Literature review on children in care who have been put into transracial placemen...

Family, Children



Academicwriting on race, identity and child placements have contributed little to debates surrounding trans-racial placements. The history of this debate – still reverberating, has been explored at length throughout this research project. The purpose of this research is to provide a critical account of the available literature on children in care who have been put into transracial placements. A majority of the secondary research is focused on black children in placements with white foster carers. Followers of transracial fostering believe that children fare better ' psychologically, emotionally and physically' when they are placed in a different racial setting. Opponents believe that children should be brought up by foster carers of the same race in order for the child to obtain a ' positive sense of racial identity' (Williams, M. 1998).

This project also contributes to the debate about the contented nature of ' black identity' and the affects transracial placements has on forming positive ' black identities'. Other issues covered include: examining the legal and policy frameworks with regards to the child's cultural and identity needs which underpin children's services. Considerations have also been given to the role of social workers in promoting the holistic needs of looked after children in foster care, in assessing their identity and cultural needs, as well as the implications and ethical dilemmas for social work practice.

The research paints no clear picture as to whether transracial placements are detrimental to children's adjustment and overall well-being; however, arguments against transracial placements dominate the discussion. No clear arguments highlight transracial placements as being positive however a pragmatic approach has been applied by considering funding and resource limitations. As a result this research provides recommendations on transracial fostering placements within current social work practice.

Introduction

' Racial matching' in fostering placements has sparked off one of the most heated debates in child care policy. In 1979 the Commission for RacialEqualityhighlighted an error in the British care system. ' Basic cultural needs' of black children in care were not being met. Upon reflection it became clear that it was due to an absence in the amount of knowledge and ' eurocentric attitudes' which ultimately led to a deficit in ' coherent planning and culturally sensitive services' (Barn, R. 2001). What remains a poignant reality is for some young black and ethnic minority children to feel like they have been ' dropped in a white sea'. (Voice for the Child in Care. 2004) In the past – concerns have been raised by children in the care system of feeling a ' sense of isolation, alienation and that the system lacks in understanding and providing a culturally insensitive provision' (Black and in Care, 1992)

This research begins with key definitions. This will aid the reader in understanding the key concepts behind which the research evolves. As the research opens to discuss trans-racial fostering, it is key to start by looking at the diversity of the ' looked after' population'. The statistics provide the reader with a framework of understanding the racial make-up of children in care within the UK and will aid some understanding for the following chapters. The next chapter covers the history and the emergence of the ' racial matching' policy in foster care. It discusses fostering services method to placement matching for Black and Minority Ethnic (BME) children. The assessment process, key planning and decision making stages, values underpinning the policy along with support services are examined.

Integration and the issue of black identity in transracial placements have been a key theme. Dean (1993) alongside other writers highlight the need for substitute parents to encourage the child to develop a positive black identity. Assisting with the development of a black identity as well as maintaining ties with the black community are factors which authorities should take into consideration when meeting the child's needs. (Dean, C. 1993). Therefore the research presents findings from studies carried out exploring the racial identity development of a small sample of young adults who were trans-racially placed. Arguments for and against trans-racial placements are then considered in depth taking into consideration how foster carers need to understand and negotiate diverse ethnic identities.

Using these findings, a number of best practice recommendations are made for social work practitioners. It is imperative that social care professionals working with children in care from BME backgrounds become aware of thediscriminationwhich exists and the impact this has on those concerned. A misinterpretation of cultural needs can in turn lead to discrimination and oppression. Therefore the research touches up Neil Thompson's (1997) PCS model – a theory which recognises oppression and discrimination from a Personal, Cultural and Structural perspective. (Thompson, N. 1997) Discussions on how practitioners working in the Fostering and Looked after Children Team need to have a bi-focal vision which will permit them to recognise the different experiences of service users and also work towards creating a structure that will tackleracismboth individually and collectively, in changing policies and practices at the personal, organisational and societal levels.

Within existing research there are a number of unanswered questions regarding attachment in transracial placements. The research considers a small scale study on the attachment outcomes for children in care and suggests that those children in transracial placements experience ' signs of psychological problems'. Having secure attachments and relationships are key for children in care, therefore when assessing foster placements a discussion will take place on how social workers should factor in the child's ability to foster the development of a positive racial identity.

The next chapter very briefly explores how transracial placements have conventionally been a 'one-way traffic' of black children to white carers. Very few researchers have taken notice of this imbalance of white children being placed with black foster carers. Therefore Divine (1983) highlights an contentious issue which needs further exploration within authorities fostering teams. (Divine, D. 1983)

The above chapters have provided evidence for local authorities to enforce a legal obligation to secure a sufficient and diverse provision of quality placements in their local area'. (Department forEducationand Skills, 2007).

Recommendations are then made on links withfamilyand community members in-order for local authorities to meet the cultural and identity needs of black children in care. The GSCC code of practice provides clear guidelines for good professional practice; hence the final chapters offer information on the implications of social care practitioners practice in terms of recruitment, training and consultation.

In conclusion the evidence gathered suggests that Looked after Children from BME backgrounds suffer more from long-standing ' physical, emotional and psychological harm' in comparison to those who are in interracial placements. However a strong argument which has heated up the debate is that without foster carers who provide a transracial placement children would either be sent to residential placements or have no placement. What has been established is that interracial placements although ideal, if unavailable then a transracial placements ought to be established using the recommendations provided.

Notes on language and terminology

Definitions

The terms ' Black' and ' White' are inscribed throughout the research therefore the following meanings will apply:

Black

' Black' belongs to a racial group who have dark skin especially of subsaharan African origin. It is used within this research in a political sense to describe people of African, Caribbean descent (Brah , A. 1992).

White

'White' belongs to a racial group who have light skin coloration. It is not currently a contested term, although it does not describe actual skin colour any more than does ' black'.

It is not the intention of the research to exclude or minimise the experiences of any group, nor to deny that identities are plural and fluid.

Chapter 1

1. 1Children in Care

' Looked after Children' or ' Children in Care' – both are used interchangeably in literature, whether that be in the Government White Paper or authorities procedures. In principle the term ' Children in Care' is used for those children subject to a care/interim care order under Section 31 of the Children's Act 1989 (Great Britain, Children's Act 1989 s31). The term ' looked after' under Section 22 of the CA 1989 refers to those children in the care of the local authority (LA) under a care order or who have been provided with accommodation. (Brayne. H & Carr, H, 2005). A child is often categorised as ' looked after' by an LA (local authority) when they fall into the following criteria. The child is: Accommodated by the LA at the request of a person with parentalresponsibility, or because they are lost or abandoned, or because there is no person with responsibility for them (Great Britain, Children's Act 1989 s20).

Placed in the care of the LA by a court Interim Care Order or Full Care Order. (Great Britain, Children's Act 1989 Part IV).

Subject to emergency orders to secure their immediate protection, Emergency Protection Orders or Police Orders(Great Britain, Children's Act 1989, Part V).

Remanded by a court to the care of the LA (Great Britain: Children & Young Persons Act 1969, s23)

1. 2 Ethnic population of Children in CareAs the research project opens to discuss trans-racial fostering, it is key to begin by looking at the diversity of the 'looked after' population. This is highlighted in the Green Paper, Care matters which provides statistical information on ethnicity alongside other basic information.

The statistics provided include information on the number of children who started to be looked after in England during the year ending 31 March 2010. All figures are based on data from the SSDA 903 return collected from all local authorities.[1] Appendix 1 includes information on the number of looked after children, the reason a child is looked after, their legal status and their placement type.

From 31st March 2010 over 64, 400 children were looked after, an increase of 6% from 2009 and an increase of 7% since 2006. 73 per cent of children

who were looked after in March 2010 were in a foster placement. As demonstrated in Table 1 (Appendix 1) the different ethnic groups are arranged separately. The largest grouping after the white children comprises the 3% of ' other mixed background' – a very diverse census category that is over-represented amongst children looked after to a greater extent than any of the main ethnic groups. For the attention of this research 660 children from Black or Black British backgrounds were in care in 2006. This has escalated to 850 in 2010. (Table C4 – Appendix 1)

For those children who started to be looked after during the year ending 31 March 2010, in comparison to 2009 all age groups showed an increase. Between 2009 and 2010 the number of children starting to be looked after ranging from ages 10 to 15 has continued steadily. Figure 2 below demonstrates the proportions of children who started to be looked after, for each age group, during the year ending 31 March.

According to the most recent statistics supporters of the opposition to transracial placements are alarmed by the ' disproportionate number of black people in care' (Dean, C. 1993). The statistics above assist in providing the reader with a framework of understanding the racial make-up of Looked after Children within the UK and aid some of the understanding within the followingchapters.

Chapter 2

2. 1 What are Transracial placements?

Transracial or transcultural placements relate to the ' placement of a child of one racial group and/orculturewith carers, foster carers or adoptive parents of a different racial group and/or culture' (Hudson, M 2006). For the purposes of this research ' trans-cultural' is taken to also include differences such as religion, language, and sexuality.

Taking a step back into history it appears that trans-racial fostering began to be practiced more widely after World War II. Children from war torn countries without families were taken in by residents within Great Britain. (Baden, A. L, 2001) Those children, who were orphaned, abandoned or their birth families were unable to take on the responsibility for care during the nineteenth and early twentieth century were placed in ' large residential institutions'. Throughout the Second World War these children were placed with ' substitute carers'. (Colton, et al 2007).

According to the Department ofHealth(1998a) history documents that children have in the past been ' looked after' or ' in care' and have been placed in ' institutions, orphanages, foster homes, approved schools and borstals' (Department of Health, 1998a). With an influx of racial ethnic minority children within Britain unaccompanied by their parents, a trend began for domestic fostering agencies to place ethnic minority children with white families. The concern was raised in the early 70's about the number of Black African children who were placed with White families by the National Association for Black Social Workers (NABSW). A statement was released: ' Preserving African American Families' which rebuked the practice of transracial fostering in 1972. The issuing of the statement sparked interest in the affects that trans-racial fostering had on children in care and created an interest for research to be conducted within this area.

2. 2 Foster care arrangements

The different types of foster care arrangements include: emergency, shortterm, respite care, long-term placements, kinship, remand, private, in-house foster care provision, independent fostering agency provision and multidimensional treatment foster care. (British Association for Adoption and Fostering, 2007)

Special attention in this research will be given to ' long term fostering placements'. Those children who are in long term placements are those who are either not adopted or not placed with extended families and subsequently placed on a permanent basis. Therefore high on the government agenda is ' identifying permanency in placement for children when they cannot return to their birth families. (Sinclair, I. 2005)

When a child is placed with a family on a long term fostering basis it is expected that the child will mature remaining in foster care. Once he/she reaches a level of independence it is then anticipated that he/she will move on when ready. One of the key aims of long term placements is for the foster carers to ' provide care for the child throughout theirchildhood.... provide a safe and stableenvironmentto enable him/her to grow both physically and emotionally and to reach their full potential'. (Department of Health, 1998a).

2. 3 Ethnic matching in placements

' Racial matching' in fostering placements has sparked off one of the most heated debates in child care policy. This chapter concerns itself with history and the emergence of ' racial matching' policy in foster care. It discusses the authorities Fostering Teams policies and process in placing Black and Minority Ethnic (BME) children in foster care. The assessment process, key planning and decision making stages, values underpinning the policy along with support services are examined. It begins by assessing the Local Authorities responsibility in meeting the correct placements needs of BME children.

The Children's Act 1989 and accompanying guidance provide for a well considered framework for the placement of children. Under certain legislation, local authorities, when deliberating on how a decision is made are required to:

Promote and safeguard the child's welfare; Consider the wishes and feelings of the child; Consider the wishes and feelings of the parents; Consider the child's ' religious persuasion, racial origin and cultural and linguistic background'; (Great Britain, The Children's Act 1989)

The Children's Act (1989) was the first piece of legislation that specifically required local authorities to consider a child's ' religion, race, culture and language' when making a decision with regards to where the child should be placed (Great Britain, The Children's Act 1989 s. 22). The Department of Health Guidance for Looked after Children 1998 (20) highlights that: ' placement drift should be avoided'. (Department of Health, 1998a)

The quality of services provided by eight social services departments along with the extent to which they are consulted with BME groups in service planning and decision making were scrutinised. In July 2000 the Department of Health published its report on the findings for the above. (Department of Health, 2000a)

A number of issues were drawn to attention within the report. However for the purpose of this research, certain topics which relate to the research have been extracted. An overall summary of the report inferred that the 'needs of Black and Minority Ethnic communities must be met in a more consistent and holistic manner. (Department of Health, 2000a) Succeeding this is Standard 7. 2 of the National Minimum Standard for Fostering Services which states that " each child should have access to foster care services which recognise and address her/his needs in terms of gender, religion, ethnic origin, language, culture, disability and sexuality. (Department of Health, 2000a)

Each foster carer is assigned to a supervising social worker. The supervising social workers from the Fostering Service attempt to work towards the requirements of the National Minimum Standards regarding trans-racial placements. The most ' desirable outcome' for the Fostering Service would be that a foster carer is found from the same ' race, ethnicity and religion'. The optimum placement is decided subsequent to an individual assessment of the child. The choices which social workers are faced with do not include just ethnic matching, there are a number of factors which need to be taken into consideration. Duties in primary legislation are further supplemented by further responsibilities in regulations in placement matching (Department of Health 2000a).

Guidelines to ' balance the different needs' have been made available for supervising social workers. These guidelines stipulate that any factor for example ethnic matching should not be defined with such significance that it supersedes the duty to consider together all factors bearing on the welfare of the child as an individual. (The Children's Act 1989, Guidance and Regulations).

Due to the change in family and social structures – this makes matching an even more complex process. The role of the supervising social worker whilst completing the assessment with potential foster carers is to explore how both they and others within the household would manage issues of ' racial challenge, identity issues and/or rejection by the young person of their black identity, ethnic heritage or religious affiliation'. (The Children's Act 1989, Guidance and Regulations) The impact on extended family, family friends as well as siblings needs to be identified during this assessment process. Often within assessments claims to living in a ' racially diverse area' are often used to justify trans-racial placements, however as will be discussed later in this research, racial challenges can also be faced by BME children in racially mixed areas. The foster carer should have a level of awareness of the above issues and these should be recorded during the matching process. It is also ng social workers to recognise that from physical

imperative for the supervising social workers to recognise that from physical appearance the child's heritage may not be apparent.

Once a placement has been identified for the child, a referral form is completed which outlines the child's needs including health, education and other relevant information. The form should also include the child's ethnicity and culture. Following consultation with a senior manager within the Fostering Team, matching a child's cultural and ethnic needs will be taken into consideration. Best practice guides staff that ' no trans-racial, cultural or religion placement should be made, (The Children's Act 1989, Guidance and Regulations) however in some circumstances it may be that a trans-racial placement may be the best option accessible for the child. The matching process would also need to deliberate on the issue of the child's needs being different depending on their ethnicity and that of the prospective carer. (The Children's Act 1989, Guidance and Regulations)

Cataloging every situation when a trans-racial placement can occur is complex, however the following are a few examples:

Where a Parent expresses a wish for their child to be placed (particularly if S. 20 CA 1989) with an identified carer, and where an established relationship exists between the child and the proposed carer.

Where a child needs to remain part of a sibling group.

A same day placement when there is no other alternative. This does not negate the Council's duty to identify a more suitable the next working day when it is clear that the child will not leave their initial Carer within 72 hours. Religious preference – particularly where expressed by the parent and /or where religion is intrinsically linked to the ethnic identity can take priority over a same race placement.

Where a child has been in a trans-racial/cultural/religion placement for a long time and permanence with the current carers is being considered. Friends and family care.

Grounds for making a trans-racial placement decision are key in the proposal. Ongoing records of the child should include the reason why decisions were made. Under the Looked after Children procedure once a child has been placed review meetings are held by an Independent Reviewing Officer. The review meetings discuss the child's welfare and also take into account whether the child's racial and cultural needs are being met. This is related to all foster placements including trans-racial placements. The child's future within the placement is also considered and whether a more culturally appropriate placement needs to be sought is reviewed. However this decision is not based on the child's racial and cultural needs alone. Other factors need to be taken into consideration including the length of the placement and the child's level of attachment to the foster-carer.

Chapter 3

3. 1 Literature Review

The controversial debate surrounding trans-racial placements has led to many social workers undergoing the complex task of meeting the diverse

https://assignbuster.com/literature-review-on-children-in-care-who-havebeen-put-into-transracial-placements/ needs of BME children. (Thomas, N 2005). The Children Act 1989 supports same race placements within foster care settings. However the simple ' tick box' exercise of the Children Act 1989 s22 is not enough in dealing with the children's diverse needs. Statistics as noted above infer that a number of children from BME communities are fostered into different cultures. Some research suggests that trans-racial placements do not have harmful outcomes and some research suggests otherwise (Tizard, B. & Phoenix, A. 1989).

Various arguments have been presented for and against trans-racial placements. Those supporting trans-racial fostering feel that ' children fare better psychologically, emotionally and physically when they are placed in a different racial setting'. (Williams, M., 1998). The argument on the opposing side suggests that children ' should be brought up by parents of the same race in order for the child to obtain a positive sense of racial identity'. (Williams, M., 1998).

A number of studies closely speculated ' the racial identity of trans-racial fostering' in-order to verify the effects that trans-racial fostering has. (Bagley, C 1993) The chapter begins by attempting to conceptualise the terms race, ethnicity, culture and racial identity.

Ethnicity

The term ' ethnic' has over the years altered its definition. It has been often defined as individuals who '...share the same cultural or biological characteristics'. Bhavnani (2005) defined ethnicity as ' a process of group identification, a sense of cultural and historical identity based on belonging by birth to a distinctive cultural group' (Bhavnani, R et al, 2005).

Culture

Bhavnani, (2005) defines culture as ' sharing of customs, beliefs and traditions with cultural practices passed on from one generation to another through family and community networks'. (Bhavnani, R et al 2005).

Race

The concept of ' race' has existed throughout history; however what the term represents, has, like other concepts modified in relation to its context. Historical literature would perceive ' race' to ' signify people that make up families or national groups, cultures, civilisations in the modern world as well as religions'. (Zack, N 1998). This was later altered and the concept of ' race' within the late eighteenth and early nineteenth century became known to mean ' biological differences' (Zack, N 1998). Christie (1998) states that the interest in the concept of ' race' and the attempt to define racial categories formed part of the scientific revolution (C. J. Christie, 1998) Subsequent to this ' race' was then defined as ' a distinct biological group of human beings who were not all members of the same family but who shared inherited physical and cultural traits that were different from those shared within other races' (Zack, N 1998).

3. 2 Racial Identity

Studies of racial identity are of fundamental importance to this research. A broad range of research has been carried out on the concept of racial identity. Racial group identity is often defined as ' ones self-perception and sense of belonging to a particular group'. It not only includes an individual's perception of oneself but also how individuals make a distinction between themselves and other ethnic groups. It also explored the level to which an individual has reached in obtaining behaviours which are known to be identifiable to a specific racial group. (McRoy R, G, 1990a).

During a child's early development their racial identity development entails two key stages. According to McRoy and Freeman (1986) during the first stage, at a conceptual level, the child has the ability to recognise a difference between the races. McRoy, R. and Freeman, E. 1986). Subsequent to this during the second stage children are able to assess their own membership to a racial group. At the age of three children have the ability to tell apart ' hair texture and skin colour' and are able to develop beliefs and values about racial groups – these are acquired from peers. (McRoy R, G, 1990a).

The primary care-giver in this case – the foster carer plays an essential role in assisting the child to deal with the environment. However the caregiver of a black child has a different role as the child needs to be somewhat prepared for an environment which may be restrictive and often hostile. (Bowman, P, and C. Howard. 1985) From ages three and seven years a child has the ability to detect racial differences and labels which are linked with certain groups. Children are also able to monitor the notion of black versus white in society. However attitudes towards certain racial groups depend heavily on the primary care giver. Children in trans-racial placements often obtain limited information about race which may result in them feeling that it is not fitting to communicate feelings about race. (McRoy R G, 1990b)

Furthermore at the age of seven the child has the ability to understand ' race permanence'. (Aboud, F, E & D. N Rumble, 1987). It is clear from the above that when rearing a black child what is essential for any foster carer is the issue of ' acknowledgement, acceptance and appreciation of racial characteristics'. Semaj, L. T (1985) suggests that black parents or in this case foster carers should find ways which confirm the work of black culture and attempt to prevent identity confusion amongst black children. (Semaj, L. T. 1985).

McRoy and Zurcher (1983) within their study of transracial placements claimed that the ' formation of a positive and unambiguos racial identity may be particularly problematic for black children in white famililes. (McRoy, R., and Zurcher, L. 1983) Dean (1993) goes on to discuss how trans-racial placements can pose a threat to the ' development of a healthy identity in black children' (Dean, C. 1993).

A majority of the arguments against trans-racial placements have been troubled with the rights of black people along with black identity. As Dean (1993) suggests that once it has been recognised that black children have diverse needs which hold major importance then it also needs to be accepted that it is desirable for black children to ' maintain a distinct and separatecultural identity' (Dean, C. 1993). Dean (1993) promotes the needs for children in care to have a strong sense of identity. According to him having a ' positive self image' is essential to mental health. (Dean, C 1993).

Having discussed the need for a healthy black identity and how significant ' positive black images' along with role models can aid this development – it has been stressed that trans-racial placements can never fulfil this fundamental need (Dean, C. 1993). Therefore suggestions have been made by researchers that black foster carers would be in the best positions to ' develop a sense of pride to achieve a positive racial identity and a well integratedpersonality' (Arnold et al, 1989, p 424).

Dean (1993) alongside other writers highlight the need for substitute parents to encourage the child to develop a positive black identity. Catering for the ' black' child's needs in assisting with the development of a black identity as well as maintaining ties with the black community are factors which local authorities should take into consideration (Dean, C. 1993). Black children in particular have been noted to ' struggle to gain a positive sense of racial identity' (Cross 1971 cited by DoH 2000a). A ' model of identity' is presented by Cross (1971) for social workers and other child care professionals to ' make the correlation between the child's own perception and their emotional development' (Cross 1971 cited by DoH 2000a). In-order to develop a positive racial identity and good self esteem, children should be placed with a culturally matched family. (Caesar, G., Parchment, M., and Berridge, D. 1994). It is believed that for children in care, the foster carer is a ' primary role model' and children in a long term placement will identify themselves as being like their foster carers. A testimony from an adult who had been brought up in care in a number of ' trans-racial' placements stated:" I was always taught in growing up that Black was bad and that because I spoke nicely White people would accept me as one of them – it doesn't matter about my skin colour, that doesn't matter, blot that out" (Children's Legal Centre, 1985). What is described above is a child's difficulty in integrating his color into a positive racial identity.

The Clarke Doll Experiment (1939) conducted by Dr Kenneth Clarke involved asking children from a black background to select between either a white or black doll. Both dolls were identical and had nothing but skin colour as the distinction, however most of the children felt that the white doll was ' nicer'. A number of questions were also posed to the children, one of them being " give me the doll which most looks like you". In past tests and one conducted in the 1950's - 44% of the children said the white doll looked like them. Johnson et al (1987) used the above mentioned Clarke Doll approach to carry out a longitudinal study on looked after children in trans-racial placements. His findings inferred that black children who were in trans-racial placements identified with the doll as having a race similar to their own. They had a better awareness of their race and ' greater preference' towards the doll than did interracially fostered children. The study was later conducted at older ages. Concerns were raised from the results that trans-racially fostered children's ' awareness and preference stayed the same over time, while interracially adopted black children's preferences and awareness both increased more rapidly and exceeded (Baden, A. L. 2001).

The findings highlighted that children in trans-racial placements were ' developing differently' from those in interracial placements. The ' development difference' may well be a sign of the struggle in the child's racial identity. (Johnson et al 1987) Although the experiment lacks in strong evidence which validated the harmful effects due to the differences Johnson P. R presumes that the different patterns of development may be harmful. (Johnson, P. R et al, 1987)

Another strong argument is that children ' need to learn about the culture of their families or orgin'. In Britain, the Association for Black Social Workers along with other associated professionals petitioned before the House of Commons Select Committee arguing that ' children of a different race should be placed with parents of their same race' (Tizard, B. and Phoenix, A. 1989).

The National Association of Black Social Workers (NABSW, 1971) felt that trans-racial placements barred children in care to ' receive a total sense of selves' (Simon, R. J., & Altstein, H. 1987). They feel that the children's opportunities to learn about themselves as individuals, their heritage and their cultures are weakened due to trans-racial placements. Their ethos as stated by the president of the NABSW in 1971 stands as ' black children should be placed only with black families whether in foster care or adoption'. (Simon, R. J. & Altstein, H. 1987).

Pennie, J Rhodes infers that ' Black children need black families'. The richness of culture cannot be taught, a child needs to grow up to experience the culture whether that includes language, foodandmusic. (Rhodes, P. 1984). The risk of a black child growing in a ' no-man's land' is raised from living with a white foster carer. Another testimony from a young black woman fostered in a white family and neighbourhood states: " I think, to have sent three young black children from London – a place where there are people of different colours, creeds and races, to a place of pure whiteness was a very cruel and wicked thing to do......We were hundreds of miles away from people whom we could identify ourselves with. It was like being put on a desert island – no-one to relate to and no sense of direction". (Voice for the Child in Care, 1989)

A child's identity according to Maxime is ' shaped by external reinforcements'. She raises the issue of positive reinforcement being given when children from a black backgrounds consent to white social values and states; ' most black children in this society are reinforced positively when they show signs of adjustment and acceptance to society and its values. This happens even when society is so often hostile and rejecting to black people (Maxime, J E in Ahmed et al 1986).

Robinson (2000) carried out a comparative study of adolescents of ethnic minority backgrounds in care with thoseliving at home. Both groups attended

a multiracial comprehensive school in a city in the West Midlands. Racial identity issues of 40 African – Caribbean young people living in care were matched with a sample of 40 African – Caribbean children not living in care. Robinson's findings protested that both groups had relatively ' high levels of self-esteem and of internalisation of their identity as black young people'. (Robinson, L. 2000) For those who eagerly identified and associated themselves with the black community were most likely to have higher levels of self-esteem. The following quote supports Robinson's study. ' They want to know about their history, to learn about black achievers and to have positive black role models who have not subjugated blackness for achievement and status. They want black carers who will be kind to them and support them. They want to keep links with their families and to feel secure and comfortable in their skins and in the company of other black and minority people'. (Voice for the Child in Care 2004a)

3. 4Child DevelopmentPerspective

A number of studies have been compiled which look into the development of attachment and the significance which it has on young children. Attachment is often defined as the ' social relationship between infants and their caregiver'. (Centre of Early Education and Development 1991). Early work on attachment theory has been covered by John Bowbly and later developed by other theorists. Bowlby (1969) states that without a secure base of first attachment relationships, children won't be able to cope with separations of ' normal life'. (Bowlby, J. 1969 cited in cited in Cowie, H. 1995) Attachment is central to infants and children's ' social and emotional development'. (Crawford, K. and Walker, J. 2003). Attachment behaviour according to Schaffer (1997) is mutual as opposed to unidirectional and defined as a " long enduring emotionally meaningful tie to a particular individual." (Schaffer, H, R. 1997). Mary Ainsworth's (1913 – 1999) attachment classification demonstrates that infant behaviour can be attributed to secure or insecure attachments. The reasons behind many children's attachment and the symptoms which they are displaying according to Ainsworth (1978) could be a lack of consistency in the relationship with their mothers along with a possible past of separation. (Ainsworth, M. D. S. et al. 1978).

Bowlby believed that an attachment between parent and child is essential for normal development. Observational and clinical evidence implies that the lack of an attachment or a serious interruption of an attachment relationship can result in the child feeling distressed and in some cases enduring behavioural/emotional problems. Bowlby also discusses discrimination in his work and proposes that during the first few months infant's behaviours are without discrimination. This includes ' cuddling, grasping and smiling'. Subsequent to this between three and six months the infant is able to ' discriminate against familiar and unfamiliar figures'. According to Watkin (1987) if an infant is removed from the family his/her attachment behaviour may be delayed as the child is most sensitive at this age, (Watkins, K. P. 1987). From infant to the toddler stage – if in long term care and the child is able to ' maintain proximity' to the carer and there is responsible care-giving

Page 27

then the infant could become securely attached. Bowlby suggested that a deficiency in nurturing from the primary caregiver could lead to the child in adulthood having an ' affectionless psychopathy' (the inability to have deep feelings for others' (Watkins, K. P. 1987).

According to Fahlberg 1985 part of the foster carers role is to support the child in developing healthy attachements. (Fahlberg, V 1985). Studies have demonstrated that those children who experience early maltreatement are more likely to exhibit a high instance of anxious and resistant attachment (Egeland, B & Scroufe, L. A 1981).

A small amount of research was conducted on the attachment outcomes for children in care in trans-racial placements. Yarrow et al (1973) within their study found that children who were removed from their birthparents into trans-racial placements after six to seven months of age experience ' signs of psychological problems' The children were then followed ten years later and the findings inferred that a number of the children still experienced ' difficulty in establishing different levels of relationships with people'. (Yarrow, L. J. Goodwin, M. S., Manheimer, H. & Milowe, I. D. 1973).

Singer et al (1985) also examined attachment amongst children in transcultural placements. This comparative study looked at attachment between 3 groups. 19 infants in interracial placements, 27 infants in trans-racial placements and 27 living with birth families. Signer et al (1985) found that those who have more insecure attachment relationships were amongst those who were in trans-racial placements. (Singer, L, Brodzinsky, D., Ramsay, D, Steir, M., & Waters, E. 1985).

Within research there are a number of unanswered questions regarding attachment and trans-racial placements. Whilst assessing attachment in trans-racial placements it is essential to recognise the mediating variable which is the ' quality of care? given to the children prior and subsequent to being placed. Despite the number of placements which the child may have the ' quality of care and the level of comfort? is core in aiding the attachment.

Having secure attachments and relationships are key for children in care, therefore when assessing foster placements, social workers should consider the following when a trans-racial foster placement is sourced: does the child have the ability to develop a positive racial identitySocial workers need to also within the placement promote ' healthy attachments and psychological development' and assess how they are ' maintained and strengthened' (Howe, C, 1999). Howe, C (1999) work was condemned by Robinson (2002) who states that her was unsuccessful in his research about discussing the attachments within the black community and just lightly touched upon the subject referring to ' cultural variations' (Robinson, L 2002)

Chapter 4

4. 1 Institutionalised Racism

Thompson (1997) suggests that it is ' fundamental to recognise cultural differences of ethnicity...failureto recognise this covert shift from ethnicity to

race serves to mask racism and its subtle influences'. (Thompson, N 1997). Cultural processes also have a large impact where black people felt they were defined by their language as having a ' black identity'. Mac an Ghaill (1991) challenged Margaret Thatcher who claimed that we had fixed

identities and discussed the processes in which race is constructed. According to Mac an Ghaill (1991) ' This was not a crisis of race but rather race has provided the lens through which the crisis was perceived and mediated'. (Mac an Ghaill, M 1991).

The deep rooted issues of racism along with the inequalities in society within Britain's history – it may come as no surprise that these issues have entered into the care system. According to Pennie 1987 a child is better equipped to deal with racismif brought up by a foster carer from the same ethnic background. ' Black carers will have had similar experiences so that they are in a better position to pass on skills necessary for a survival in a white racist society'. (Rhodes, P 1984)

Contemporary theories relating to racism and ethnicity consider the different ways in which racism is conceptualised with culture and how knowledge is maintained within culture. Dalrymple and Burke (1995) suggests that ' oppression itself is a powerful force.... on a personal level it can lead to demoralisation and a lack of self-esteem, while at a structural level it can lead to denial of rights' (Dalrymple, J. and Burke, B. 1995). A theory which recognises oppression and discrimination from a cultural point of view is the PCS (Personal, Cultural and Structural) analysis. According to Thompson (1997) the PCS theory intends to eliminate oppression, in particular when

Page 30

challenging racism. The cultural aspect of this model lays the foundation for understanding and eliminating racism. This model can have a beneficial impact when tackling discrimination within social work practice. It can enable individuals to be able to challenge collectively the dominant culture and ideology. Thompson, N 1997)

For social care professionals working with looked after children from BME backgrounds, it is imperative that they become aware of the discrimination which exists and the impact this has on those concerned. A misinterpretation of cultural needs can in turn lead to discrimination and oppression. Thompson (1997) highlights that within social settings individuals are labelled by ' social divisions' such as ethnicity. These labels in turn shape the base of the social structure. According to Thompson (1997) this enables ' organisations to form networks of social relationships, which plays an imperative role in the distribution of power, status and opportunities'. (Thompson, N 1997)

It is essential that supervising social workers along with social workers from the Looked After Children Team recognise that if the policies and practices of the organisations are inadequate, this can lead to ' structural deficiencies' and in turn have an effect on individuals and make them, feel powerless. Dominelli (1997) states that this can be perceived as a ' colour-blind approach', whereby equality is assumed rather than proven because all individuals and groups are treated as if they were all the same'. (Dominelli, L. 1997) Many policy initiatives have been introduced to address issues of racism ranging from encouraging integration and legislative action on racial discrimination. The development of anti racism campaigns and research into discrimination have strongly influenced the development of social policy. (Bhavnani, R. 2001).

Throughout the 1950's to 1960's the importance of ' assimilation' was highlighted which involved teaching immigrants to learn English in order to adapt to the UK. This was then followed by ' integration'. Multi cultural policies were implemented which involved teaching everyone about ' other cultures'. Roy Jenkins in 1966 defined this approach as ' equal opportunity accompanied bycultural diversityin an atmosphere of mutual tolerance.' (Blackstone, Parekh and Sanders 1998). During this time criticism of multicultural policies were flagged from the left and right. The right campaigned that it was important to keep ' cultures' distinct. However the left highlighted that attempting to understand the ' other' of black cultures did not assist in tackling the power relations of racism. (Bhavnani, R 2001).

In-order to assess discrimination from social work practitioners for Looked after Children the research explores Neil Thompson's PCS model – a theory which recognises oppression and discrimination from a Personal, Cultural and Structural perspective. The PCS model highlights the interconnections between the Political, Cultural and Social levels and how society functions with these three different levels. The P intends to represent the personal, psychological, practice and prejudice', this takes into account each individuals ' actions, feelings and thoughts'. This would for example highlight how social workers interact with children in care and the ' inflexibility of mind' which stands in the way of social workers ' non-judgemental practice'. (TOPPS 2002) According to Thompson as individuals values and norms are ' internalised through socialisation', hence the P is implanted in the C level. The C intends to represent culture, commonalities, consensus and conformity. Here individuals share ways of seeing, thinking and doing and share norms about rights and wrongs. Therefore social inequalities are justified by culture, a culture which is validated by structures such as the society and economy in which we live. The C level is then interconnected with the S level, representing Social Divisions and Socio-political which interlock patterns of power and influence. (Thompson, N 1997).

Social workers amongst other practitioners need to understand and obtain the practical knowledge along with the necessary theoretical framework to understand the different signs of racism. Practitioners working in the Fostering and Looked after Children Team need to have a bi-focal vision which will permit them to recognise the different experiences of service users. This approach will allow them to empower the service users they work with and eliminate the power dynamics between ' us' and others. This approach will also work towards creating a structure that will tackle racism both individually and collectively, in changing policies and practices at the personal, organisational and societal levels.

It has become apparent whilst researching that some organisations have a misunderstanding of service user's cultural needs which can lead to oppression. Thompson (1993) asserts that no practice can be considered good practice without awareness of discrimination and its impact on both service users and practitioners. (Thompson, 1993) Some organisations seem to employ poor individual practices and also inadequate policies, which can lead to structural faults and have an effect on individuals and make them, feel powerless. In-order to eliminate institutionalised racism within social work Dominelli proposed that fighting racism is white peoples starting point in acknowledging that they have a different relationship to racism from black people, leading to different roles in dismantling it' (Dominelli, L 1988). Good practice according to Neil Thompson is for social workers to take into account in their day to day work that oppression and discrimination exists. With reference to fostering, Thompson speaks about the need for social work practitioners to assist children in care to ' achieve a positive black identity'. (Thompson, N 2001). His work in his book 'Anti-Discriminatory Practice' does not claim any remedies to anti-racist social work, nonetheless it anticipates that social work practitioners will make more of a conscious effort to eradicate the problem (Thompson, N 2001) The Uncomfortable Edge Theory is also a tool which works to ' educate the oppressed' along with social workers with a consciousness. It allows social workers to question their economic and political situation and view problems from different levels. Inorder to achieve this level of consciousness social workers must become more aware of the sources of oppression; reject compliance and work collectively to eliminate oppression. (Jones, C & Thorpe A, 2008)

4. 2 White kids in Black houses.

According to Devine (1983) trans-racial placements have conventionally been a ' one-way traffic' of black children to white carers. (Divine, D. 1983). Very few researchers have taken notice of this imbalance of white children being placed with black foster carers. Cheetham (1982) consulted with social care practitioners from 18 local authorities of social services departments. Her findings were of some concern. Those departments which had ' black foster parents would never, except in the direst short-term emergency situations place white children with black families' (Cheetham, J. 1982). The justification for this was not what may have been expected – that foster carers from these backgrounds were reserved for black children, but the fact that such placements would be unpopular with natural parents or, in some cases, with local councillors. (Cheetham, J. 1982)

Some authorities recognise that the dynamics of placing a child from a BME background with foster carers from a white background is quite different to placing a white child in a black family. The reason provided was that a ' white child will continue to have the cultural re-enforcement of the dominant culture and is less removed from their heritage than a black child would be if placed in a white family'. (Cheetham, J. 1982)

Rhodes (1992) discusses her research which consisted of a discussion within the fostering team when a proposal came forward for black family to foster a white child. She discloses that no policy was in place within the fostering team for white children to be placed in black families and it was thought ' unlikely that a black family would be considered'. (Rhodes, P 1992). Rhodes (2002) also observed when the fostering team faced a sever shortage of white carers. Again she documents that ' At no point was the placement of white children in black families suggested. (Rhodes, P 2002) Another study conducted on authorities was that of white children being placed with African-Caribbean foster carers. However this was perceived by those within

the fostering team as a situation ' arising from a shortage of white carers, rather than a positive choice based on carer skills' (Barn, R et al, 1997 in Barn, R 2002)

Due to the limited information on studies concerning white children being placed with black foster carers – generalisations cannot be made. However this does raise some important points and correlates somewhat with the institutionalised racism which was discussed above.

Considering the placing of white majority ethnic children with black carers forces an examination of good placement practice. It emphasises the need to look beyond simplistic ' racial' matching and at the complex needs of all children linked to their individual experiences, ethnicities, religion, class and culture. A skills-based approach, providing it works within a protective framework of countering racism and exclusion and promoting positive identification for all children, can increase the pool of foster carers available to white majority group children, without reversing the practice of placing black children appropriately.

Chapter 5

A number of arguments presented dispute on the amount of children in care vs. the availability of ' same race' placements. Simon, R. J., & Altstein, H. (1987). General arguments in place for trans-racial fostering by a Black sociologist dispute that ' no child should be denied a permanent home when parents of other cares are available'. (Ladner, J. A 1977). Within the social work realm when the task of finding an immediate placement is at hand, arguments of recruitment of foster carers from ethnic minority communities and that preventative measures are necessary to reduce the proportion of Black children in care are of very little aid in resolving the issue. Therefore the conflict of finding a speedy placement verses the needs of finding an

ethnically matched placement for a social worker could well cause a setback in making a decision and rejecting a permanent placement for a child which is unfavourable to the interests of the child.

According to Biehal et all (1995) ' Young people of mixed heritage who do not see themselves from a particular background and should not be pathologised as suffering from ' identity confusion'. (Biehal, N et all 1995). Studies have explored the intricacy and the variety of attitudes around ' identity, culture and placement'. For some young people in care, ethnicity does not equal to them the ' best placement'. A testimony from a child in care confirms this.... ' I was always placed with the same background, people from Trinidad. I didn't like it because.... I felt at the time, ' why did they place me with TrinidadiansJust because I'm a Trinidadian doesn't mean you need to place me back with a Trinidadian family. Any person who is suitable to look after a child I'm happy with'. (Granville, J and Miller, B 2006)

Often due to the child's past experiences it is key and should be recognised that children/young people in care when making ' identity choices for positive reasons' are not discarding their cultural background because they were rejected by their birth families or because of any previous ' unresolved confusions or conflicts' (Biehal, N., Clayden, J., Stein, M. and Wade, J. 1995) 5. 1 Social Identity Theory

Some researchers take the approach that social work practitioners should have a ' open attitude to young people's self-definitions of ethnic identity' as opposed to dogmatically hypothesising that a child from a mixed heritage background would regard themselves as having a certain identity. (Biehal, N et al 1995).

In 1979 Henri Tajfel and John Turner developed the Social Identity theory which is compromised of three central elements. Firstly categorisation, this proposes that as humans we use social categories to assign individuals as well as ourselves to certain groups. By doing so, we define fitting behaviour by reference to ' the norms of groups which individuals belong to, in order to understand the social environment'. (Henri, T & John T 1979)

The second element is identification. According to the Social Identity theory the 'self-concept' is comprised of both personal and social identity, with social identity being that particular part of the individualsself conceptwhich ' derives from his/her knowledge of his/her membership of a social group/s together with the value and emotional significance attached to that membership' and personal identity being that part of the individuals self concept which requires the individual to think of themselves as unique individuals. (Tajfel, H. 1978) Finally, the notion of social comparison brought together by Festinger's (1954) infers that as individuals in order to assess ourselves, comparisons are made with others in order to label their group as positive, and therefore seeing themselves in a positive light. (Henri, T & John T 1979)

A crucial aspect of this theory is the fluctuating nature of identity. While people tend to identify with many social groups, based on various factors such as race, ethnicity, class, gender and so on, these factors become relevant at different times and in different ways. BME children in care may categorise themselves in particular ways not only to fulfil the need to feel valuable and worthy but also to feel competent and effective. (Henri, T & John T 1979). Yet, although the group, role and personal identities provide different sources of meaning, it is also likely that these different identities overlap.

Stuart Hall's (1992) observations on the topic of identity enables us to assess the notion of ' self-definition'. Hall argues that an identity is better understood as a ' process of identification, something that is never absolutely stable, that is subject to the play of history and of difference'. He suggests that as people reformulate their self-definitions their identities are in a constant state of instability, Hall advises us to think of an identity as a ' production that is always in process and always constituted within representation' (Hall, S 1992 cited in Hall, S et al 1992)

Foster carers should be compliant in recognising issues of ' race and racism' and be able to display behaviour ofrespectand values for the different cultures which the young persons may come from. According to Dwivedi 2002 .. talking through emotional and cultural issues, valuing and acknowledging cultural identities, heritage and histories of ethnic minority people'. (Dwivedi, K N, 2002)

As above research evidence suggests that emotionally healthy children can be raised trans-racially. Therefore taking into consideration the resource limitation with the number of forthcoming foster carers from BME communities it is recommended that a number of steps should be taken by white foster carers to work towards creating a strong sense of identity and for the connection to remain within the child's community. This involves the foster carers seeking a number of opportunities to develop racial awareness and being accountable for keeping issues of identity, colour, religion and culture alive in the family. (TOPPS 2002)

5. 2 Links to family and the community

Research conducted by the Voice for the Child in Care takes into consideration the impact which a birth family has on a black child. The justification given is that those children from white backgrounds who are raised in societies which are mainly populated by those from white backgrounds have a number of ' role models' which represent their identity. However for children from black and minority ethnic backgrounds birth families are really the only ' gateway' through which they can access their cultural and ethnic identities. Some of the key comments brought out of the research of children in care were that the young people felt that they were: ' kept away from themselves', ' brought up to be white' and lost their sense of racial and cultural identity. They also discussed the problems this created for them on returning to their communities upon leaving care.

In summary a majority of the studies look at how some black children brought up in a predominantly white context could lose a positive sense of their racial identity and heritage, even viewing themselves as ' effectively white'. (Gill, O and Jackson, B 1983) In particular what is concerning is that once the child becomes what is referred to as a ' care-leaver', the risks of conflicts of identity are far greater. Further evidence which highlights the importance of family links comes from a study of the Moving On and Leaving Care Scheme. The Department of Health's study Caring for Children Away from Home: Messages from Research: states that even where ' family relationships were poor, family links, including those with brothers and sisters, grandparents and other members of the extended family, were very important to most.' (Department of Health, 1998)

The Department of Health's studies Caring for Children Away from Home: Messages from Research: also found that children in care who maintained family links had a ' positive sense of identity' – they had a secure sense of self which provided a platform for secure future personal growth and development. Ince (1998) carried out a study Making it Alone: a study of the care experiences of young black people. Her findings inferred that lost contact with birth families led to ' displaced identity'. This was particularly for children who came into care at an early age and remained in care long term. Ince (1998) stressed the significance of children in care maintaining and facilitating positive links with the family and community. (Ince, L 1998) What also needs to be taken into account is that those children who come into care at a later age may be able to salvage and enter with a sense of identity. A quote from one of the children in care from Ince (1998) study ' My advantage was as a black person I had my family before going into care. So I knew about cooking and the way black people live their lives. But for those of them who are in care and don't know, it's hard when they leave'. (Ince, L 1998). Where possible the local authorities and social work practitioners should source links within the child's wider family or look within the community. Relatives in particular should be spoken to by social workers to play a key role in connecting the child to their family. (Voice for the Child in Care 2004b) . The Practice Guidance to the Framework for the Assessment of Children in Need and their Families (Department of Health 2000) goes a step

further in stating that although they accept that having close links to the immediate family holds some weight, however to achieve a sense