



Pathways of Care Longitudinal Study

Relative/kinship and foster care: Findings from the Pathways of Care Longitudinal Study (POCLS)

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The artist is a young person who grew up in care.

“The banner shows many pathways through the care system with a carer or caseworker acting as a guide, ultimately leading to independence for every young person. Whether we live with family or strangers, study, work, or just try our best, the paths we choose and are guided through in our youth are what we use to prepare ourselves for the happiest adulthood we can achieve” Billy Black

30 August 2022

Acknowledgement

We acknowledge the traditional owners of the unceded lands on which we meet and pay our respect to Aboriginal Elders past, present and emerging. And I extend my respect to Aboriginal colleagues joining this forum.

We remember the Stolen Generations – Aboriginal and Torres Strait Islander children forcibly removed from their families, communities and culture under past government practices.



What is the Pathways of Care Longitudinal Study (POCLS)?



- First large-scale prospective longitudinal study of children and young people in out-of-home care (OOHC) in Australia
- It aims to understand the factors influencing child development in the domains of safety, physical health, socio-emotional wellbeing and cognitive/learning ability to inform policy and practice and most importantly improve child outcomes
- Tracks 4,126 children and young people who entered OOHC for the first time between May 2010 and October 2011 in NSW
- Links child protection, health, education and offending administrative data with first hand accounts from children, caregivers, caseworkers and teachers.

The focus of the presentation: Summary of three key POCLS Reports



- (1) Delfabbro, P. (2017) Kinship and Foster Care: A comparison of carer and child characteristics (POCLS Report No. 7)
- (2) Delfabbro, P. (2020) Developmental outcomes of children and young people in Relative/Kinship Care and Foster Care (Report No. 16)
- (3) Eastman, C., Katz, I. & McHugh, M. (2018). Service needs and uptake amongst children in OOHC & their carers (Report No. 10).

Carer characteristics: foster carers, grandparents and ‘other relatives’

- Grandparent carers were found to be significantly older than the other two groups and reported lower levels of education
- However grandparents had greater experience raising their own children
- Almost a third of ‘Other relatives’ were Aboriginal carers which was over double the rate observed in foster care and grandparent groups
- Most primary carers were not employed but most secondary carers were in employment
- Grandparents and other relative carers were more financially disadvantaged than foster carers.

Relative and kinship carers reported more psychological distress

- On average carers had relatively low levels of psychological distress
- However around 30% of grandparents and 25% of other relatives reported moderate to very high symptoms as compared with around 15% of foster carers
- Most respondent carers were in good health (over 85%) and few smoked or drank alcohol; and grandparents were significantly more likely to report ongoing health problems (almost 40%)
- Overall grandparents were most vulnerable and foster carers least vulnerable.

Grandparents reported a warmer parenting style



- Grandparents were more likely to tell the child how happy he or she made them and to feel close when the child is upset
- Grandparents reported a warmer and less hostile parenting style than the other two groups
- Other relatives were less likely to report being able to get close to the child compared with the other groups.

Children in foster care have more psychological and behavioural problems

Child Behaviour Checklist (CBCL):

- Children aged 6-17 years in foster care have more psychological and behavioural problems; but few significant differences between children in foster care and those in relative care for children aged 3-5 years
- Children in POCLS had on average more psychological and behavioural problems than children in the general population
- Relative care children are slightly older
- Younger children (3-5 years) in foster care may have a slightly higher proportion of developmental problems and those in relative care additional health problems. Highest proportion of problems are with 'other relatives'.

Children living with grandparents were more likely to have family time



- Children living with grandparents were more likely to have:
 - Contact with both their mother and father and with other siblings
 - A good relationship with other birth family members
 - Face-to-face unsupervised contact and overnight stays
- Grandparents also reported knowing the child better and having a better relationship than the other carer groups.

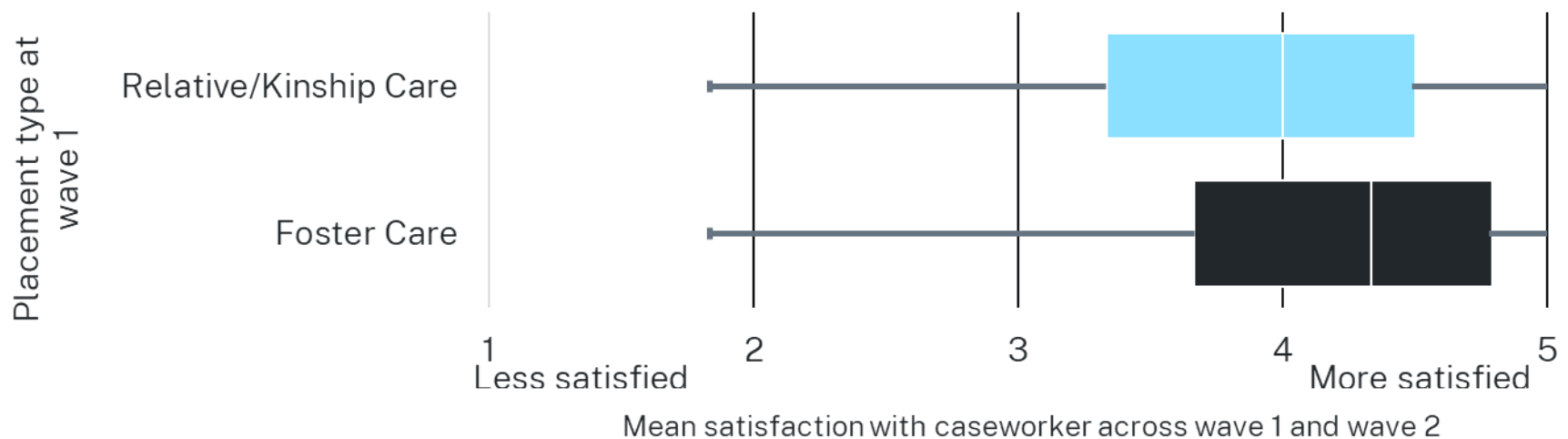
Services and support for carers

- Other than the actual provision of care, service provision is the most important component of the care experience supporting the child's wellbeing and improved outcomes
- A very wide range of services are provided to children in OOHC and their carers
- In addition carers receive informal support from family, friends and neighbours
- The caseworker is a key component of the service provision to children in OOHC and their carers.

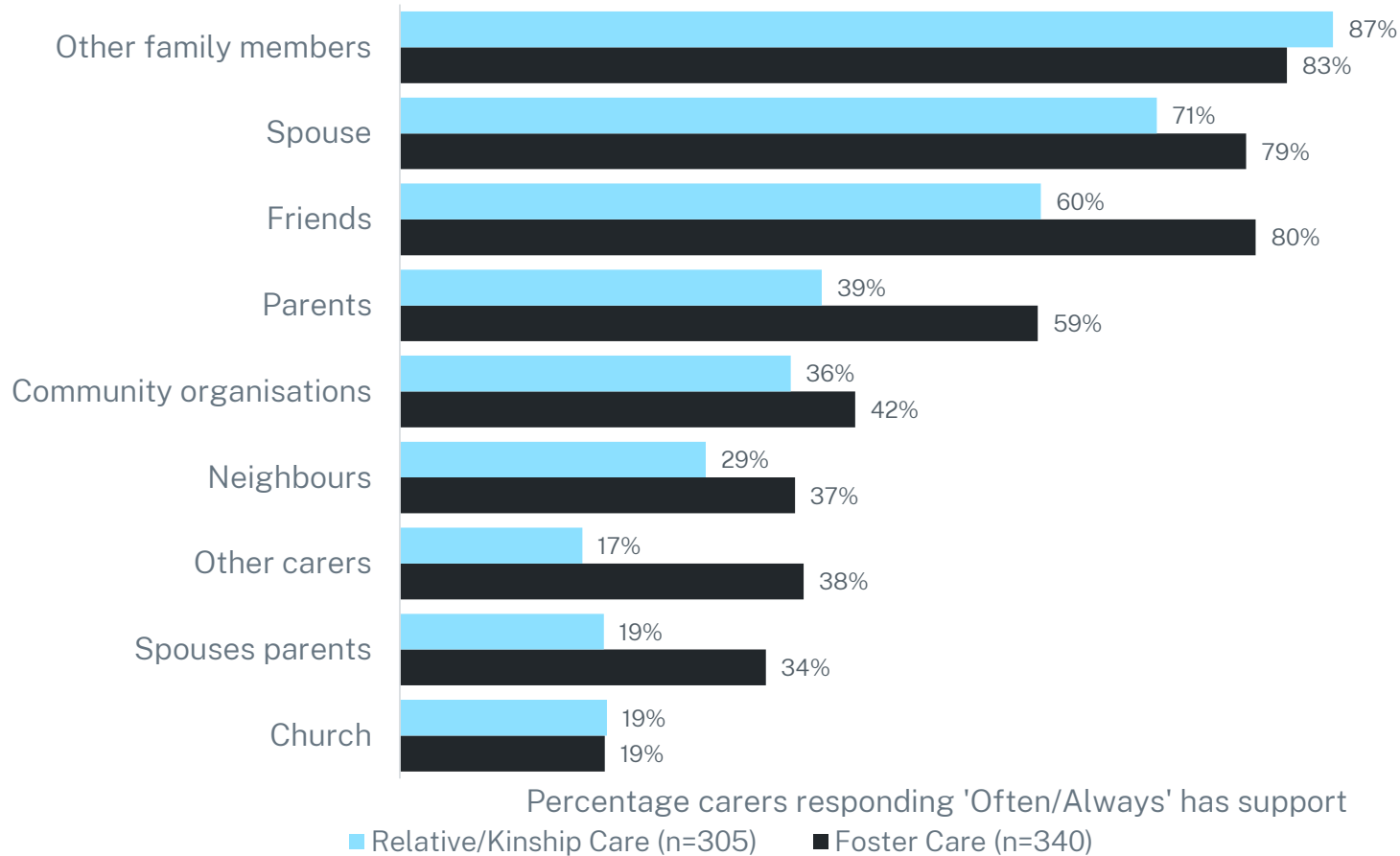
Foster carers were more satisfied with support from caseworkers

Combines:

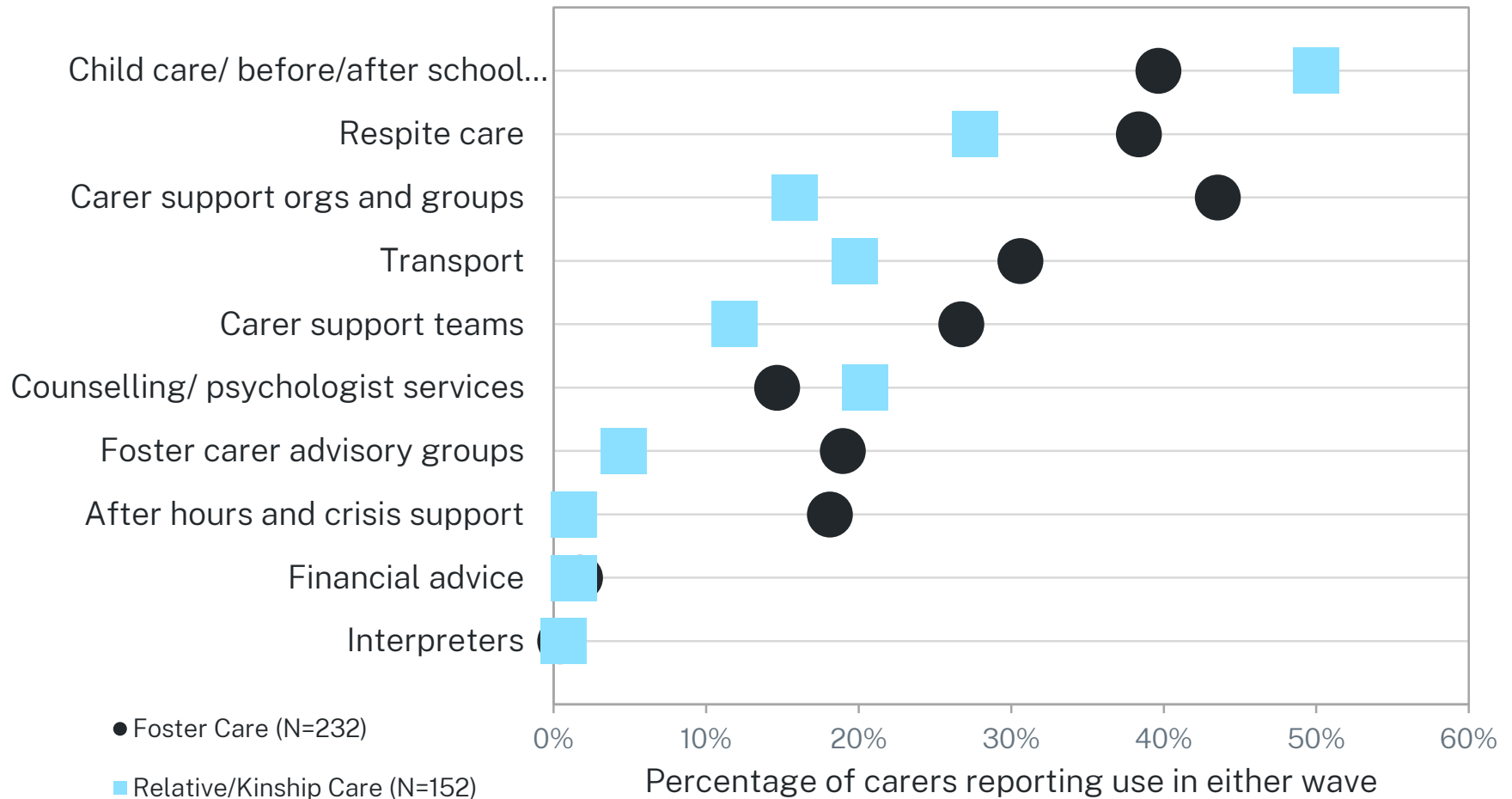
- Ability with being able to reach caseworkers when needed
- Assistance from caseworkers
- Working relationship with other agencies related to the study child.



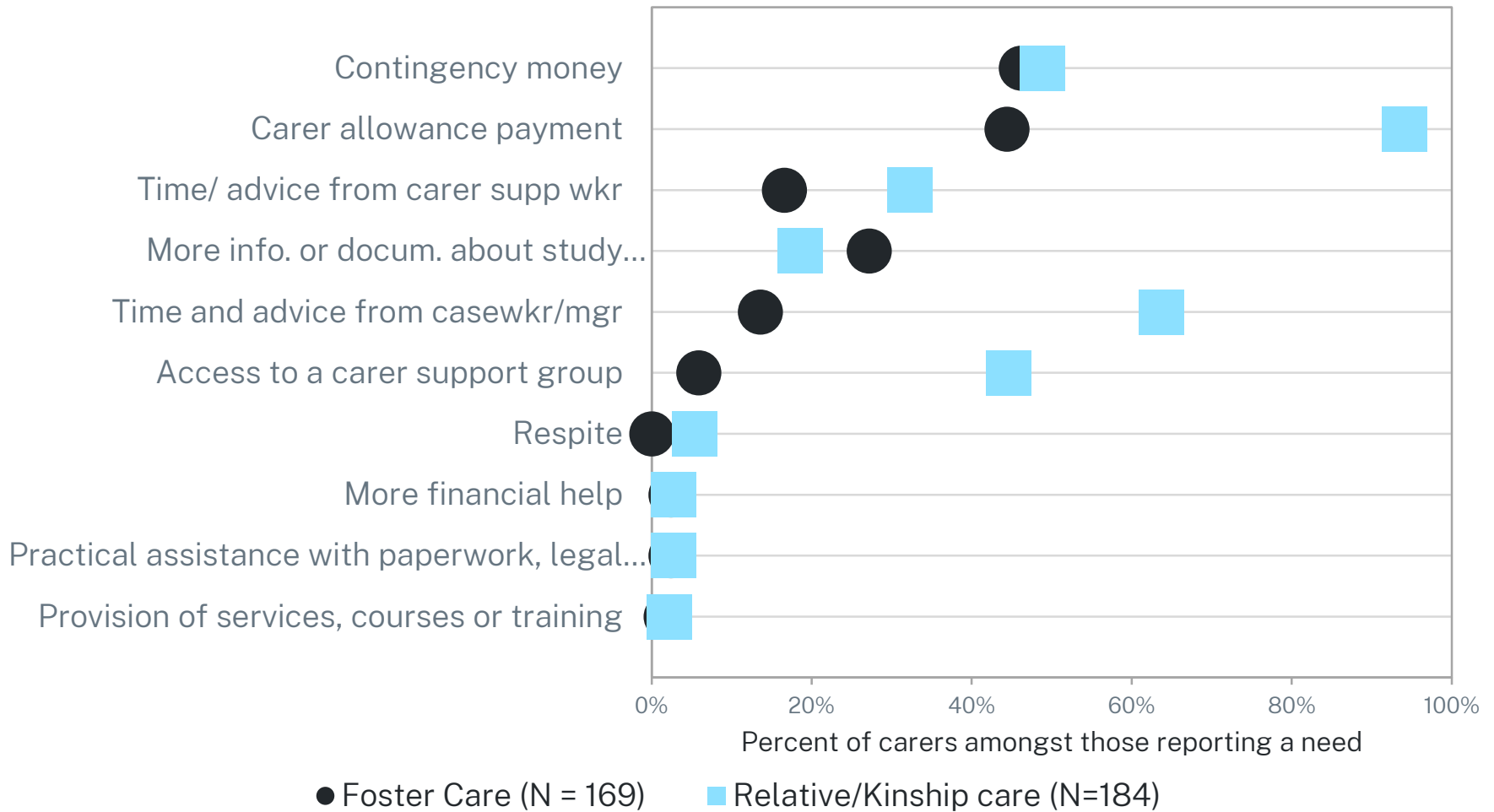
Carer reports of where they 'often' or 'always' received informal support (Waves 1 & 2)



Carer reports of professional services and supports used (Waves 1 & 2)



Carer reports of services desired but not received upon study child being placed (Wave 1)



Summary

- There are clear differences in the characteristics of different carer groups
- Not all kinship/ relative carers are the same
- Grandparents tend to be most vulnerable groups with respect to their physical health, mental health and financial situation
- Children placed with grandparents tend to score better on measures of socio-emotional wellbeing and have better relationships with their carers and families
- It is unclear whether these differences in the children are due to a selection effect ('better adjusted' children get placed with grandparents) or whether exposure to grandparent care makes a difference.

Summary

- Relative and kinship carers have less access to caseworkers and are less satisfied with their contact than foster carers
- Relative and kinship carers do not access as much formal support from agencies or informal support (other than from family)
- Relative and kinship carers also have a higher rate of desiring but not receiving support from agencies and caseworkers.

Conclusion

- Children do very well in relative and kinship care, especially grandparent care
- However relative and kinship carers, especially grandparents, are a vulnerable group who need (and want) high levels of support.

Acknowledgements

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- Children and young people who are participating in the study
- Carers and birthparents who are participating in the study
- Caseworkers, childcare and school teachers who assisted with sample recruitment and completed on-line surveys
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Ethics approval



Human Research Ethics Committee

University of New South Wales HREC (HC10335, HC16542, HC210985).

Aboriginal Ethics Committee

Approval from Aboriginal Health & Medical Research Council (AH&MRC) of NSW Ethics Committee (766/10).

NSW Department of Education

State Education Research Applications Process (SERAP) (2012260).

NSW Population & Health Services Research Ethics Committee

Cancer Institute New South Wales (HREC/14/CIPHS/74).

Further information

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Study information and publication clearinghouse.

