and Barend was removed from their care when he was six weeks old and had just been discharged from Neonatal

Intensive Care Unit (ICU). The researcher experienced Colette's emotion as still "raw" seven months later and that her anger had turned into rage at her perceived injustice of the removal.

Birth parents often report emotional suffering, grief, depression, rage, fear and powerlessness due to the forced separation from their children (Haight et al., 2005:461). This absolutely resonates with the experiences of the participants in this research study. The following are direct excerpts as they described their emotional experiences after the removal of their children:

- Anne: *"I was completely broken. It was as if my whole life stopped... I left my job... I just sat there... I always said my children could rather have died, because then I could've gone to a grave where I could sit and grieve... So that no-one can say: Oh no, Anne, now you are (swearword) exaggerating - stop crying"*.
- Maria, on account of her husband's anger after the removal of their daughter: *"You don't even talk to me about religion or talk about it my house" ... he even burnt his Bible."*
- Hannes: *"The parents sit with this terrible anger inside, you know, they will do anything, they want to hit or attack anyone whom comes their way... The emotions, the pain... it is really terrible... you should think twice before you say anything to someone who has been through something like that"*.
- Colette: *"You know, I don't think there is anything that will take away the pain when your child is no longer with you. There is absolutely nothing that can take that pain away. Nobody can say anything that will make things better"*.
- James: *"You see, in the beginning you are really hurt, your thoughts run wild, it is really terrible..."*
- Nicole: *"I was completely broken"*.

Gerring et al. (2008:6) surmise that families with children in placement struggle with the issues that precipitated the loss of their children, but to add to their acute distress, is the trauma of the loss itself. This was clear from the responses of the participants - the loss of their children was a traumatic experience in itself.

Further complicating birth parents' attempts at dealing with their post-removal emotions, was their experience of stigmatisation. Salveron et al. (2009:267) found that many birth parents experience stigmatisation and a resulting sense of shame from social workers, family and the community. Two of the participants mentioned their experience of stigmatisation. Belinda felt that the relevant child protection agency treated all birth parents equally and labelled them as "*bad parents*" when their children have been removed from their care. She felt that she and her husband had been treated like "*criminals*" and did not deserve being treated that way. Labelled as a "*bad*" parent placed a barrier between herself and the social workers and she withdrew under a sense of shame. Hannes mentioned that he always felt judged in the presence of social workers – suffering under the stigma of being a bad parent. The argument here is *if* birth parents could be assisted and supported in dealing with these emotions, their engagement with the social worker and the foster care process as a whole, would probably improve significantly.

- **The lack of help and support in dealing with the pain of the removal**

When a child is removed from a parent's care, it seems reasonable to expect some form of emotional support for the parent, whether from friends or family or the social worker/s involved with the case. Gerring et al. (2009:268) point out however that the majority of birth parents who have children in foster care have limited support networks to turn to in times of need. All the participants in this study indicated that they received no support from child protection agencies in terms of dealing with the profound loss of their child/ children.

As this theme started to emerge after the first three interviews, the researcher made a point of asking participants whether they had received any form of counselling, therapy or support specifically from social workers or the child protection agency who had been involved with the removal. Belinda indicated that she felt that generally no attention was given to the birth parents, but especially in the period directly after the removal when they were going through a particularly difficult time. She described the period after the removal as "*going through hell*". James' experience was that the social workers did not care about the birth parents and "*carried on as if we don't exist*".

In asking them how they managed to deal with the pain, three participants answered that they tried to deal with it on their own. Hannes mentioned that he buried the pain in himself and spoke to God about it as he felt that he could not talk to anybody else. Colette and Barend felt that they could only speak to each other about their loss, but that it caused disputes in their relationship and that they started blaming each other. Renier and Maria felt that everybody, including their family, had abandoned them and that no one stood by them in a time when they desperately needed support.

Hannes mentioned an aspect that was of a particular concern to him. He experienced overwhelming anger and sadness with the removal of his son. When he expressed his anger to social workers at the child protection agency, they experienced it as aggression and thus deemed him a danger to his child. In an attempt to guard his contact with his child, he suppressed his anger. He needed a place where he could express his emotions and felt that if social workers could show more understanding for what he was experiencing, it could have improved his relationship with the child protection agency sooner.

In light of the above, it is clear that if child protection agencies provided debriefing or therapy to birth parents in the post-removal phase, it would benefit the foster care long-term process. This service, however, would have to be provided by a person who had not been involved in the removal of the child / children. In the following section, the birth parents' emotions about the social worker/s involved in the removal, will be examined.

- **Experiences of the social workers' involvement in the removal of the child / children**

As Lesch et al. (2013:1101) point out; social workers are the professionals responsible for removing children from neglectful and abusive parents and placing them in foster homes. A reasonable assumption would be that the majority of birth parents' anger at the removal would be directed towards this person. The comments made by the participants in this study proved this assumption to be quite accurate.

Two of the participants made it clear that they felt that social workers had no idea what it felt like to have one's children removed from one's care and that they made

no effort to place themselves in the shoes of the birth parents. One of the principles of ecological systems theory is that it is important that social workers aim to develop an understanding of the personal experiences and views of the people they engage with in order to gain a broader understanding of the systems in which they function (Jack, 2012:129). Anne had intense anger towards the social workers at the child protection agency. She experienced that they were “*as stiff as doornails*”, allowing no expression of emotion. She expressed her desire to “*never ever*” have contact again with the social worker who removed her child.

Renier also made it clear that he never wanted any contact again with the social worker who had dealt with the removal of their daughter. He added that she had often made promises, which she never kept. He did however feel far more positive about the social worker who was currently delivering reunification services to himself and his wife, Maria. He experienced this social worker as friendly, kind and approachable. Colette expressed her utter hatred for the social worker who had removed her son from her care. Her fiancé however mentioned that he preferred this particular social worker’s involvement as she had gotten to know them over time and that he felt it was hard to trust the new reunification worker who knew nothing about them.

In conclusion, theme one explored the birth parents’ emotional experiences of the actual removal of their children from their care, as well as their personal experiences of the social workers who had been involved in the removal. It was evident that participants had experienced intensely negative emotions about the removal and towards the social workers. Further, it was quite clear that they had experienced a total lack of support in terms of dealing with the pain of the removal and that all of them still harboured unresolved emotions about the above.

### **3.8.4 Theme 2: Interaction with the social worker and child protection services**

- **Experiences of the manner in which participants are treated by child protection services**

In the context of ecological systems theory, child protection agencies fall within Bronfenbrenner’s exosystem. The exosystem refers to formal organisations, religious



institutions and the community who have an influence on a child's mesosystem (Berk, 2009:28; Louw & Louw, 2007:27). Although the link between the mesosystem and a child's life is not always observable, in the life of a foster child the importance of this link cannot be underestimated. Policies and procedures of child protection agencies have an enormous influence on a foster child's life, influencing directly and indirectly the amount and quality of a child's contact with their birth parent/s if the birth parents remain involved in the life of their child in foster care.

Social workers represent the child protection organisations that they work for. This representation should naturally reflect the principles and ethics of the organisation. The participants in this study however, often distinguished between their involvement with specific social workers and "*the Welfare*" in general, especially those who had been in the system for a while.

Alpert and Britner (2009:136) draw attention to the reality of the foster care system being inherently punitive. The presence of state authority that holds the power to permanently remove children from their birth parents' care, permeate the foster care system. Although on the one hand it is expected of birth parents to relate to this authority for their children to be returned to their care, on the other hand it is also the sword that hangs over their heads. Gerring et al. (2008:9) explain that if parents feel more empowered, supported, respected and understood by the social workers in the system, parental self-esteem, engagement in services and service completion tend to increase.

The majority of the participants in this study had negative experiences of child protection agencies – "*the Welfare*" as referred to by them. The underlying theme of these experiences was the sense of "*not really*" being important, understood or valued. James and Nicky experienced that they continually "*fought*" with "*the Welfare*" for almost six years before feeling understood and for their needs and wishes to be taken into account. This battle even continued into the local commissioners' office as they tried to make themselves heard. James put his experience like this: "*One feels... how can I say... you are thrown away... your say is not legal... they ask you if you have any issues and then (when you want to raise your issues) they tell you to shut up. They keep themselves to one side and they*

*don't want to talk to you. You don't have a say... it carried on like that for almost six years*". Interestingly, James and Nicole felt that the change in their relationship with "the Welfare" came about when the foster parents invited them to their home for Christmas. This had an enormous effect on their whole attitude towards both the foster parents and the Welfare as they finally felt included and valued as the birth parents of these foster children.

It is very important to note that birth parents often lead difficult, complicated lives and that they are often not skilled in forming and maintaining good relationships (Gerring et al., 2008:6; Haight et al., 2002:186; Salveron et al., 2009:268). This may have an influence on the way they experience social workers and child protection agencies and the way they relate to them.

Literature shows that the vast majority of birth parents express the desire for their children to return to their care. This was confirmed by all the birth parents in this particular study. Malet et al. (2010:78) point out though, that in practise, returning home is rarely an easy process. One would surmise that criteria for return and a carefully planned process would be discussed with the birth parents so that a partnership could be formed in working towards reunification. Belinda put it plainly that it feels like a complete impossibility for her children to be returned to her care. She felt that the foster carers had financially so much more to offer her two children and that she would never be able to "compete" with them. Her frustration with the case worker was clear: *"(The social worker) makes the standards unreachable to have our children returned to us. It feels like she doesn't want to give our children back to us. I mean, I don't know if it is the law or maybe one should... as I said, if one has a decent place for your children to live and enough food and you are able to look after them, why don't they give the children back to us?... It just feels as if their standards are too high to ever reach."*

Belinda continued to make a very interesting and valid point. She felt that steps should be put into place to return children as soon as possible because the longer they remain in foster care; the more they are alienated from their birth parents and the stronger the attachment to the foster carer becomes, especially when, as in the case of her own children, they are very young. In terms of ecological systems theory,

this is an excellent example of how the macro-/chronosystem (child protection policies) affect the microsystem (caregiver-child relationship) and in effect, will influence the development of the child (Hong et al., 2011:869).

Colette also raised her concern that as time passes her baby son is becoming attached to the foster mother and not to her. Haight et al. (2002:177) make exactly this point: that many children who enter the foster care system are pre-schoolers – an age when the parent-child relationship undergoes considerable development and is especially vulnerable to disruption. Belinda's experience of the agency involved with her family was that there were no clear steps or guidelines with regards to reunification and that her children, especially the baby, were becoming increasingly attached to the foster parents, making reunification potentially traumatic for them.

James shared Belinda's sentiment in terms of their hopelessness in fulfilling the requirements for their children to be returned to their care. The researcher asked James if there had been a plan in place in terms of returning the children to their care. He answered that it had been explained to him what needed to be done and he had started putting those things in place. One requirement had been to find suitable accommodation. He had done so and let the agency know, but never received an inspection from a social worker. He continued: *"They (the agency) did not come once during that time to visit me, to see where I live and work, etcetera. They once said they would come and never did. No one ever came. I always had to go to them, but no one ever came to us... there was a stage when I said to myself, I don't care anymore. I have done everything. I did what people advised me to do, I tried everything I knew to do. You know, they just always closed the door in my face"*.

Much frustration surrounded the availability of social workers, promises that are made and not kept on the side of the child protection agency and a general lack of communication. Hannes was of the opinion that much progress was made in his case when the caseworker, her manager, the foster parents and the birth parents had a meeting where everyone's expectations were discussed and practical arrangements were put into place in an attempt to accommodate all the relevant parties. He explained that because of this meeting, he started having regular contact with his child, contact in general was less stressful and everybody seemed more amiable

toward each other. It is thus clear that transparent and positive communication between all role players can make the foster care situation bearable to all involved.

Birth parents' frustration with the "*welfare*" system is indicative of an overburdened child protection system where caseworkers experience a lack of time and resources (Alpert & Britner, 2009:136; Haight et al., 2002:175; Kovalesky, 2001:765). In South Africa the number of children who have entered the system has grown rapidly over the last ten years (RSA, the Presidency, 2009), stretching resources to the limit. As discussed in chapter two, Lesch et al. (2013:1107) found that even though social workers in South Africa were very much aware of the importance of reunification services and the attention that should be given to the relationship between foster children and their birth parents, due to a lack of resources, reunification services do not always receive the necessary attention. The reality of this situation is that birth parents who have the potential for their children to be returned to their care, might be overlooked in a system that is overburdened and under resourced.

- **Negative experiences of social workers**

Social workers are the main professional service providers to birth parents who have children in foster care (Lesch et al., 2013:1107). Social workers also form a part of the child's exosystem that has an influence on the mesosystem of which the birth parents are a part of (Hong et al., 2011:863). They are often the only link between the birth parents and their children and have to facilitate all forms of contact between them. Much is expected of social workers as they relate to all the role players, assist birth parents in their efforts towards reunification with their children and supervise the foster care placement (Alpert & Britner, 2009:136; Gerring et al., 2008:6; Haight et al., 2002:175). It is thus evident that social workers play a very important role, but due to the nature of their involvement, they are often perceived in a negative way by the birth parents.

All the participants in this study identified at least one social worker whom they had experienced in a very negative sense. These experiences were sometimes linked to personality traits of the social worker, but more often the birth parent's perception that the social worker was not doing his or her work and/or did not have their

interests at heart. Some of the participants had positive experiences with a social worker / social workers and will be discussed under the next subtheme.

Six of the participants experienced that their caseworker frankly “*did not care*” about them. This might have been a subjective interpretation of the social worker’s actions or attitude, but reflected the participant’s perceived reality. This perception would naturally have a very negative bearing on a relationship, which calls for open communication and mutual trust. Anne’s negative experiences of social workers in general, permeated the entire interview. She felt that many of the social workers whom she had dealt with over the years were “*stuck-up*” and judgmental and had no empathy for the loss of her child from her care. She shed tears of anger and humiliation as she related these incidents to the researcher. This was fortunately not the only experiences she had – she related a couple of stories of one particular social worker who had dealt with her in a sympathetic and understanding way.

Four participants felt that their caseworkers were always trying to “*find fault*” with them so that they did not need to remove the children from the foster parent’s care whom the participants felt they favoured. Four of the other participants experienced that their caseworkers were far more concerned about keeping the foster parents happy and did not pay attention to their concerns or requests.

Some of the participants’ anger and concern was centred on practicalities:

- Seven of the participants voiced their frustration at not being able to get hold of their case workers and leaving messages and not receiving any response. James, Nicole, Belinda and Anne interpreted this as the social worker avoiding them, which in turn escalated their feelings of helplessness and frustration.
- Constantly requesting contact with their children and no clear action being taken from the social worker to arrange it. Hannes mentioned that when he started voicing his frustration at not having regular contact with his child, he was labelled as “*being difficult*” which meant that he felt that he had to “*back off*” to at least retain some contact.
- Seven of the participants felt that promises were often made, but not kept by the social workers.

- James and Nicole felt that there was not adequate supervision of the foster placement and they had to, on more than one occasion, give concerning information to the caseworker – they felt that the social worker was “*not doing her job*”.

Plainly stated, the majority of the participants felt that they needed more attention from their caseworkers. Hannes made the following comment: “*I would say that they (the social workers) should communicate more with the parents, because communication sometimes breaks down... if they would just explain more, talk a bit more, explain nicely, then it really could work better*”. Belinda stated simply: “*I really think they can do things better... they could just give us a bit more attention*”.

The researcher would hypothesise that what the participants experience as neglect by social workers may be because of an overburdened work force and not necessarily a reflection of disapproving attitudes from caseworkers. Foster care practice shows that social workers often seem to struggle with many difficulties and frustrations. Caseloads are often large and caseworkers experience a lack of time and resources that impede on family centred service delivery. Studies (Alpert & Britner, 2009:136; Haight et al., 2002:175, Kovalesky, 2001:765) have confirmed that foster care workers often grapple with their own emotions of grief, anger and powerlessness, as well as burnout and secondary trauma. Some social workers have however expressed their condemnation of birth parents, scepticism regarding the ability of parents to rehabilitate or admitted to developing a punitive approach when a parent (Alpert & Britner, 2009:136; Haight et al., 2002:175, Kovalesky, 2001:765) has abused their trust. Working with birth parents, the foster child and foster carers require excellent communication and negotiation skills and often place social workers in a position with many conflicting demands, needs and expectations.

- **Positive experiences of social workers**

Alpert and Britner (2009:135) summarise the role of the social worker in foster care as involving respect for parents, listening to and addressing their concerns, focussing on strengths, helping them stay emotionally connected to their children, breaking down the power differential between client and worker and communicating empathy and concern while clarifying and gently asserting authority. These authors also

emphasize that as birth parents feel more supported, understood, respected and empowered, they tend to engage better with social services. They argue that the crux of this approach is a collaborative parent-caseworker relationship as a means to maintaining parents' engagement in services, with the assumption that continued engagement will drive parents toward reunification.

During the interviews with the participants, the researcher was struck by the participants' gratitude and appreciation to some of the social workers that crossed their paths. The warmth they felt towards these professionals was apparent even years after they no longer had any contact with them. The researcher would like to highlight some of these positive experiences:

Anne spoke with great appreciation of a social worker called Sunet. She felt that Sunet treated her with respect and got to know and appreciate her over time. Sunet spoke to her as if they were equals. She prepared her for contacts with her child and coached her on how to treat the foster parents and other social workers. Sunet supported her emotionally, especially after contacts when Anne was very emotional and upset. She was often thoughtful by, for instance, remembering to take tissues along for when Anne became tearful. She gave Anne the opportunity to unload her anger and grief without judging or advising her. Sometimes she merely listened.

Sunet did something very practical that meant an enormous amount to Anne. When the decision had been made to move Anne's daughter from a children's home to foster care, Sunet asked her to draw up a list of questions she would like to ask the prospective foster parents. During the meeting, she gave her an opportunity to pose each one of the questions to the foster parents, encouraging her to be open and honest. This meant a great deal to Anne, who was very nervous about the placement, giving her some peace of mind.

James and Nicole felt under pressure to agree to the adoption of their two sons by the foster parents, who had been there for many years. They greatly appreciated a social worker who advised them not to give their permission and to continue having regular contact with their two children.

Renier and Maria recently had a caseworker who made contact with their daughter a comfortable and enjoyable experience. Although she sat in the office while they visited their daughter, she quietly carried on with paper work, making them feel as if “*she was not even there*”. She communicated that she trusted them; that contact was good for their daughter and that she really wanted them to enjoy the time they had with their child.

Hannes’ first caseworker made a lasting impression on him. He felt that she understood how difficult the removal of his son had been for him and went to a lot of trouble to organise contacts and to accommodate him. He commented: “*She arranged visits, she called me, I never really struggled with her. She made things nice for me... it was nice. When we spoke to each other, it was comfortable... I felt trust from her side... I felt she trusted me.*” His experience of her was that she was approachable and even though he could not discuss his emotions with her, he felt that she realised that contact with his son was vitally important to him. Very importantly, as he mentioned, he felt that she trusted him.

Despite Barend and Colette’s raw anger towards the social worker who had been involved with the removal of their baby son, they did manage to give her some credit. Barend explained that even though she was part of “*a difficult part of the road*”, she did know and understand him and Colette. She continues to phone them from time to time to hear how they are. She also relays bits of information about their son, for instance that he has another tooth or if he had received medical attention, she would give them feedback and keep them updated.

These experiences conveyed by the participants, support findings from research done by Bowyer (2009:25). In his study, he found that birth parents identified two key areas in maintaining relationships with their children: information about their children and contact with their children. Parents expressed how much they valued regular updates about their children’s academics, school activities and health, as well as information about their children’s day-to-day activities and interests. Being kept up to date with this kind of information helped parents manage conversations with their children and informed them in terms of their choice of, for instance, birthday



presents. To the participants in this particular study, these seemingly small acts of kindness by social workers, made lasting impressions on them.

In conclusion, theme two explored participants' interaction with social workers and the child protection agencies. In their discourse, participants made a clear distinction between social workers and what they refer to as "the Welfare". Their negative experiences of social workers sometimes revolved around the personality traits of particular social workers, but mainly centred on their experience of social workers not caring about them and not having their interests at heart. This sentiment was also reflected in how they experienced they were treated by child protection agencies. Many of their negative experiences however centred on their frustrations with regards to practicalities surrounding contact with their children.

### **3.8.5 Theme 3: Contact sessions with children**

When children are placed in alternative care it is generally accepted that they will continue to stay in contact with their birth families as it is seen as essential in building and maintaining relationships (Ellingsen et al., 2012:427). Jones and Kruk (2005:407) make the following statement: "Children's attachment to their biological families... seems to endure in spite of the obstacles created by foster care, adoption or maltreatment". These authors also refer to research done by Daniel, Wassel and Gilligan, in which they conclude that social workers should take heed to appreciate the complexities and depth of children's ties to their caregivers. These assumptions provide the rationale in understanding the importance of maintaining contact between foster children and their birth parents.

Haight et al. (2002:173) define parent visitation as "the scheduled face-to-face contact between parents and their children in foster care". This definition implies that this is not a spontaneous occurrence but a planned event, presumably by a social worker. Consistent contact through parental visitations is considered the primary intervention in maintaining the parent-child relationship and an important aspect of family preservation efforts (McWey et al., 2010:1339; Shaw, 2006:1389). Contact through parental visitation is thus seen as a vital aspect in foster care. The main

focus of this study was the participants' experiences of contact sessions with their children.

- **Emotional experiences in anticipation of and during contact sessions**

All the participants in the study expressed emotions of excitement and happiness in anticipation of seeing their children. The following are some of their comments:

- Bernard: *"I am actually very happy, I make jokes all the time... I am so happy that we are going to see him!"*
- Colette: *"Just before I see him, I am so excited. I mean, you want to see how much he has grown and you want to feel how he holds on to you when you are holding him".*
- Hannes: *"Normally I just can't wait. I hardly sleep when I know I am going to see him the next day. I am very excited. Everything feels good because I can't wait to see him".*
- Anne: *"Oh, I couldn't wait! Whoever is taking me to see my child must just come! Time has to pass quickly because the longing for her is overwhelming... I was always very excited to see her. I just couldn't wait!"*
- Maria: *"Just to see her smile. To feel her hug and kiss you... it makes you so happy!"*

The researcher asked participants whether they experience any "negative" emotions in anticipation of contact sessions. Eight participants answered that they felt nothing negative, only excitement and happiness. However, two of the participants provided insight about some of the emotional complexities surrounding visitation.

- Colette: *"I don't really (experience any negative emotion), but it does go through your mind: "What is the social worker going to say this time"? How are they going to insult you this time? Are they going to tell you again that you are not a mother? What are they going to do next?"*

Belinda explained how she starts preparing herself emotionally the evening before the contact session, because she does not want to upset her three year old daughter by becoming emotional during the visit.

- Belinda: *“I feel that when I am with them, I don’t want to cry, especially if I haven’t seen them in a long time... You feel very excited – you want to jump out of your skin with excitement, but when it comes to the push just before you see them, then it is... I sometimes almost feel like a wall... I do try and show my emotions, but I don’t want to cry in front of them... but when I am there, I focus on: “Okay, I am here now, I haven’t seen my children in two and a half months, I better spend this time the best I can. Then you play with them, you laugh and it becomes a very joyful time...”*

A study by Haight et al. (2005:461) confirms Belinda’s complex experience of contact. They found birth parents’ experiences of stress and trauma due to the forced separation from their children often affect their energy levels and emotional availability to the child during contact and can consequently affect the quality of visits.

Nicole and James related how excited they felt before one of the visits, but when their two boys addressed them as “*uncle*” and “*aunty*” they felt taken aback and very hurt by it. Belinda also explained the hurt she experienced when her baby daughter did not seem to recognise her and her three year old addressed her as “*Aunty Belinda*”. Belinda’s husband, Hendrik, moreover expressed his sadness when his baby daughter started to cry when he picked her up and reached for the foster mother.

Participants all relayed how much they enjoyed the time with their children, but the thought of having to say goodbye, hung like a shadow over the session. All of them expressed how much they detested saying goodbye, especially for the participants who did not have regular contact with their children and were unsure about when they would see them again. Haight et al. (2002:195) raise the concern that birth parents are often not adequately supported and coached for dealing with the psychological and interpersonal complexities of contact with their children. The majority of participants in this study had never had any form of preparation for contact sessions.

The researcher posed the question to some of the participants whether they received any form of debriefing or counselling after having contact with their children as many

of them indicated that they felt very emotional after visits. None of the participants whom the researcher asked had ever received any form of debriefing and was left to deal with the emotion themselves. Nicole stated that initially contact was very difficult and emotive for her and she would have appreciated it if someone could have “talked her through it”. Both Belinda and Hannes felt a need to speak to the social worker after having had contact with their children. They would have liked to discuss how the session went, but the social worker always seemed in a rush “*to get going to her next appointment*”, so they did not feel at liberty to request such a meeting. Only Anne related how Sunet, the social worker she was so fond of, allowed her to cry and vent as they travelled back home after a visit.

- **Practicalities surrounding contact sessions**

For all the birth parents in this study, contact with their children is a much anticipated event. The hour or two that they spend with their child / children is naturally very valuable to them. Although the emotional tone of the visit is important, certain practicalities seem to make a big difference in terms of the quality of the time spent together.

Eight of the ten participants commented on the discomfort of meeting in a social worker’s office. Renier and Maria were the only participants who have a child in familial foster care. The original arrangement in terms of visitation was that they would visit their daughter at the home of the family members. However, these visits became strained and it was decided to rather meet at the child protection agency’s offices. They enjoyed being on neutral ground where they played and picnicked with their daughter on the grounds of the agency.

The other participants all felt that visits in social workers’ offices were uncomfortable, for both them and their children. Space to play was limited and especially the fathers expressed the need to rough and tumble with their children. Some participants had met with their children at child friendly eating-places and enjoyed being in a more informal setting. Belinda and Hannes felt that playing in an office with small children became tedious and monotonous for the children. They suggested that they rather meet their children in a park or outside the offices where there is ample room to play and the social worker could possibly supervise the visit from a distance. Anne made

an interesting comment: *“I just feel, hell, (the social workers should) ask the government to give them some money... upgrade the grounds and allow the children to play freely. Let them put down a blanket and have a cold drink and chips... But now they squeeze you into some silly little office...”*

Three participants expressed the need for their children to visit them at home, even if it was only for special events such as birthdays. Hannes added that this should only be considered if the child would not be traumatised by memories from that home. In the researcher’s opinion, this could prove valuable as it could also provide the children with a more realistic view of their parents’ circumstances, reducing fantasies about their parents’ lives.

- **The involvement of social workers during the contact sessions**

A key aspect in foster care services is the monitoring of parental visitations. The contact sessions provide social workers with the opportunity to better observe and understand the parent-child relationship. Haight et al. (2002:195) indicate that social workers are expected during contact sessions to support children’s attachment to their parents, to protect children from possible harm from their parents and evaluate the parent’s progress and the quality of the parent-child relationship. In reality, this might be taking place, but *how* the birth parents experience the presence of a social worker during their precious time with their child, is not often taken into account.

The way birth parents experience the presence of the social worker, seems to depend on various factors. There were mixed reactions from the participants in this study. Firstly, it seemed to depend on the birth parents’ relationship with the social worker. Renier and Maria were not affected in the least by the presence of their previous and current caseworkers because they felt comfortable and at ease with both of them. Hannes’ child has been in foster care for many years and he seemed to have gotten used to the presence of social workers. Interestingly, Hannes mentioned that through observation, he came to understand what social workers tend to like or dislike during contacts. He put it like this: *“Look, you have to be decent – you have to give as much attention and love to the child as you can, not just sit on a chair. You must play with him and be part of the activity”*. He described social workers’ dislikes as: *“Basically, you mustn’t say anything that will influence the child because*

*otherwise the child is on a whole other mission, they turn everything upside down, confuse everything. You are not supposed to tell them for instance you are going to take them home and so on... (laughs)... I have been in trouble for that a couple of times”.*

The rest of the participants felt very negative about the presence of a social worker – not only because of the effect on them, but sometimes on the child / children too. James and Nicole both said that they do not like the presence of a social worker at all because they feel if as if the social worker is watching them and trying to “*get information*” about them. Belinda felt very anxious and uncomfortable when a social worker was present, especially if she was being observed through a one way-mirror. She sensed that the social worker was watching her like a hawk, looking for reasons not to return the children to her care. Colette felt that there were too many people in the room and that she felt “*like a mouse with vultures circling her*”. Because of the presence of many people, she was not given time to bond with her son.

Anne explained in her fiery way that she did not like the presence of a social worker “at all”. It made her feel as if she was not able to speak freely to her daughter – that she was being limited to certain questions and not able to ask what she really needed to know. She commented: “*If I am sitting there with my child and the social worker sits there with her stuck-up attitude – I mean, I am a mother, I want to ask my child: ‘Love, is that man not fiddling with you?’. I am scared the social worker will jump on me, but I will jump on her, because she is my child. I am worried about my child, but I get the idea that I should rather not ask, because they (the social workers) don’t have feelings... But if you don’t ask your child, it looks like you don’t care about her. If you do ask her, then ‘oh no, hell, now you have gone too far’*”. Anne’s frustration and sense of powerlessness in the situation was very evident. Anne relayed to the researcher that after a couple of years in this foster placement, her daughter revealed that she had been sexually abused by the foster parents’ teenage son over a long period of time and she was subsequently moved to another foster placement.

Three participants commented specifically on the use of a one-way mirror used for observation from adjacent room. Both Belinda and Anne felt very uncomfortable with

it, especially because they could not gauge what the people behind the mirror felt about what they were observing. It escalated their anxiety and uneasiness. Only one respondent, Barend actually preferred that the social worker supervise the contact session from behind the one-way mirror and did not seem in the least bit bothered or affected by it.

Four participants commented on their perception that the social workers fear that they will harm or abduct their children if they are not supervised. All four felt that this was ridiculous, as they did not have the means to do it, even if they wanted to. None of them wanted any “*run-ins with the law*”.

- **The presence of the foster parent/s during the contact sessions**

Although in practise it is not necessarily standard procedure for foster parents to be present during contact sessions, it is often necessary because young children feel uncertain in unfamiliar surroundings and need the reassuring presence of the foster parent. This can however cause an uncomfortable situation for the two sets of parents as well as for the children. Studies have shown that when children have solid relationships with both their foster- and their birth parents, they experience greater loyalty conflict when both are present (Browne & Maloney, 2002:36).

From an ecological systems perspective one could also see why the presence of both sets of parents during contact could be cause for a difficult situation. There was a time in the child’s life when the birth parents were part of their child’s microsystem, but because of the removal of the child, the birth parents were removed from this intimate position in the child’s life and placed in the mesosystem. This would almost inevitably lead to a complex relationship as contact also forces these two systems to interact with each other. This confirms ecological systems theory’s proposition that change in one system will affect another (Hong et al., 2011:866, Jack, 2012:129).

The majority of the participants in this study felt negative about the presence of the foster parents. Anne never had a good relationship with her daughter’s foster mother, which led to a great deal of stress during visitations. She felt that the foster mother gave the impression that *she* was now her, Anne’s child’s mother, while Anne emphasized that she was only the *foster* mother and that *she* would always be the

child's *real* mother. She was very hurt by the perception that her daughter was forced to call the foster mother "mother". She was however aware that this situation was very unpleasant for her daughter and caused her some stress, so she attempted to reduce the conflict between herself and the foster mother.

Renier and Maria felt that their daughter was much less spontaneous when the foster parents were present during visitations. Hannes shared their sentiment – he felt that his son was reserved and nervous when one of the foster parents were present. Renier and Maria explained that they had come to realise that their daughter had also come to love her foster parents and they did not want to cause her distress by putting her "*in the middle*". They made a conscious decision that they would never say anything negative about the foster parents in her presence, despite the way they felt about them.

Colette seemed to struggle with the attachment she witnessed being formed between her biological son and the foster mother. She described the foster mother as a "*lioness who was trying to protect this little boy from his own mother*". This angered and saddened her tremendously and added to her feeling of helplessness in the situation. The foster mother also referred to herself as "mommy" during a contact session. Colette commented: "*It was a tense moment because there aren't two mothers in this room – there is only one mother*". She felt that the foster mother was becoming too attached to her son, while she and Bernard were working hard to have him returned to their care. During one of the visits, Colette's son cried when she took him from the foster mother and she had to hand him back to her so that the foster mother could comfort him. She realised that he does not really know her, but felt that that was precisely the reason why she needed time alone with him so that they could start to form an attachment. Hendrik also found it very difficult to come to terms with the fact that his baby daughter did not recognise him when they had contact with her. He commented: "*It is really hard with Mia (the baby) – she is growing up with these people. When we pick her up, she starts to cry. We are strangers to her... she doesn't know who I am.*"



As seen from the participants' reactions, during the contact sessions, they became aware of the reality of their move from being in their child's microsystem to becoming part of their mesosystem. This realisation had a significant emotional impact on them.

James and Nicole found the presence of the foster parents difficult when their children were very young as both boys cried when left alone with them. As the boys got older, they were able to understand the dynamics better and managed to visit with or without the presence of their foster parents. James and Nicole expressed the desire to spend more time with their children without the foster parents as they wanted to be "*like real parents*" when they were with their boys. They felt that when the foster parents were present, they automatically assumed that role and *if* the children paid more attention to them as their birth parents, the foster parents felt jealous of this "*shift*" in the children's loyalty.

James also initially experienced animosity from the foster parents and felt that they did not want to bring the children for visits and felt annoyed as they often cancelled or changed arrangements. These cancellations were not only a disappointment, but also impacted them financially as he had to take time off from work. In time the situation improved though and a real breakthrough in the relationship came when the foster parents invited James and Nicole to their home for Christmas. Nicole also expressed her appreciation when the foster mother bought a swing and had it installed at the agencies offices, because the one little boy loved swinging and it gave Nicole to opportunity to do something with him that he really enjoyed.

An aspect that had a significant emotional impact on especially the mothers was that their children addressed the foster mother as "mommy" and in some cases referred to their birth mothers as "*aunty*" ("*tannie*"). Belinda, Anne and Colette were all under the impression that their children had been "*forced*" or taught to address their foster mothers in that manner. The researcher knows from practise that this is not expected from foster children, but that children normally in time start to address the person who takes care of them as "*mommy*" or "*daddy*". This, however, caused a lot of heartache for the birth mothers.

It has to be noted that some of the participants expressed their appreciation for the loving care the foster parents provided for their children. Despite Colette's helpless anger about the situation she found herself in, she expressed her appreciation for the loving care the foster mother provides for her son. She and Bernard are also allowed to contact the foster mother every Monday and they appreciate the weekly update on their son's development and growth. Renier expressed his gratitude for the medical care the foster parents provided for his daughter, realising that he would never have been able to afford it himself.

Belinda's appreciation for the foster mother who was taking care of her two little daughters was touching. She described how the foster mother reached out to her during contacts and made a concerted effort to make her feel more comfortable. She felt that the foster mother tried to put herself in Belinda's shoes and that she empathised with her instead of being judgemental towards her. Belinda and Hendrik both expressed their gratitude for the way the foster parents treated and took care of their daughters. They felt that it was obvious to see that their daughters respected the foster parents and Belinda added: "*We could never have asked for better foster parents*".

Birth parents who have had their children removed from their care and placed with foster carers, would in all probability experience shame and embarrassment in their presence. Along with that would be the understanding that they as birth parents did not make the mark as good carers for their children, whereas the foster parents have been approved as particularly good carers for children. The presence of the foster parent/s during contact would naturally be very intimidating for the birth parent/s. If contact is their opportunity to build relationship with their children, it could be expected that birth parents would want to be on their own, without the intimidating presence of a foster carer.

However, if a foster carer had insight into the birth parent's experience of contact, as well as an appreciation for the role of the birth parent in the foster child's life, this situation would probably be tolerable for the birth parent. Belinda experienced this during contact sessions where the foster mother was present and it meant a great deal to her. She relayed her experiences as follow: "*I think she (the foster mother)*

*tries to understand how it would feel if she hasn't seen her children in two months... she once even came and sat on the carpet with us and played with us, with the children. I mean, you don't expect that of a foster parent... I find her very friendly. She tries to put you at ease... you see, sometimes I am very nervous when we are going to see the children – you don't know what to expect. There was that once when I really didn't feel prepared and I cried on the way to the office... that day I could see that she saw, Belinda isn't feeling well today... she made the effort to make us feel very comfortable and everything. We couldn't have asked for better foster parents... They make you feel comfortable. It is like when our baby daughter cries or something – it is okay, don't worry, you didn't do anything wrong”.*

The researcher would like to hypothesize that if a foster parent could also play an active role in encouraging the foster child / children to enjoy their time with their birth parents, it could lessen the child's experience of loyalty conflict.

In conclusion, theme three focussed on birth parents' experiences of contact with their children. Although all of them expressed their excitement and happiness in anticipation of seeing their children, other complex emotions and perceptions emerged about their emotions during and after contact, as well as their experiences of the presence of the social workers and sometimes the foster parents during contact. These complexities were explored with the participants in trying to gain a better understanding of their experiences of contact.

### **3.8.6 Theme 4: The voice of birth parents**

Kapp and Vela (2004:197) state that the parents of children in foster care comprise a group whose voice has generally been unheard in client satisfaction research. This “unheard voice” does not seem to be limited to client satisfaction research only, but seems to be a general state of affairs within foster care services. According to Alpert (2005:365), birth parents' perspective of foster care services is currently an understudied element of foster care. She continues to argue, “this area of research has the potential to be an important first step in accomplishing several necessary goals in the field of child protection”. Such research will serve to inform and alert agency administrators and field workers to factors worth considering throughout the

foster care service plan. It may also present constructive advice for the design and implementation of service plans in which parents are mandated to participate. Alpert (2005:365) suggests that research on the perspective of the birth parents will “perhaps most importantly... give voice to the parents of children in foster care, allowing them to influence a system that is, for parents, completely life altering”.

The researcher found that participants in this study had a great need to talk to someone about their experiences within the foster care system, but had no platform to do so. The aim in the discussion of this theme is to give a voice to the birth parents in this study in the hope that birth parents in the bigger system may be heard too.

- **Practicalities**

Some of the participants’ needs and / or requests do not have significant emotional issues attached to it, but are practical in nature. It is very important though to consider the “type” of birth parent involved in this study. These birth parents actively pursued contact with their children and tried to maintain their relationship with them. This is however not always the case with all birth parents and social workers often struggle with parents who make irregular contact, do not comply with contact arrangements and / or make no contact at all. It is thus important to take into consideration that these needs and requests come from a segment of the birth parent population who have had and want contact with their children in care. Their needs and requests can be listed as follow:

- Regular, scheduled contact with their children with minimal disruption to these arrangements
- That social workers return calls and keep promises
- A child-friendly environment to visit in
- If possible, that the birth parents have “alone time” with their children or at least that there is a process in place to work towards it
- Time before and / or after contacts to discuss the contact and any other issues with the case worker
- Where and if possible, that some contact sessions take place at the birth parents’ or a grandparent’s home

- **Time and opportunity to bond**

All ten of the participants expressed the need, whenever possible, to visit with their children on their own. To them this would mean no social worker and especially, no foster parents present, during contact. Most social workers will, in the researcher's opinion, be appalled at this request as they would be concerned about the children's safety or them being negatively influenced. The participants' motivation however seems to come from a sincere need to have the time and opportunity to bond with their child or children.

As previously discussed, many participants felt nervous and uncomfortable when a social worker was present during contact. The presence of a foster parent created a different dynamic though, as the children are often drawn to the foster parent or it created loyalty conflict for the child. James explained this sort of scenario as follows: *"Leave the children, so that they are on their own with the parents, so that you can have your own visit with them, so that you can spend a bit of time with your own child, not with the foster parent present. If the child bumps his hand, it is immediately: "Did you get hurt?" I mean, it is our job to ask the child, not theirs. You can't speak to your child like a parent when they are present. They really interfere too much... You see, if they (the children) get hurt and you give them attention, they see that you care about them"*.

Colette expressed her need for her and her fiancée to have time alone with their son: *"... to give us three a gap to be alone so that we can form that bond without the foster parents being present, because you can't form that bond if the child is used to always having them around. So, if they (the social workers) can just give us that gap and say to us: "Listen, here are a couple of hours, or one hour, to bond with your child."*

If one takes into account that the objective of contact is to maintain and possibly even improve the birth parent's attachment to the child, the participants' request is reasonable. Hannes mentioned during his interview how a social worker had explained to him that if he makes promises to his son of returning home, he confuses the child and causes emotional upheaval for him. Once this had been explained to Hannes, he had more insight and wanted to act in his child's best interest. This however requires a certain amount of maturity from a birth parent that might be

overwhelmed by their sense of loss. Which brings one back again to helping birth parents deal with their emotions surrounding the removal of their child / children from their care.

The other aspect about contact is a need for longer and / or more regular contact sessions with their children. The majority of the participants saw their children for approximately one hour a month. Renier and Maria were thankful when their daughter requested more time with her parents and hourly visits became two hourly. In the researcher's opinion it is a basic impossibility to build a relationship with *anyone* in so little time over such a long period, even more so when it comes to children who form an attachment to the person who spends the *most* time with them and takes care of them (Berk, 2006:426). Once again, this seems to be a symptom of an overburdened work force where there is not enough manpower to schedule and supervise contacts.

- **Open communication lines**

Birth parents have a generalised need for more attention from social workers. This would probably start with having a place to express and deal with the emotions surrounding the removal of their child or children (as discussed under theme 1). This could lay the foundation for a mutually trusting relationship to develop as much of the emotion in the situation would have been addressed.

When contacts start to take place, a whole set of new dynamics transpire. Although one respondent specifically mentioned that he does not feel the need to speak to a social worker before a contact session, some participants indicated that they would find it very beneficial. Colette felt that it would have been extremely helpful if a social worker spoke to both the birth- and foster parents beforehand and explained the ground rules of a contact session with them. Hannes commented that no one had ever explained to him what is expected of him during a contact session, but that he managed to work it out for himself by observing what pleased - and did not please - the social workers. Triseliotis (2010:59) mentions this in literature as a major short fall in foster care services. He states that there is no script for parents on how to conduct themselves, what to do and not to do, what to say and not to say.

Hannes felt that a major breakthrough in terms of his relationship with the child protection agency and the foster parents occurred when a meeting was held with all the relevant parties where expectations, frustrations and practicalities were discussed. He surmises, “*when each party explained their part, we started understanding each other and then things started getting much better*”. He felt that if the caseworker took time to communicate more and “*explain things nicely*”, that indirectly much of the parent’s anger would be addressed.

Two of the participants mentioned specifically that they would like an opportunity after a contact session to discuss the session with the social worker. Belinda felt that their caseworker was always in a rush afterwards and had to get to her next appointment. She needed time though, to debrief – to discuss the session, as well as the emotions she experienced during the session and when she had to take leave of her children again. Hannes felt that birth parents need “*a bit of comforting*” after contact and to discuss what they were experiencing as contact often surfaced emotions about the removal of the child.

Communication requires time and time is often a precious commodity to social workers with big caseloads. The researcher would like to argue though that much of clients’ anger, frustration and their sometimes seemingly unreasonable demands could be addressed if more time was taken to communicate effectively with them. This in turn would help social workers to deal more effectively with their caseloads. But possibly, even more important than that: social workers have an ethical obligation to act in the interests of all their clients, including those who do not always seem to deserve their attention.

### **3.9 CONCLUSION**

As is evident from this research study, birth parents of children in foster care experience that they are neglected role players in the foster care process. The removal of their children from their care is for most birth parents a life altering experience with tremendous emotional implications. These resulting emotions are most often never addressed or dealt with and as a result have a negative effect on a very important relationship – the client / social worker relationship. Inherent to this

relationship are many tensions, including birth parents' scheduled contact with their children in foster care. Even though these contact sessions are immensely valuable to birth parents, they are also a source of much tension and anxiety. Based on the empirical findings of this chapter, the researcher will come to certain conclusions and make recommendations for practice in the following chapter.



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## CHAPTER 4

# CONCLUSIONS AND RECOMMENDATIONS

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### 4.1 INTRODUCTION

Many children enter the foster care system every year in South Africa. Foster care services form a substantial part of child protection services and much time and resources are spent on this field of social work. In this chapter, the conclusions and recommendations about the empirical data and findings of this study will be discussed. The researcher will first examine whether the goal and objectives of the study have been achieved in order to contextualise the conclusions and recommendations.

### 4.2 RESEARCH GOAL AND OBJECTIVES

The goal of this study was to explore and describe birth parents' experiences of contact sessions with their children in foster care. Although the study was small (10 participants) and generalisability is thus limited, the goal was achieved in relation to the specific study and much insight was gained in understanding birth parents' experiences of contact sessions.

The goal was achieved through the following objectives:

- **To contextualise foster care as out-of-home placement with regard to the following:**
  - **Foster care in the South African context**
  - **Reunification services**
  - **Relationship between birth parents and their children in foster care**

This objective was reached as the researcher provided an extensive literature review in chapter 2 of foster care as an alternative care option for children. The researcher found that much literature was available in terms of foster care, but that research and

literature about foster care specifically in the South African context, was not as readily available. Furthermore, finding the relevant literature about the role and experiences of birth parents was equally problematic. This supports the view by some authors that birth parents are an understudied element of foster care (Alpert, 2005:365). This point of view served as the rationale for this particular study.

- **To explore and describe the birth parents' experiences of contact sessions with their children in foster care with regard to:**
  - **The role of the social worker before, during and after the contact session**
  - **The role of the foster parent**
  - **The emotional experiences of the birth parent**

This objective was reached as the abovementioned aspects formed part of the interview schedule used with the participants. The researcher experienced that the participants seemed eager to share their views as they felt that they generally do not have a platform from which they can share their personal experiences as role players in the foster care process.

- **To make recommendations to social workers responsible for reunification services regarding the experiences of birth parents in order to identify key aspects in preparing birth parents for quality contact sessions with their children in foster care.**

Due to the rich, descriptive data obtained through interviewing the participants, recommendations will be made to social workers who are responsible for reunification services at the end of this chapter.

The research question, which this study intended to answer, was as follows: What are birth parents' experiences of contact sessions with their children who are in foster care? This question was answered during the data collection and analysis stage of the research process.

### 4.3 KEY FINDINGS

The key findings about the experiences of birth parents' of contact sessions with their children in foster care are listed below.

- Research results clearly indicated that birth parents experience the removal of their children from their care as very traumatic and it has a significant effect on their emotional functioning.
- Within the scope of this study, a key finding was that no help or support is offered to birth parents in dealing with the emotions regarding the removal of their children from their care.
- Participants as birth parents' experiences indicate that they feel neglected and / or ignored by social workers and social services in general.
- An important key finding from this research study is that birth parents are not adequately prepared for or debriefed after contact sessions with their children.
- Birth parents experience a combination of emotions linked to the contact sessions with their children in foster care. They responded that the contact sessions were inter alia joyful, emotive and stressful experiences.
- A very important key finding for this research study is that much tension is removed from the foster care process when social workers treat birth parents with respect and actively accommodate them in terms of contact.
- Practicalities surrounding contact sessions, such as the venue, often negatively influence the quality of the contact sessions.
- Birth parents experience that they do not have a voice with regards to foster care services.

### 4.4 CONCLUSIONS

The researcher will discuss the conclusions in terms of the themes which formed the structure for the discussion on the empirical findings.

#### 4.4.1 Theme 1: The removal of children from birth parents' care

- **Birth parents' emotional experiences of the removal of their child / children**

Birth parents in this study confirmed the findings of Haight et al. (2005:461) in that they are overwhelmed with emotions of loss, grief, rage, depression, powerlessness and fear when their children have been removed from their care. Added to these intense emotions is the sense of shame and of being stigmatised as a “bad parent”. Their natural reaction seems to be to withdraw from others and in particular, from social services, especially if they felt that the social workers they were dealing with, were not understanding or empathetic towards the situation they found themselves in. It follows that this would have a negative impact on building a trusting relationship, which is essential for effective reunification services.

- **The lack of help and support in dealing with the pain of the removal**

In this research, it was evident that no help or support had been extended to birth parents in dealing with the loss of their child / children from their care and the ensuing emotions. This seemed to not only be evident in terms of family, friends and the community, but also about the child protection agencies. This state of affairs within child protection agencies could probably be ascribed to social workers being overburdened and due to a lack of manpower or resources. What the researcher found distressing though was the participants' belief that social workers did in fact not really care about them. As a result, the birth parents tended to withdraw from social workers and child protection services and their emotions remained raw and unprocessed. Although this reaction can surely be seen as human and understandable, it negatively influenced their engagement in the foster care process and in terms of building a trusting relationship with their caseworker. It goes without saying that a trust relationship with the caseworker is vital when birth parents endeavour working towards reunification with their children.

The researcher would conclude that it is imperative that child protection services provide birth parents with the opportunity to work through the loss of their child / children through debriefing and / or therapeutic support. This would surely deal with some, or much, of the inherent stress of the foster care process, hopefully

contributing towards higher rates in reunification and at the very least, ensuring a less stressful environment for all the foster care role players.

- **Experiences of the social workers' involvement in the removal of the child / children**

Birth parents understandably feel negative about the social worker who had been involved in the removal of their child / children from their care. These negative emotions range from an intense dislike for the person to open hatred and hostility. Some of the negative reactions were also due to the birth parents' perception that social workers have no empathy for what they are experiencing on an emotional level.

The researcher has experienced in practise that many social workers, including herself, sometimes feel that birth parents "deserve what they get" because of the neglect and abuse that their children have suffered in their birth parents' care. It is important to note though that in this particular study the children were mainly removed due to neglect or the birth parents' inability to take proper care of their children. There were no claims of abuse and yet some of the birth parents experienced that they were being treated the same as parents who have severely abused their children.

Several authors (Alpert & Britner, 2009:136; Gerring et al., 2008:6; Haight et al., 2002:175) draw attention to this dilemma - social workers are faced with the challenge of building and maintaining supportive relationships with birth parents while holding them accountable for the concerns that precipitated the removal of their child / children. The researcher would like to draw attention to the following two points: as social workers, we are ethically bound to treat all our clients with dignity and respect (Weinberg & Campbell, 2014:37). Secondly, building a trust relationship with birth parents is imperative to a less stressful foster care process, which ultimately benefits the foster child – the most vulnerable of the different role players in foster care.

#### 4.4.2 Theme 2: Interaction with social worker and child protection services

- **Experiences of the manner in which participants' are treated by Child Protection Services**

Birth parents in this study indicated that they feel unimportant, not understood and not valued by child protection services. They also experienced that they did not have clarity about the agencies' expectations in order to have their children returned to their care. There was an overall complaint about poor service delivery – promises that are not kept and a general lack of communication.

Birth parents' relationship with child protection services is a complex one. Putting aside the emotion surrounding social services, there is an expectation that birth parents stand in a trust relationship with social services while there is the proverbial sword hanging over their heads. This naturally places birth parents in a very difficult position. If one takes into account that birth parents often have a lack of interpersonal skills and have complex life situations (Gerring et al, 2008:6; Haight et al., 2002:186; Salveron et al., 2009:268), it becomes almost impossible for them to find their way in such a complex relationship. This often results in them withdrawing from social services, as they feel inept and powerless.

It seems clear that child protection services need to focus on improving service delivery to birth parents and having simple, open communication lines in place.

- **Negative experiences of social workers**

Birth parents' need from more attention from social workers is more extensive than just having phone calls returned. This supports Alpert and Britner's (2009:135) findings that birth parents are a neglected group within foster care services. Perhaps feeling valued as humans firstly and then as the birth parents of the children in care, would be the starting place. In this study, the majority of participants experienced being treated with contempt and disregard not just by society, but also by social workers and "the Welfare". When one looks at the values of the social work profession – working in a client-centred manner and treating all people with respect and dignity – these experiences of the respondents fall short of what social workers believe in and stand for.

At the same time, it has to be noted that social workers in practise seem to struggle with multiple difficulties and frustrations. Studies (Alpert & Britner, 2009:136; Haight et al., 2002:175, Kovalesky, 2001:765) have shown that foster care workers often grapple with their own emotions of grief, anger and powerlessness, as well as burnout and secondary trauma. Some social workers express condemnation of birth parents, scepticism regarding the ability of parents to rehabilitate or admitted to developing a punitive approach when a parent has abused their trust. Caseloads are often large and caseworkers experience a lack of time and resources that impede on family centred service delivery (Alpert & Britner, 2009:136; Haight et al., 2002:175, Kovalesky, 2001:765).

In conclusion, it can be said that birth parents' general experiences of social workers are negative. Although social workers' attitudes and actions may be *understandable* in light of the many challenges they face in practise, it does not reflect the true values and ethics of the social work profession.

- **Positive experiences of social workers**

Birth parents in this particular study conveyed how seemingly small acts of kindness by social workers, made lasting impressions on them. The researcher also noted that it seemed that during the times when birth parents felt a "connection" with a particular social worker, they generally engaged better with social services. If this could become the norm in foster care practise, rather than the apparent exception, it can be hypothesised that parental involvement would increase and possibly lead to higher reunification rates or at worst, facilitate a more positive and stress-free relationships between the foster care parties.

#### **4.4.3 Theme 3: Contact sessions with children**

Contact sessions provide birth parents with the opportunity to improve, repair and develop a more secure relationship with their child (Van Schalkwyk, 2012:90). The availability of an attachment to a significant person is of interminable value to any child, but especially to those in foster care (Whenan et al., 2009:752). The benefits of contact also extend to the birth parents. It may decrease their own trauma in terms of

the removal of their child or children (Van Schalkwyk, 2012:89). They also feel more empowered, it helps them to face the reality of their own situation, and they have the opportunity to learn and practise new skills and behaviours (Making the most of visitation..., 2000). The value and importance of contact should not be underestimated.

- **Emotional experiences in anticipation of and during contact sessions**

On the surface birth parents experience excitement and happiness in anticipation of contact with their children. However, they also experience underlying fears and anxieties. These fears centre mainly on their dealings with the social worker and the foster parent/s. Their children's reactions and responses toward them however, are also sometimes unsettling and may catch them off-guard. When a child addresses a birth mother as "auntie" or does not recognise her, it is disturbing and hurtful. A study by Haight et al. (2005:461) confirms birth parent's complex experiences of contact. They found that because of birth parents experiences of stress and trauma due to the forced separation from their children, it often will affect their energy levels and emotional availability to the child during contact and can consequently affect the *quality* of visits.

Once again, it is quite evident that there is a lack of preparation for contact by the social workers. Triseliotis (2010:59) holds that "no script (exists) for parents on how to conduct themselves, what to do and not to do, what to say and not to say". Another notable point is that some birth parents would like time *after* contact session to debrief and work through the session with the social worker.

- **Practicalities surrounding contact sessions**

Although the emotional tone of contact sessions is important, certain practicalities make a big difference in terms of the quality of the time spent together. The most obvious practicality is the setting for the contact session. Being in an office is restricting and uncomfortable, but being outside with children, whether in a park or the grounds of the agency, makes an enormous difference to the atmosphere or tone of the contact. Having a variety of toys available, such as a ball or building blocks, adds to a relaxed, fun atmosphere.



- **The involvement of social workers during the contact sessions**

The basic purpose of social workers being present during contact is to observe the interaction between the birth parent and the child and to monitor the birth parent's behaviour and verbal interaction with the child. One has to take into account however that a contact session is an unnatural setting where birth parents feel at a disadvantage, as they have already been found "not good enough" by the child protection system. Contact sessions are also highly emotive for them and they are often nervous and anxious during these sessions. Add to this the presence of a social worker and it becomes a highly disempowering situation for the birth parents.

Birth parents often feel that they are in a double bind, e.g. if they ask their child too many questions, they are seen as meddling or interfering, and if they do not ask enough questions, they are seen as uncaring. Birth parents need to be clear on *what* is expected of them, as well as the motivation for these expectations. This will potentially decrease some of their anxiety and uncertainty.

The social worker's attitude and way of relating to the birth parents, is also vitally important. When the birth parents have a good relationship with the social worker and they generally feel comfortable in his or her company, they do not seem to mind him or her being present. The birth parents' sense of comfort is a result of good interpersonal skills on behalf of the social worker and a warm, accepting attitude towards the birth parents. This does not imply that the social worker condones the birth parents' behaviour that lead to the removal of the child / children, but rather from commitment to ethical social work practise and striving towards providing good foster care services to all the role players.

- **The presence of the foster parent/s during the contact sessions**

When a foster parent is present during a contact session, it places the birth parent in an awkward position, especially if the foster parent does not "stand back" and allow the birth parent to be *the* parent during that time. Some children might also experience loyalty conflict and be unsure of how to act towards the two sets of parents, especially if the atmosphere is uncomfortable or hostile. They may also be less spontaneous in trying to "keep everybody happy".

Birth parents find it very difficult when their children refer to the foster parents as “mommy and daddy”. Another tender point for birth parents is when they witness an attachment starting to develop between their children and the foster parent and sense that their own attachment to their child is becoming weaker.

Birth parents have a need to be “real parents” when they are with their children. If a child gets hurt in some way during the session, they want to be the ones who comfort that child. They have a strong need to be alone with their child and work on maintaining and improving their bond with the child.

In the researcher’s opinion, it takes a tremendous amount of graciousness and maturity for birth parents to relate in an amicable way towards foster parents and vice versa. This might not be something that can be achieved overnight, but it might be achieved in time, especially when the best interest of the child is the standard all the role players seek to uphold.

#### **4.4.4 Theme 4: The voice of birth parents**

As has been mentioned many times in the course of this research birth parents in general feel that they do not have a platform or “a voice” when it comes to child protection services and / or the foster care process. This was also evident from the responses of the participants in this study and in their eagerness to share their experiences and voice their opinions.

- **Practicalities**

Birth parents are not only concerned with the emotional aspect of contact sessions, but also with practicalities. The birth parents in this study made constructive comments and suggestions in terms of improving the quality of the contact sessions with their children. These comments and suggestions will be incorporated as part of the recommendations discussed at the end of this chapter.

- **Time and opportunity to bond**

Contact sessions are birth parents’ main opportunity to build and maintain the attachment they have with their children. The birth parents experience the presence

of other people and a lack of time, as a threat to *their* opportunity to bond with their children. Birth parents have a need to be like “real parents” during this time and find the presence of other role players intimidating and disempowering. One hour a month is also too little if the objective of the contact is to build and maintain the bond between the birth parents and the children and work towards reunification.

- **Open communication lines**

Birth parents have a generalised need for more attention from social workers, especially in terms of improved communication between social workers and them. In terms of the foster care process, this seems to start after the removal of the children in an attempt to deal with the emotions surrounding the removal. Furthermore, their needs range from having phone calls returned, to having time to discuss different aspects surrounding contact sessions. Suggestions in terms of improving communication will be discussed under recommendations.

The researcher would like to argue that if a concerted effort is made to improve communication and if the expectations of the agency regarding contact sessions are discussed with all the relevant parties, much of the stress and uncertainty surrounding contact will be addressed. This again points to not only improving the services rendered to birth parents, but also valuing them as important role players in the foster care process.

## **4.5 RECOMMENDATIONS**

Based on the empirical study and aforementioned conclusions, the following recommendations can improve general services to birth parents and improve birth parents' experiences of contact sessions with their children in foster care.

### **4.5.1 Participant recommendations**

Participants made various suggestions throughout the study in terms of the practicalities surrounding contact sessions. These suggestions will be noted below:

- A child-friendly environment to visit in. This environment should allow for free play and “rough and tumble” interaction between the parents and the child.

This could be a designated area on the grounds of the child protection agency or a park. If a contact session has to take place in an office or room, that there will be a variety of age-appropriate toys available.

- Regular, scheduled contact with their children with minimal disruption to these arrangements.
- If possible, birth parents should have “alone time” with their children or at least that there is a process in place to work towards it.
- Time before and / or after contacts to discuss the contact and any other issues with the caseworker, thus relating to debriefing sessions.
- Where and if possible, that some contact sessions take place at the birth parents’ or a grandparent’s home.
- That allowances be made to celebrate special times, such as birthdays and Christmas, with their children, even if it is at the child protection agency.

#### **4.5.2 Recommendations in terms of this study**

The following recommendations will be discussed in relation to the different role players involved in contact sessions, whether directly or indirectly.

##### **4.5.2.1 Child protection agencies**

- The researcher would like to propose that child protection agencies provide debriefing or therapy to birth parents in the post-removal stage to deal with the emotions surrounding the removal of their child / children. This should preferably be done by a social worker who was not involved in the removal or by a counsellor or psychologist affiliated to the organisation. The researcher’s hypothesis is that if this is done, the birth parents’ engagement with the reunification worker and the foster care process as a whole, would improve significantly.
- In the researcher’s opinion, it is understandable that most birth parents would have a negative association with the social worker who had removed their child / children from their care. This should be taken into consideration when reunification services are delivered to the birth parents, as trying to build a

relationship with them could be counterproductive. A thorough “handing over” process to a reunification worker - of which the birth parents take part in - could probably benefit the foster care / reunification process in the long run.

- Child protection agencies may not be directly involved with contact sessions, but do need to take a certain stance when it comes to expectations and standards with regards to contact sessions. There should be clear guidelines regarding what is expected of the social workers, the birth parents, the foster parents and the general protocol surrounding contact. This should be communicated in the agencies’ training of social workers and foster parents and communicated through network meetings with birth parents and the other role players. The researcher would like to argue that if the expectations and standards of the agency regarding contact sessions are discussed with all the relevant parties, much of the stress and uncertainty surrounding contact will be addressed.
- It seems evident that child protection agencies should provide support and training to social workers in order to develop specialised skills in this demanding field of family social work. Gerring et al. (2008:6) point out that social workers are often not adequately trained in “the relational and therapeutic skills that give power to development and growth”. They recommend that social workers are trained in how to help birth parents to engage in services, on the damaging impact of multiple family stressors on any parent, developing a working knowledge of parents’ defensive patterns and developmental needs and an understanding of “relational processes”.

#### **4.5.2.2 The social worker**

- Social workers should understand that they play a very meaningful and significant role in the lives of birth parents whose children have been removed from their care. Considering that birth parents are people who generally have complex, difficult lives with very few support systems (Gerring et al., 2008:6; Haight et al., 2002:186; Salveron et al., 2009:268), the involvement of a social worker can be the proverbial sword hanging over their heads, or on the other hand, may form a part of a developing support network for the birth parents. The values of the social work professions call for high standards in terms of conduct and service delivery to all clients involved in family protection services.

- To the participants in this particular study, seemingly small acts of kindness by social workers, made lasting impressions on them. If this could become the norm in foster care practise, rather than the apparent exception, it can be hypothesised that parental involvement with services would increase and possibly lead to higher reunification rates or at worst, facilitate a more positive and stress-free relationship between the foster care parties.
- If social workers made the time to prepare birth parents for contact and debriefed them after contact, much of the emotional charge could be taken out of the situation and more of the birth parent’s emotional energy could be invested in building and maintaining the attachment they have with their child / children.
- The researcher drafted a checklist with regards to aspects a social worker has to work through with the birth parents as soon as contact starts to take place:

**Table 3: Aspects to be communicated to birth parents**

| <b>Aspects to be communicated to birth parents:</b>  | <input checked="" type="checkbox"/> |
|--|-------------------------------------|
| <p><b>Before the first contact session:</b></p> <ul style="list-style-type: none"> <li>• Ask the birth parents how they are feeling and empathise with these emotions.</li> <li>• Explain expectations in terms of the way the birth parents interact with the foster parents and the social worker, e.g. friendly and well-mannered at all times. This contributes toward lessening the stress for the child who might feel that they need to please all the adults.</li> <li>• Explain that the child may address the foster parents as “mom” and “dad”. This is not forced on the child or expected of the child, but children tend to address the person/s who take care of them in that manner.</li> <li>• Request that they do not make any promises to the child, especially in terms of reunification, as this confuses the child or creates false expectations.</li> <li>• When the time comes to greet the child, try to keep it short and with as little as possible emotion, as this can be upsetting and unsettling for the child and cause them concern or worry about the parents’ welfare.</li> <li>• As much as it is possible for the birth parents to do, encourage them to reassure the child that he or she is in good hands.</li> <li>• Give the birth parents permission to enjoy the time with their child. Encourage them to play and have fun with their child.</li> </ul> |                                     |

|  |  |
|--|--|
| <ul style="list-style-type: none"> <li>• Encourage them that as the trust relationship develops between the different role players, they will be able to spend more and more alone time with their child during contact sessions (if this really is a possibility).</li> <li>• Reassure them that there will be a 15 minute to half an hour session after the contact to discuss the contact session, address any concerns and debrief if necessary.</li> </ul> <p>These points may have to be discussed before a contact session, for a couple of sessions.</p> |  |
| <p><b>After contact:</b></p> <ul style="list-style-type: none"> <li>• Enquire about the birth parents' emotional experience of the contact session.</li> <li>• Give them positive feedback about the aspects that they handled well.</li> <li>• Ask them what they think they could have done better and make suggestions where there is room for improvement.</li> <li>• Give them the opportunity to discuss any concerns or issues.</li> <li>• Confirm a date for the next contact session.</li> </ul>  |  |
| <p><b>General:</b></p> <ul style="list-style-type: none"> <li>• Make sure that the environment that the contact session is going to take place in is comfortable and suitable for children and their birth parents.</li> </ul>   |  |

#### 4.5.2.3 The foster parents

Foster parents sometimes have a difficult role to play during contact sessions, but always an important one. The researcher would like to make the following recommendations about the foster parents:

- Social workers should discuss the expectations of the child protection agency with the foster parents before contact starts to take place. This could include the following:
  - The expectation that, as difficult as it may be, they put their own emotions and opinions of the birth parents aside and encourage the child to enjoy their time with their birth parents.
  - That the foster parents prepare the child beforehand so that they know what to expect during the contact session and with the assurance that they will be returning home with them at the end of the contact session. The

purpose of this is to minimise the child's anxiety and to help them be as comfortable as possible during the contact session.

- A friendly and courteous attitude towards the birth parents would probably decrease tension and help work towards a more trusting relationship in the future.
- That the foster parents bring along any school reports, certificates, photographs and any other important items that will keep them up to date with their child / children's achievements and day-to-day activities.
- Foster parents should allow the birth parents to be the parents during contact sessions. This might require them to be a part of the session initially, but to withdraw as the session progresses and as the child allows it.
- Foster parents should consider referring to the birth parents as "mommy Belinda" or "daddy Hendrik" (in other words use the name of the birth parent) when referring to the birth parents in the presence of the child. This would show consideration to the birth parents who may be experiencing the loss of their parental role in their child's life in a very real sense during the contact session.
- Kenrick (2009:5) suggests that allowance is made for a "transition time" ten minutes at the start and end of contact. The aim of this is so that the foster parents and birth parents can communicate regarding the child's needs, preferences and progress and in so doing, work towards building a positive, supportive relationship.

#### **4.5.3 Recommendations for research**

- Literature has shown that research about birth parents' experiences in and of foster care services are generally an understudied component in foster care services (Alpert & Britner, 2009:135). It is recommended that more research should be done about services to birth parents and how these services can be improved.
- Further studies should be conducted in terms of how children experience contact sessions with their birth parents in order to improve the experience for them.
- Further research is required in terms of how social workers could be trained and supported in delivering effective services to birth parents.



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# APPENDIXES

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CHRISTELIK-MAATSKAPLIKE RAAD NOORD  
CHRISTIAN SOCIAL COUNCIL NORTH

NPO Reg nr/nd 014-017

3 Junie 2018

Me. I. Karam  
Kindersentrum  
CMR Noord

Geagte Me. Karam,

**MEESTERSGRAAD: NAVORSING**

U skrywe van 20 Mei 2018 verwys.

Toestemming word hiermee verleen om onderhoude met biologiese ouers en pleegkinders te voer op voorwaardes soos versoek.

U word ook vriendelik versoek om die CMR van 'n afskrif van u verhandeling te voorsien na afloop van u studies.

Sterkte met u navorsing en al die insette wat dit verg.

Vriendelike groete

**DIREKTEUR: CHRISTELIK-MAATSKAPLIKE RAAD NOORD**

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## INFORMED CONSENT BY PARTICIPANT OF RESEARCH PROJECT

**Researcher:** Mrs. Illana Karam  
**Contact details:** (012) 344 1291  
**Name of Institution:** University of Pretoria

Name of participant: \_\_\_\_\_

Date: \_\_\_\_\_

### 1. Research title

Birth parents' experiences of contact sessions with their children in foster care.

### 2. Purpose of the research study

The purpose of this research is to explore birth parents' experiences of contact sessions with their child / children in foster care.

### 3. The researcher

The researcher is a social worker registered with the South African Council of Social Workers (registration number 10-17008) and has been working in the field of child protection for the last 18 years.

### 4. Procedures

The researcher will conduct an interview with the participant where study-related questions will be asked. The interview will take place at one of the offices of the CSC and take approximately one to two hours. The researcher will be utilising an audio tape recorder during the interview in order to ensure precision of the data collected. These recordings will only be accessible to those directly involved in the research, namely the researcher and her supervisor. Participant identity is kept confidential at all times and no information will be given to the caseworker at any given time.

## **5. Risks involved in the research study**

There are no known physical risks or discomfort associated with this research study. There is however, a possibility that the participant may experience emotional discomfort should the interviewing process raise painful emotions or memories. Debriefing will occur directly after the interviewing process if the interview caused emotional discomfort to the participant. If it is apparent that the participant has suffered any negative effects from the interviewing process, he/she will be referred to the relevant CSC reconstruction worker for further debriefing and if necessary, therapy.

## **6. Benefits of the research study**

There are no direct benefits, financial or otherwise, to a participant in this study. However, the researcher foresees that the results of this study may contribute towards improved service delivery to birth parents who have children in foster care.

## **7. Voluntary participation**

The participant is under no obligation to participate and should the participant feel the need to withdraw at any stage, he/she is able to do so without any negative consequences whatsoever.

## **8. Records of participation in this research**

The information provided by the participants will be protected and responses will be kept confidential. Recordings will be stored on the researcher's password-protected laptop and the transcripts will be secured in a locked cabinet. The only individuals who will have access to the research data will be those directly involved with this research project, namely the researcher and her supervisor. The research information will be safely stored at the Department of Social Work and Criminology, University of Pretoria, for a period of 15 years. The results of this research may appear in professional publications, be presented at professional conference or utilised for future research purposes, but participants will not be identified.

\*\*\*\*\*

My signature indicates that I have read the content of this document and that the researcher to my satisfaction has answered all my questions. I freely give my consent to participation in this research study.

This document was signed at \_\_\_\_\_ on the \_\_\_\_\_ day of 2014.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Signature of researcher: \_\_\_\_\_ (I. Karam)

## INTERVIEW SCHEDULE

What were your emotional experiences in anticipation of a contact session with your child / children in foster care?

Describe your experiences during a contact session with your child / children in foster care.

Describe how you experienced the supervision of a contact session by a social worker.

Describe how you experienced contact with the foster parents during a contact session with your child / children in foster care.

In what way do you think the social worker/s can support you before, during and after contact sessions with your child / children in foster care?