An exploration of the experience of children and prospective parents as they transition into a permanent placement arrangement: An interpretive collective case study.

A thesis presented in fulfilment of the requirements for the degree of

Master of Philosophy

at Auckland University of Technology,
New Zealand

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2007

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Attestation of Authorship

"I hereby declare that this submission is my own work and that, to the best of my knowledge and belief, it contains no material previously published or written by another person (except where explicitly defined in the acknowledgements), nor material which to a substantial extent has been submitted for the award of any other degree or diploma of a university or other institute of higher learning."

Signed _____   **Date**_____

Research Approval

The research was approved by:

The Auckland University of Technology Ethics Committee (AUTEC) on the 18th May 2005 (Ethic Application Number: 05/27).

The Research Access Committee (RAC) Child Youth and Family (CYFS) on the 20th July 2005.

Acknowledgements

My warmest appreciation goes to my supervisor Dr. Kerry Gibson, for her assistance and continued enthusiasm for this research. Thank you for your wisdom and clarity which kept me focussed, particularly during the early stages, when I was unclear of my direction. It turned out to be a long journey and your ongoing support throughout the duration of the writing of this thesis has been invaluable.

This thesis could not have been completed without the ongoing support of my family who unfailingly continue to believe in me, and provide me with much needed encouragement, heartfelt thanks goes to each of them. My unavailability, and at times selfish pre-occupation, with reading, viewing and writing required over and above tolerance and reminders that "this too will pass." To my husband Colin, you are probably the one who has shown the most patience, as other 'important things' repeatedly needed to be 'put on hold'. To my son Gareth, your way of keeping things in perspective, reminded me on more than one occasion of the need to find ways of restoring some semblance of balance into my life. Special thanks must go to my son Gregg for the time you have given so generously, reading and providing feedback, in addition to the mammoth effort you put into editing this thesis, your knowledge and suggestions helped me enormously, particularly in helping me to say in a paragraph what I thought needed a page, or two!

I also want to acknowledge and thank the Social Workers from the Permanent Placement Unit in Grey Lynn, Auckland. Your enthusiasm and support for this study from its inception let me know it was a worthwhile venture, and your participation, particularly in sourcing and preparing the families for the research was crucial.

My greatest thanks go to the children and parents who were willing to be part of this research. Especially for your honesty and openness which was humbling as you allowed me a window into your lived experience. Your stories while different and specific to each one of you, are stories I have heard told in different ways over many years. Your stories needed to be acknowledged - Thank you.

Dedication

To all the children who, through their resilience of body, mind and spirit, have survived the effects of maltreatment from people they relied on, but for whatever reason, these people did not do a good job of caring for them - and also to those children who, despite their resilience, did not survive.

To the permanent placement parents who make a long-term commitment to the children in their care and do their best to understand them with tolerance, love and patience, and at times unrewarded dedication. For their willingness to struggle alongside the children to find a way forward.

To the social workers who often have do the hard and distressing work of removing children from their birth families in order to keep the child safe. Without your willingness to take on this difficult work lots more children would not make it.

I urge us all to keep as a tenet, the oft quoted African proverb
"**It takes a whole village to raise a child**"

Abstract

This research study examines the psychological and emotional experiences of children and parents as they embark on a permanent placement living arrangement. A permanent placement living arrangement is entered into when a child is no longer able to reside with their family of origin. Three family groups participated in the study and separate interviews were conducted with both the children and placement parents. Overall, three interviews were conducted, with the first interview taking place prior to the child's transition into the family. A further two interviews were conducted with the participants after the transition had taken place. The findings of this study indicate that both the parents and children were profoundly affected by the experience of permanent placement. The common themes that emerged from the data were the hopes, anxieties and coping strategies of the participants which became the focal point of analysis. The parents experienced a mixture of fulfilment, tempered with anxieties of whether they would be able to provide adequate care for the child placed with them. Whereas, the children appeared to find it difficult to trust that this experience would be any different from their previous experiences. The study concludes that further attention is needed in the preparation for the transition into permanent placement. It further concludes that 'after transition' support is important to the stability of the placement.

Chapter One: Introducing the Study

Introduction

The following thesis presents the findings of a qualitative study, which examines the psychological and emotional adjustments experienced by children and their prospective caregivers as they move into a formalised permanent placement living arrangement. The present chapter provides an overview of the aims of this thesis and the rationale for embarking on this research.

The study

In New Zealand, a permanent placement arrangement is entered into when a child is no longer able to reside with, or be cared for, by their birth parents. The present study focused upon the transition phase of the child joining the placement family and sought to explore how children and prospective parents interpreted this experience for themselves.

Within the study, participants were restricted to those where permanency had been sought outside of the extended family. Three participant groups were included, all of whom were interviewed prior to the transition taking place and then again after the transition was complete. The children were between the ages of eight and ten years at the time of transition, and the parents were all first time permanent placement parents.

The purpose of the study

The purpose of the present study was four-fold. Through the use of a small number of in-depth case studies, data was utilised to:

1) Inform and deepen our understanding of a child and parents' initial adjustment to a permanent placement living arrangement.
2) By application of theory, better understand the influence of permanent placement on the child's social and emotional development.

3) Inform therapeutic practice with children and families in these situations.

4) Discuss the implications of the study for policies and practices governing permanent placement in New Zealand.

Definition of Permanent Placement: In order to put the study into context it is important to define both what permanent placement is, and to clarify what it is not. A permanent placement living arrangement is entered into when a child is no longer able to reside with, or be cared for, by their birth parent(s).

In New Zealand, the right of a child to have the stability and permanence of a safe environment is provided under section 13 of the Children, Young Persons, and Their Families Act 1989 (see Appendix A). The principle in section 13(h) provides that:

> where a child cannot be placed with, or returned to, family or the extended family group, the child should be given the opportunity to form a 'significant psychological attachment' to a caregiver in a 'new family group' where the child can 'develop a sense of belonging in which his or her sense of continuity and personal and cultural identity are maintained' (s13(f)(iii)).

Inherent in this definition are a number of reasons why permanent placement may be chosen as an option for a child. However, further expansion is warranted to clarify what this means in reality. Permanent placement is a form of foster-care, sometimes identified as 'out of family care'. Unlike foster care, however, which has traditionally been regarded as a temporary arrangement with the expectation the child will return to his/her family of origin, or as an interim measure prior to adoption (Steinhauer, 1991), permanent placement has the intention of being a formalised long-term arrangement which is more akin to adoption. It does not, however, have the strict sense of permanence that adoption has as the arrangement is only officially in place until the child reaches adulthood, or when "independent living is achieved" (Derrick, 2004). In New Zealand, for children who come under the guardianship of Child Youth and Family Services (CYFS), this is legislated as being achieved at either the age of 17 years or in some circumstances 20 years.

The expectation of permanent placement is that the child will remain with their new family until they reach adulthood, and the new parents will have guardianship and custody of the child. But whereas with adoption, birth parents give up guardianship of the child, in a permanent placement arrangement birth parent/s continue to hold joint guardianship, therefore the parameters between permanent placement and adoption are different. This in itself is both an anomaly and a contradiction, and an important aspect to consider when thinking about how this arrangement may be experienced by the participants, or what it might mean psychologically to both the child and new parents.

Legal Process: Once it has been determined that a child or young person is in need of care and protection from physical, emotional or psychological harm, or inability on the part of the child's caregivers to provide adequate care for the child, a Social Service Agreement is entered into. A declaration will subsequently be made by a family court judge that the child or young person is in need of care and protection (Yates, 2000).

When children come into care, they are in the custody and guardianship of CYFS. Usually this is additional guardianship, as their birth parents also remain guardians. Initially the permanent placement parents are considered caregivers and they don't have any legal standing. After a period of time which is usually around 6 months, or whenever it is deemed appropriate, the caregivers can make application, via a lawyer, to the family court for custody and additional guardianship of the child. Consent is not required by the birth parents, other than that they need to be served with the application documents. From the time of service they have 21 days to object, if they do not object and if nothing is heard within this time-frame, the assumption is that they are willing for the application to proceed. If they do not support the application they will need to seek the services of a lawyer and file an affidavit with the court stating the reason why they do not support the application by the caregivers. If this occurs, the final decision is made by the court, taking into account the best interest of the child.

If it is a straightforward matter, the application is filed in the Family Court and CYFS report to the court confirming their support of the application. Typically the Court will

grant the application under the Care of Children Act (2004) and at that time discharge CYFS from their role as guardians (see Appendix B). The permanent placement parents then have additional guardianship with the biological parents under the Care of Children Act (2004). The permanent caregivers also have a Parenting Order made in their favour giving them the day to day care of the child (Information provided in the Permanent Placement Unit (PPU) Auckland, information leaflet).

In some instances permanent placement parents choose not to finalise the application for permanency. This may be for a variety of reasons, but anecdotal evidence would suggest one reason for this reluctance, is that once CYFS relinquishes their role with the family this results in the withdrawal of ongoing social work involvement and financial support (Ward, 2004). If this is the case, the child can remain with their new family but CYFS will continue to have additional guardianship of the child and this will remain in place until the child reaches the official age of adulthood.

Table 1

Permanent Placement Statistics 2000 – 2006. Adapted from information provided by the Permanent Placement Unit (Auckland), 8th May 2007.

	n
Number of children placed	83
Number of children returned to CYFS care post orders	2
Number of orders not achieved due to significant behavioural problems	14
Number successful placements no orders achieved	24
Number of successful placements with orders	43

Motivation for this study

In my work as a Child Psychotherapist, I have come into contact with several families adjusting to these new living arrangements, and while it would appear that logistically a great deal is done to ensure the process is managed in the very best way for all concerned, it is my belief that the psychological and emotional adjustment of both the children and parents needs further inquiry.

It is difficult to care for children who have experienced major disruptions in their families and may well, as a result, experience some level of traumatisation (Rushton, Mayes, Dance & Quinton 2003; Schofield & Beek, 2005) and from my observations it is the lack of attention paid to this aspect that frequently results in tension and misunderstanding for both the child and parent/s, leading to difficulties in sustaining the relationship. My interest lies in the psychological and emotional adjustments needed by the participants as they embark on a permanent placement living arrangement. Furthermore, I am interested in what variables help or hinder this process.

In my association with the statutory agency charged with administering this policy, they indicated a keenness for contemporary research into the phenomenon of permanent placement, and have reported viewing a study such as this as timely. The involvement of the statutory agency has been vital to this research. In particular, the social workers attached to the Permanent Placement Unit in Auckland who were instrumental in the recruitment process through accessing, introducing the research to and gaining consent from suitable participants.

Chapter Two: Structure and Parameters of Permanent Placement

Introduction

The following two chapters will review the existing literature regarding permanent placement. Firstly, this review will be presented in relation to the history and trends in the fostering and adoption of children and the increasing interest in permanent placement. Secondly, the review will focus on the possible implications for both the child and the parents in this kind of family relationship. The implications of a transition into such a relationship, including the developmental, emotional and psychological needs of children, the effects of maltreatment on a children's development, how this may impact on the parents and what may be needed to support them and the placement will be discussed.

The current chapter provides a context within which to understand the purposes and consequences of 'permanent placement' in New Zealand. It outlines different models of caring for children who cannot continue to be cared for within their birth family. It discusses key aspects in regard to the philosophical reasoning behind these models and the practical aspects of caring for children within the parameters of each model. Trends from other Western countries will also be briefly discussed. Finally, several of the potential advantages and pitfalls of the permanent placement model will be illustrated.

Adoption, foster care, permanent placement and kinship care

An increasing volume of literature has been produced in recent years, particularly in relation to adoption. However, less has emerged in relation to long-term foster care, and in particular what has become known as the permanent placement of children. It has been speculated that because of the much greater stability associated with adoption, populations of adopted children and adopted adults have become the target of researchers from different disciplines (Triseliotis, 2002). Yet, there does appear to be a growing interest in the concept of permanency for children who require out-of-home care, traditionally referred to as long-term foster care (Lowe & Murch, 2002; Neil, Beek &

Schofield, 2003; Steinhauer, 1991; Triseliotis & Hill, 2000; Waddell, MacMillan & Pietrantonio 2004).

Changing nature of out of home care: A study by Neil, Beek and Schofield (2003), exploring the differences between adoptive parents and foster carers, suggest both adoption and long-term foster care have evolved and changed during the 20th century, in particular with regard to their usage, function and nature. In addition, that due to the changing nature of families and social mores, the original purpose of these 'concepts' has needed to adapt to new social needs (Neil et al., 2003).

A New Zealand Law Commission Review (2000) suggests that originally, 'adoption was a measure that dealt tidily with illegitimacy and infertility'. With regard to foster care, Steinhauer (1991) posits that traditionally there were two main reasons that foster care would be used for children, either as a temporary measure prior to adoption (usually for a period of three months), or to provide temporary caretaking for children whose parents were ill or in financial distress. However, due to changes in social policy these measures no longer adequately capture the role and function of such a relationship.

Changes in social policy and public perceptions have lead to an increase in parenting options. The stigma of illegitimacy no longer exists in the wider social context of New Zealand, with the legal concept of illegitimacy being abolished by the 1969 Status of Children Act. Abortion is an option for some women, depending on religious and personal beliefs. Surrogacy arrangements are also available for some woman and parents, as is In Vitro Fertilisation (IVF). With the introduction of the Domestic Purposes Benefit in 1973, parents raising children alone are eligible for financial assistance by the government. Furthermore, due to changes in societal views, anecdotal evidence suggests some parents managing alone frequently receive emotional and practical support from extended family members (Worrall, 2005).

Despite these changes there continue to be high numbers of children world wide who are in need of substitute parenting. Figures obtained from the Department of Child Youth and

Family Services Annual Report for the year ending June 2006 identify that in New Zealand there were 5314 children in care (Department of Child Youth and Family Services Annual Report 2006). This reflects an increase of 47% in children placed in care since the 1999/2000 figures (Worrall, 2007).

New Zealand is not alone in having need for fostering services. Figures obtained from the British Association for Adoption and Fostering (BAAF, 2006) identify that at the end of March 2006, the combined total for England, Northern Ireland, Scotland and Wales of children in care by the local authorities was in excess of 70,000. Figures from the United States identify that as at September 2005, there were 513,000 children in care as a result of parental abuse or neglect (Adoption and Foster Care Analysis and Reporting System; AFCARS, 2005).

The changing nature of children being fostered and adopted: There seems to be some agreement that adoption has changed, and is continuing to change, primarily because the needs of children are changing (Briggs, 2003). The number of adoptions of infants has reduced (Ivaldi, 2000), which may be as a result of social policy and changing social attitudes as identified. Consequently, older children with complex care histories now form a large proportion of children being adopted or placed permanently (Briggs, 2003). There is a growing body of research indicating that children who enter care these days usually do so as a result of maltreatment and exposure to family conflict, and as such tend to present with a range of emotional disturbances (Howe & Fearnley, 2003; Rushton, Mayes, Dance & Quinton, 2003; Schofield & Beek, 2005).

The study undertaken by The New Zealand Law Commission (2000), looking at the history and practice of adoption and possible alternatives, made recommendations that have changed statute. The main recommendation of the report was for an introduction of a 'Care of Children Act' that provides for a range of care options to be available to children, from temporary care to adoption. It was further recommended that the status of 'Enduring Guardianship' be introduced to be used where responsibility for a child was partially or totally taken by a step-parent or family member. This would then pass

parental responsibility to a new set of parents without removing the birth parents from the child's life. It was proposed this would result in shared parental responsibility.

Of particular relevance to this study, are the differences in care arrangement for children, both in terms of the legal standings, and of what is provided for the child, in order to make comparisons and identify the complexities of permanent placement.

Adoption

New Zealand has a long history of social policy and was the first country in the Commonwealth to introduce legal adoption in 1881. At its inception, adoptive parents and birth parents had access to each other's identity, and the adopted child's birth surname could be retained and hyphenated to the adoptive surname (Griffith, 1998). The 'Adoption Act[1]' (1955) increased 'State' involvement to ensure the 'Protection of the Welfare of the Child' (Adoption Act 1955) which changed this level of openness. Consequently this intervention appears to have resulted in 'a climate of secrecy' surrounding adoption, which may have been largely due to Section 7(6) of the Adoption Act that endorsed 'a parent or guardian of a child may give consent to an adoption without knowing the identity of the prospective adoptive parents'. In addition, societal opinion appeared to undergo a change in conjunction with these legislative changes, described as "there was an unspoken presumption that an unmarried woman would give up her child for adoption to be raised in a two-parent family, and those who didn't were labelled selfish" (New Zealand Law Commission Review, 2000, p. 15).

The secrecy was partially eroded by the Adult Information Act (1989)[2] which gave some rights both to adoptees and birth parents. Since then 'open' adoption, whereby the child and birth parent(s) have some level of ongoing contact has become common practice in New Zealand, and which is described in the New Zealand Law Commission Review (2000) as New Zealand "leading Western adoption practice with regard to openness"

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[1] A full review of this Act can be cited via the Child, Youth, and Family Service website (http://www.cyf.govt.nz/) or the Family Court website (http://www.justice.govt.nz/family/).
[2] For a full review of the Adult Information Act, the reader is referred to New Zealand Law Commission Review (2000).

(Avebury, 1994 cited in Law Review 2000, p. 19). Furthermore, the review suggests it is now common for birth parents to choose who they prefer as adoptive parents, and in some cases birth parents and prospective adopters will meet before the final choice is made. This process is facilitated by section 6 of the Adoption Act (New Zealand Law Commission Review 2000, p. 30).

According to some studies, adoption is still seen as the permanent placement of choice and in the best interest of the child (Kelly, 2000; Triseliotis, 2002). A study by Pecora, Whittaker, Maluccio and Barth (2000) suggests adoption is most commonly used for providing new families for children in the public care system who cannot return home. The authors of the study further identified that these children tend to be beyond infancy but younger than the general population of looked after children. Citing a legislative consultation process utilised in the United Kingdom (Department of Health, 2000; Performance and Innovation Unit, 2000 cited in Ward, 2004), Ward (2004) identifies that public service agreement targets have reinforced the duty of local authorities to maximise the use of adoption as the permanent placement of choice wherever achievable and in the best interest of the child. Briggs (2003) maintains adoption is an under-used permanence option for many children, especially for older children who present with a range of specific difficulties. A significant number of these children 'drift' in short and long-term care and do not return to their birth families (Briggs, 2003).

However, there are differing views regarding adoption. For instance, Ward (2004) citing Lowe and Murch (2002) suggests "it is recognised that adoption is hard to achieve for school age children, especially boys who are over represented in the care system, sibling groups, and those with acute special needs" (p. 17). Ward (2004) posits an adoption plan is unlikely to be in the best interest of children if they have to wait indefinitely due to a lack of suitable adopters, and furthermore, that it may be inappropriate "to pursue adoption if there is a desire not to sever all legal ties with a birth parent with whom the young person enjoys a valuable relationship" (p. 17). In agreement with this assertion Triseliotis (2002) suggests that although the number of older children needing out of home care is increasing, full adoption for these children is not always achievable.

Steinhauer (1991) also questions the assumption that adoption is the permanent placement of choice, suggesting "adoption is viewed, at times naively, as generically better than foster care" (p. 8). The author goes on to speculate that this may be due to the fact that once adopted, the child ceases to be a financial drain on the state. However, Steinhauer (1991) also concedes it is not in the child's best interest to drift between unplanned care giving arrangements.

A Scottish study undertaken by Selman and Mason on behalf of the Adoption Law Review Group of Scottish Executive (Selman & Mason, 2005) discusses alternatives to adoption and incorporates a comparative analysis of current care options and alternative options being discussed in eleven countries including New Zealand. The other countries were the United Kingdom; United States of America; Australia; Sweden; Norway; Denmark; Netherlands; France; Spain and Canada. Outcomes of the report identified that a higher number of looked after children were placed for adoption in the UK and USA, but that the other nine countries did not regard adoption as the preferred solution:

> most of the countries have not seen adoption as the preferred solution and the reluctance of most to remove children against parental wishes should act as a reminder of the importance of having a wide range of options in offering permanence for looked after children (p. 13).

Sense of security and belonging afforded by adoption: Discussing the sense of security for children afforded by adoption, Briggs (2003) maintains it is vital to recognise that for children who are unable to return to their birth parents or relatives, adoption provides unique legal and psychological security and permanence that no other long-term placement option can provide:

> whilst for a variety of good reasons, some older children may have to remain in long-term foster care and will benefit from it, it would be misleading to say that this gives true permanence and life-time commitment. Although many problems remain to be overcome, adoption continues to be a positive, effective option on the continuum of permanence for children unable to return to their birth parents or kinship network (p. 36).

There appears to be some agreement that adoption provides higher levels of emotional security and a stronger sense of belonging resulting in a more enduring psychosocial base in life for children who cannot live with their birth families (Triseliotis, 2002). Furthermore, it is suggested that when difficulties arise, adopters, on the whole, persevere against the odds (Howe 1996; Quinton, Rushton, Dance & Mayes, 1998) whilst long-term foster carers may be more ready to give up as the nature of their task, including their contracts, allows for opting out. (Schofield, Beek, Sargeant & Thoburn, 2000; Sinclair, Wilson & Gibbs, 2000; Triseliotis & Hill, 2000).

Foster care

In recent times formal foster care in New Zealand has usually been entered into when there are concerns about a child's physical, emotional or psychological well-being. The 'Care of Children Act' (2004) which replaced the Guardianship Act (1968) is the statute that incorporates the regulations and parameters of substitute family care from temporary care arrangements through to adoption. It is recognised in the Act that children's circumstances differ infinitely and that the forefront of any consideration must be the best interests of the child (New Zealand Law Commission Review 2000).

A recent study by Worrall (2007) reviewing contemporary models of foster care, identifies that in New Zealand "long-term foster care is not legally an option, as under the Children Young Persons and their Families Act 1989 (CYPF Act 1989), permanent placements must be found for children as soon as possible, and preferably within their own family/whanau[3] structures" (p. 3). However, the author further notes, that "some children remain with caregivers for many years in spite of legal requirements" (Worrall, 2007, p. 3).

Triseliotis (2002) defines the intention of long-term foster care as "invariably the child will live in the family on a 'permanent' basis until they reach adulthood and possibly beyond forming a psychosocial base in their life" (p. 23). However, the author goes on to

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[3] Whanau is a wider concept than just an immediate family made up of parents and siblings - it links people of one family to a common ancestor

question whether there is an anomaly between the concept of long-term foster-care and the concept of 'permanency', suggesting "the term cannot objectively be applied because parental responsibility often continues to be held either by the local authority or by the birth parents" (p. 23). It would also appear that within social services in Britain there is wide spread confusion as to what exactly is meant by the term 'long-term fostering' or 'permanence' (Lowe & Murch, 2001; Triseliotis & Hill, 2000). This concept is contrasted with adoption which it is suggested, confirms permanence through its legality with all parental responsibilities being transferred to the adoptive family, and that the child can only be removed, like any other child, if the adopters are found to be neglectful or abusive (Triseliotis, 2002).

Sellick, Thoburn and Philmot (2004) propose that long-term fostering can be viewed as a positive choice for children and carers who require the ongoing supportive presence of the child-care agency, or for children who have high levels of direct contact with their birth family. However, like Triseliotis (2002), they also question the concept of 'permanence' in this arrangement, maintaining that while children are still 'looked after' their situation can never be viewed as truly permanent due to a possible change of care plan or future legal challenge to the care order. The authors further identify that foster parents have no parental authority in law and that the statutory agency will continue to be involved with ongoing social worker visits to review the placement which in turn may undermine the child's sense of permanence and belonging (Sellick et al., 2004).

Comparing adoption and foster-care, Briggs (2003) posits the opinion "that although adoption is the major permanence option for children unable to return to their birth family, other permanence options do exist including long-term foster care, residence orders and kinship care" (p. 23) and suggests that if a child is likely to retain strong links to their birth family and is at an age they are able to indicate they do not wish to be adopted, it may be more appropriate to pursue a non-adoption permanence option.

Sense of security and belonging afforded by foster care: Studies both in New Zealand and overseas suggest there is increasing concern that children are often left in long-term

foster care, or have a number of long-term foster placements without a formal care arrangement being secured. Research is beginning to focus on the implications of this for children in regard to their emotional and psychological well-being (e.g., Barber & Delfabbro, 2004; Mulligan, 2003; O'Neil, 2000; Schofield, et al., 2000; Smith, Gollop, Taylor & Atwool, 1999; Thoburn, 1990; Triseliotis, 2002; Webster, Barth, & Needell, 2000).

Triseliotis (1983) identifies that in the early 1980's attention was being drawn to findings suggesting that long-term foster care, unlike adoption, appears to leave children feeling unusually insecure and lacking a full sense of belonging to their substitute family. Citing several other studies (e.g., Bohman & Sigvardson, 1990; Hill, Lambert & Triseliotis, 1989; Rowe, Cain, Hundleby & Keane 1984; Tizard, 1977; Triseliotis & Hill, 1990), Triseliotis (2004) highlights two key areas identified in the findings:

> 1) Anxiety and uncertainty on the part of the child and their carers arising from the impermanence of their situation, which he posits is due to the lack of legal security.

> 2) The ambiguous position of children in long-term fostering appears to make them feel that they 'belong' to nobody, suggesting this may be due to the fact they do not live with their biological parents, yet their carers are not their parents. Furthermore, this ambiguity, including things such as having a different surname from their carers may lead to a sense of unusualness and difference with their peers.

Permanent placement

New Zealand has been at the forefront of promoting the need for permanency of care for children not able to continue to be looked after within their birth family. The New Zealand model of permanent placement, which is achieved through additional

guardianship, is attracting interest from other countries (Selman & Mason, 2005; Ward, 2005).

The Children, Young Persons and Their Families Act (1989) provides for the following, abbreviated stipulations[4], which are relevant to this study (see also Appendix A):

> where a social worker reasonably believes a child is in need of care and protection, a family group conference is convened to provide a forum in which extended family can discuss the needs and ongoing care for the child and then make decisions and recommendations for the child's care. If the care and protection concerns have reached the Family Court or Youth Court, the judge may call for a social worker's report, medical, psychiatric and psychological reports and cultural and community reports to provide assistance in this matter. In addition, a barrister or solicitor can be appointed to represent the child and the child or young person can give evidence.

> Where the court determines the child is in need of care and protection, the child may be placed in the custody of another person, or the court may make a guardianship order appointing another person as the guardian of the child.

The Care of Children Act (2004) which came into force on the 1st July 2005 replaces the Guardianship Act 1968 and provides for the following, abbreviated stipulations, relevant to this study:

> children should be consulted about decisions that affect them, furthermore that decisions affecting the child should be made and carried out within a time-frame that fits with the child's sense of time.

The Act also shifts the focus away from parents' rights, to parents' responsibilities for their children, and emphasises:

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[4] A full review of this Act can be cited via the Child, Youth, and Family Service website (http://www.cyf.govt.nz/) or the Family Court website (http://www.justice.govt.nz/family/).

the welfare and best interests of children is always the first and most important issue in any dispute about them. The term "Guardianship" has been retained and is defined in terms of the duties, powers, rights and responsibilities a parent or guardian has in relation to the upbringing of the child. Guardianship now ends when the child turns 18 years, it will also end if a child who is 16 years or 17 years marries, enters a civil union or starts a de-facto relationship, written permission from a parent or guardian is required to do any of these things.

The Care of Children Act also stipulates "a child's identity including their culture, language and religion should be preserved and strengthened." Furthermore, it makes clear the importance for children to keep and strengthen links with their wider family, including whanau, hapu[5], iwi[6] and other family groups. It also encourages members of whanau and other wider family groups to participate in the care and upbringing of children.

Under section 27 of the Act, the court is also able to appoint additional guardians to the birth parent/s, either on application by any person, or on its own initiative. It is this section of the Act that is activated when permanency of care outside of the family is being sought. Once additional guardianship is granted, parenting orders can be made in favour of the additional guardians giving them the day to day care and responsibility for the child.

Derrick (2004) discussing the permanent placement process, identifies that foster or kinship carers can seek additional guardianship provided for within the CYPF Act 1989 and if this is granted they initially share parental responsibility with CYFS. If and when a greater degree of autonomy is perceived to be in the child's best interest, the caregivers can apply for a guardianship order within the Care of Children Act 2004 which gives the caregivers full custody rights and removes the child from CYFS care (Derrick, 2004).

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[5] Hapu refers to a sub-tribe or extended family group linked through genealogy to a common ancestor.
[6] Iwi means tribe and a number of hapu make up an iwi. Belonging to an iwi is defined generally by genealogy.

Sense of security and belonging afforded by permanent placement: A review of the New Zealand model of additional guardianship (Ward, 2004) as a comparison for changes to the English system in regard to the proposed introduction of the 'Special Guardianship' statute, suggests there are both positive and negative aspects of the present system. Ward's findings are based on interviews with a sample of 20 New Zealand caregivers already granted guardianship orders of the children in their care, and who between them were caring for 33 children. Maori and Pacific Island guardians were excluded from the study, the rationale for this is described by Ward as being "in line with CYFS policy for such research interviews to be conducted by, or in the presence of, a researcher from a similar ethnic group" (p. 19). Of the 33 children in the study, half had been diagnosed with mild or significant developmental special needs. Overall, the primary reasons the children in the study had been removed from their birth family were neglect, poor parenting and inadequate care. In addition, six children had been subjected to physical and/or sexual abuse.

Ward (2004) offers differing views in relation to the New Zealand model of additional guardianship. On the one hand the author suggests such a process promotes greater security, permanence and sense of belonging for looked after children, as well as a greater sense of parental autonomy and legal protection for the parents. He assesses these factors as being positives to the experience. Furthermore, his findings suggest the majority of the children in his sample appeared to make significant progress after the guardianship order was made, and that guardians reported examples of the children being more settled, had improved sleep patterns, displayed academic improvement and increased confidence. However, his findings also highlighted areas of concern identified by the parents, which he suggests may be a disincentive for the model to be adopted, without changes, by the UK.

Areas of concern identified by the New Zealand Sample were:

- The provision under New Zealand law of the birth parents' right to mount ongoing legal challenges to a guardianship order, and that once the statutory

agency is no longer involved, guardians would have to meet these costs themselves.

- Statutory reviews, which were viewed as being intrusive for the child and undermining of the authority of the guardian.
- On gaining guardianship independent of CYPF, allowances paid were less consistent and predictable, resulting in some parents remaining additional guardians with the CYPF service.
- The lack of consistent aftercare service, which was identified as a primary deterrent for achieving full legal permanence. Many parents feared the withdrawal of CYPF as a mediator between themselves and the birth parents, particularly when it came to negotiating contact.

Kinship care

In New Zealand, placement with kin is mandated as the first option of choice for children unable to live with their birth parents (CYFS Act, 1989). Extensive research has been conducted by Worrall (1996; 1999; 2005; 2007), looking at both the New Zealand experience and overseas trends in relation to Kinship Care with a particular focus on grandparents raising kin children. In a recent study by Worrall looking at contemporary models of foster care, the author postulates "that in Australia and New Zealand indigenous children have a greater chance of being placed with kin than those of the dominant ethnic group" (2007, p. 2) and suggests the same applies to the African American population.

A study by Selman and Mason (2005), looking at policy and practice in relation to 'looked after children' in other countries, also identifies that kinship care is favoured in both New Zealand and Australia. The study further notes that in a majority of Western countries kinship care is now the preferred option. An Australian study conducted by Hannah and Pitman (2001) concurs with this assertion, identifying that the 1990's saw a growth in formalised kinship care arrangements in a number of Western countries and suggests that kinship care is the fastest growing funded child welfare service in the USA. Thoburn, Norford & Rashid (2000) concur with this, positing that in the US there has

been a major growth in the number of children in state custody now living with relatives. Furthermore, in 1997 out of approximately 150,000 American foster care children, approximately one third were living with relatives. The position in the UK appears to be somewhat different, with formal kinship care in UK remaining rare and it is more likely that informal arrangements will be entered into (Thoburn, Norford & Rashid, 2000).

Kinship care is not favoured by all European countries, with Norway, Denmark and France for instance favouring foster care which has a professional status (Selman & Mason, 2005). The Netherlands and Sweden work toward the child being returned to their birth parents, however, where the child can not be returned to the birth parents Sweden will turn to kinship care, suggesting there is less risk of placement breakdown for children fostered by relatives. Kinship care is the main method of foster care in Spain and accounts for nearly half of all looked after children (Selman & Mason, 2005). It appears there is growing use of kinship care in Canada, which according to Worrall (2005) saw an increase from 27,000 children being raised by grandparents in 1996 to 56,700 in 2001.

Sense of security and belonging afforded by kinship care: An Australian study by Hannah and Pitman (2000), suggests several benefits for children in kinship care. Primarily that they are able to live with people they know and trust which reduces the possible trauma that could be experienced by being placed with people unknown to them. Furthermore, it reinforces the child's sense of identify and self-esteem by knowing their family history and culture and that it has the potential to facilitate contact with their siblings.

Focussing on the implications for the kin caregivers, Worrall (2005) notes that while it is argued placement with kin usually affords the least disruptive environment for children, most caregivers are under great duress. The author's 2005 report commissioned by the 'Grandparents Raising Grandchildren Charitable Trust' identifies several areas suggested as needing attention in order to support families in a kinship care living arrangement. These include a review of financial recompense provided for kin foster carers, provision for respite care, provision of free medical care for the children, free counselling for

caregivers to assist them with their own emotional needs, and suitable housing in situations where existing accommodation is inappropriate. The author also suggests culturally appropriate in-service training should be provided to all kin care-giving families, and furthermore that they are consulted when social work policies and practices are being developed or reviewed (Worrall, 2005).

Discussing post-intervention decision making for children in kinship care Atwool (1999) brings caution to the debate, questioning the efficacy of the New Zealand model of permanent planning, both within extended family and foster placements. Arguing that without due regard to attachment theory "children in kin placements are as vulnerable to placement breakdowns as children in stranger placements despite assumptions that kin placements are more harmonious" (Atwool, 1999, p. 44)

Legal rights and responsibilities

The primary effect of adoption is to irrevocably extinguish the legal relationship between child and birth parents and to create equivalent ties between the child and the adopters (Cretney & Masson, 1997). The legal situation with regard to fostered children is quite different. Parental responsibility is shared between the local authority and the birth parents.

The policy for permanent placement in New Zealand is different from both of these positions. In the transition phase of the child moving in with their permanent placement family, parental responsibility is held by the statutory agency and the birth parents. At this stage, the new 'permanent' parents are regarded as foster carers. Once additional guardianship of the child is obtained by the permanent placement parents, the statutory agency relinquishes its parental responsibility. Guardianship is then held by both the child's birth parents and the permanent placement parents, with the day to day care and overall parental responsibility held by the new parents (Care of Children Act 2004).

The New Zealand Law Review undertaken in 2000 identifies the difference between guardianship and adoption. Adoption is a legal means by which people can permanently acquire the status of *parenthood*. Guardianship confers certain rights and responsibilities in respect of a child, but does not have the legal effect of deeming a person to be a parent. Guardianship is a less permanent legal status than adoption, and unlike adoption, guardianship terminates when the child attains the age of 18 years or marries or enters a civil union or de-facto relationship under that age.

The process leading up to the permanent placement of a child

The most important statutes of New Zealand legislation in regard to 'looked after children' are the CYPF Act (1989) and the Care of Children Act (2004). The Family Group Conference (FGC) established in 1989 has its origins in New Zealand with the intent that family members should be included in the decisions made regarding the ongoing wellbeing of the child.

The impetus for the introduction of the FGC in New Zealand was an acknowledgment that a disproportionate number of Maori children were placed in out-of-home placements and that the New Zealand European-style child welfare system seemed insensitive to Maori culture (Hardin, 1996). The CYFS Act 1989 institutionalised the practice of Family Group Conferencing.

If a social worker determines that a child is in need of care and protection, they can advise that a Family Group Conference should be convened. A 'Care and Protection Coordinator' is then contacted who will organise and facilitate the meeting. Parents and members of the family group / whanau / hapu / iwi are invited and encouraged to attend. In addition to the coordinator, the social worker who investigated the case will be present. Other professionals who have relevant experience with the child and family, such as psychologists or teachers, may be invited to attend. If a court case is under way, the lawyer representing the child will also be invited to the FGC (CYFS Act 1989).

The FGC structure and process: There are three stages to the FGC: (1) information giving, (2) private deliberation, (3) decision making. At the information giving stage, the child's social worker and other professionals describe the situation to the family and the family has the opportunity to question the professionals. During the deliberation stage the professionals leave the room so that the extended family can meet in private to determine whether the child has been mistreated and if so how the child should be protected. Ideas generated by the family might include a suggestion that the child will live with a particular family member. At the end of the deliberations the family presents their decision to the social worker and the coordinator.

When agreements have been reached the coordinator writes up the decision which is subsequently distributed to all concerned parties. The agreement must include a plan for future review and possible reconvening of the family (Hardin, 1996).

Contact with birth family - the legal position

The law is clear with regard to the meaning of adoption, that is, to irrevocably extinguish the legal relationship between the child and their birth parents and to create equivalent ties between the child and the adopters (Cretney & Mason, 1997). However, the law is potentially quite flexible with regard to post-adoption contact. While open adoption is not officially recognised in law it is practised, and findings in the New Zealand Law Review (2000) suggest Family Court judges struggle to reconcile open adoption with the Adoption Act.

The UK Adoption Act 1976 (s.12 (6)) and the Children act 1989 (s.8) provide potential legal routes to ensure contact, but it is suggested these are used rarely and only very exceptionally without the consent of the adoptive parents (Cretney & Mason, 1997).

Neil, Beek and Schofield (2003) also discussing practices in the United Kingdom (UK) suggest government guidance is somewhat lukewarm in promoting post-adoption contact. The authors further suggest that:

> Judicial respect for the autonomy of adoptive parents means that most post-adoption contact arrangements have been made on a voluntary basis. Birth relatives have virtually no legal rights to contact and neither is the child's right to contact enshrined in law (p. 403).

In the same study, the authors, citing Schofield (2000) identify that the legal position in the UK with regard to foster children, is such that parental responsibility is either shared between the local authority and the birth parents where there is a care order, or held solely by the birth parents. The Children Act (UK) 1989 (s.23 (7)) outlines a duty to promote contact between a child who is being looked after and those connected with him or her, unless it is not consistent with the child's welfare to do so. Furthermore, even when the local authority has acquired parental responsibility for a child through compulsory measures, it is suggested 'reasonable contact' should still be encouraged (s.34 (1)). The act does not differentiate between children placed short-term with a view to returning home and children for whom the plan is for a permanent or long-term placement. The authors note, their findings suggest that in practice, many social workers feel it is appropriate to reduce the level of contact once a long-term plan is made, however there is no legal basis for this, and that practice may vary between, and sometimes within, local authorities, without a clear sense of an agreed basis for these variations (Schofield, Beek, Sargent, & Thorburn, 2000).

In New Zealand law, the statute appears clear in advocating the importance for children to keep and strengthen links with their wider family, including whanau, hapu, iwi and other family groups (Care of Children Act 2004). However, findings from Ward's (2004) study, looking at the experience of New Zealand Guardianship suggests this is not always adhered to. Indeed, in a more recent study, Worrall (2007) states "in New Zealand, anecdotal evidence suggests that in many instances, contact with the child's parents or previous caregivers is not encouraged, in fact, discouraged" (p. 6).

Recruitment and preparation of parents – the New Zealand process

In New Zealand anyone can apply to formally become a permanent placement parent. This process is typically done through the Permanent Placement Unit (PPU) in Auckland which is part of Child Youth and Family Services. Although this is the most identified route, it is not the only agency managing this kind of care option for children, it is also done for example through Barnardos (Derrick, 2004). When a court-approved plan for permanency with non-kin has been granted, the PPU can accept a referral to find suitable permanent parents for the child.

A typical way to recruit parents is by way of advertising in the newspaper. A profile of the child, using a pseudonym and non-identifying information is placed in the newspaper with an invitation to interested applicants to contact the PPU. Suitable applicants are then short listed and undergo an assessment process which includes police, medical and referee checks and they are required to attend a four week Caregiver Information Course. Although no officially published statistics were available at the time of writing, personal communication with a PPU staff member identified the average time it takes to find and prepare suitable parents, and the child moving in with the family, is between 3 - 6 months, but can sometimes be shorter (M. Lamont personal communication, 8th May 2007).

Summary

The present chapter identified and discussed four different models of caring for children who cannot continue to be cared for within their birth family. These models were adoption, foster care, permanent placement and kinship care. By reviewing these models it provided a context by which to understand the purpose and consequences of the New Zealand model of permanent placement. In addition to the structural framework of the different models, key aspects in regard to the philosophical reasoning behind each model, and the implications for the child within each of the models, was also discussed. The following chapter moves on to discuss the psychosocial and psychological implications

of permanent placement for both the children and placement parents with a particular focus on the needs of children who have come from backgrounds of adversity and maltreatment.

Chapter Three: Psychological Implications for both the Parents and Children Entering a Permanent Placement Living Arrangement

Introduction

This chapter reviews the existing literature in relation to the psychosocial implications for both the child and parents entering a permanent placement relationship. Within Western society going back to the early 1900's there has been much debate as to what constitutes functional family relationships and environmental conditions (Barker, 1999). A permanent placement arrangement is a relatively new type of family constellation and therefore it is important to understand the potential difficulties as well as the intended benefits of this kind of arrangement. The research areas reviewed include common factors featuring in environments where it has been deemed a child is in need of care and protection; how children adapt to change and how the attitudes of the new parents may influence the success or failure of the placement. The needs of both the children and the parents will also be discussed.

The role of the environment in children's development

Children who are removed from their birth family have been assessed as being in need of care and protection and therefore no longer able to reside in their family of origin. Care and protection may be considered necessary where there is neglect, emotional, psychological, physical or sexual abuse, and in some cases a combination of these, all of which impact on a child's well-being (Derrick, 2004).

Common features in the environment of children in need of care and protection:
Ideally all children would experience optimal parenting and social conditions, this is not, however, the case for many children who are exposed daily to adversity or maltreatment (Archer & Burnell, 2003; Howe, 2004).

Children identified as being in need of care and protection, which results in removal from their primary caregiver, are unlikely to have received consistent care-giving, or a stable, supportive and reliable environment (Howe & Fearnley, 2003; Rushton, et al., 2003; Schofield & Beek, 2005). Children taken into care, for whom an alternative permanent living arrangement is sought, is most commonly as a result of abuse or chronic neglect, both of which are generally symptomatic of a family system breakdown and a chronically unsatisfactory parent-child relationship (Derrick, 2004; Steinhauer, 1991). The result of this maltreatment is likely to result in feelings of abandonment and rejection and undoubtedly leave the child traumatised (James, 1994).

Adversity and maltreatment of children

Waddell and colleagues (2004) discuss the effects of adversity and maltreatment that result in a child being placed in care. The authors distinguish between adversity that is likely to require statutory involvement and adversity that can affect any family at any time. Adversity can take many forms including poor parenting, illness, disability, poverty, overcrowding or maltreatment, and typically occurs on a continuum of severity. It is further suggested the impact will depend on the duration and number of negative events, as well as the availability of a stable and supportive context in which to deal with negative events. Moreover, adversity can impact on both children and parents and is greatly influenced by the social context which parents may not be responsible for (Waddell et al., 2004). Pelton (1997) maintains that adverse social circumstances do not necessarily mean that parents cannot do a good job of raising children. This assertion is echoed by Chao & Williams (2002) who indicate that many parents dealing with poverty, for example, still provide the stability and nurturing that their children need.

Research, however, indicates that adversity which causes instability in care-giving relationships, exposure to parental inconsistency, conflict, and mental health problems, appears to be particularly harmful for children (Minty, 2000; Offord, 1989; Rutter & Quinton, 1984). Offord (1989) suggests exposure to parental inconsistency and conflict is a causal risk factor for the development of disorders such as severe antisocial

behaviour and conduct disorder in children and youth. Rutter and Quinton (1984) note that when parents have severe mental health problems, including depression, psychotic disorders, substance abuse and personality disorders, children have increased rates of emotional and behavioural disturbances. The authors posit that the underlying cause by which these problems cause harm to a child's emotional health is the inability of the parent to meet the child's basic needs for stability and nurturing (Rutter & Quinton, 1984).

Some studies differentiate between adversity and maltreatment of children, with maltreatment being defined as one of the harshest forms of adversity, incorporating abuse or neglect resulting in harm, and is often what leads to a child being referred to protection services (Howe, 2005; Waddell et al., 2004). Howe (2005) discusses psychological maltreatment, and identifies that emotional abuse, rejection and neglect are all captured by the generic term 'psychological maltreatment'. Children who are subjected to psychological maltreatment are typically seen by their parents as worthless, irritating, unwanted and inconvenient. Comparing children who have been raised in a secure environment and children who have been maltreated, Howe and Fearnley (2003) maintain that for maltreated children, their experience of care-giving relationships is that they are dangerous, frightening, hurtful, unpredictable, careless and confusing.

Discussing different forms of maltreatment, Hart, Brassard, Binggeli and Davidson (2002) describe psychological or emotional abuse as repeated patterns of behaviour that convey to the child they are unloved and unworthy of value except to meet others' needs; or as being threatened with harm. Erikson & Egeland (2002) define neglect as the failure to provide adequate physical or emotional care to the degree that there is harm to a child's emotional, social, physical or cognitive development and/or functioning. Physical abuse is identified as force inflicted on a child causing harm Kolko (1996). Howe (2005) defines sexual abuse as any sexual activity between an adult and a child, or between an older child and a younger child.

Overall literature concurs, that adversity and/or maltreatment impacts on a child's emotional well being. Children who have been subjected to abuse or neglect in early childhood more frequently exhibit problems in relationships which is likely to impact on future relationships than children who show no evidence of abuse (Cicchetti & Toth, 1995; Crittenden, 1985; 1995; 1997; Lyons-Ruth, Zoll, Connell & Grunebaum, 1989).

Certain protective factors have been linked to resiliency, or the ability to do well despite adversity. These factors include having consistent adult care-giving, good learning abilities, good social skills, easy temperament, few siblings, a sense of skill or competency, and positive beliefs about the larger world (Rutter, 2000). It is emphasised, however, that this tends to be a small proportion of children and furthermore that in order for children to do well the protective factors must outweigh the risk factors. Of the protective factors identified, consistent adult care-giving is likely to be the most crucial in terms of stability (Werner & Smith, 1992).

Reder, McClure and Jolley (2000) maintain that children's reactions and resilience to adversity may vary according to the child's developmental stage. For instance, preschool children are likely to react with anxiety and confusion, older children with guilt and shame, adolescents with anger. The authors further suggest that initial responses to adversity can progress to become clinically significant emotional and developmental disorders if the situation is prolonged.

Effects of neglect and abuse on social development: Children removed from their primary caregivers and taken into care are likely to have been subjected to maltreatment of one form or another whether it is neglect, witnessing family violence, physical, sexual or emotional abuse (Steinhauer, 1991).

The literature discussing the effects of childhood maltreatment on social development and possible outcomes appears consistent. Howe (2005) studying the effects of abuse and neglect on children, concluded that social, emotional and cognitive development is heavily compromised, asserting that this is because the child doesn't feel safe enough in

their environment to investigate and explore, but rather "most maltreated children's psychological efforts are concentrated on survival and safety" (p. 3). Howe (2005) further posits that children who experience unpredictable, inconsistent and unreliable care "find it difficult to build up and trust any cognitive model of how the self or other 'works'" (2005, p. 50) which is likely to impact on future relationships.

Glaser (2002) makes several claims about the psychological and emotional difficulties facing children who have experienced emotional abuse and neglect, asserting they are likely to feel frightened, unhappy, anxious and distressed. Furthermore, that their behaviour is likely to become increasingly oppositional and anti-social. The author further asserts that children who have experienced emotional abuse and neglect from their caregivers tend not to easily accept help, are socially withdrawn, isolated or aggressive, and that they under achieve academically.

A number of studies (Allen, 2001; Ciccheti & Toth, 2001; Crittenden, 2002; Gerhardt, 2004; Goldberg, Benoit, Blokland & Madigan, 2003; Howe, 2005; Main & Hess, 1990; Schore, 2003; Solomon & George, 1999) suggest that the majority of maltreated children have problematic relationship patterns. Sometimes they do not seek comfort or safety when upset or frightened and may show symptoms of dissociated behaviour. For children whose caregivers belittle or humiliate them, they feel fundamentally unlovable and without worth (Hartt & Waller, 2002; Young, 1994).

Gerhardt (2004) suggests maltreated children are confused because they don't know if they can trust parents who sometimes hurt or frighten them. The author invites speculation as to what this may mean for a young child completely dependent on their parental figures, and who in times of need would typically seek them out for comfort, reassurance and safety, but has learned from experience that this could be dangerous. This highlights questions to consider in relation to how a child's previous experiences of caretaking may impact on a new care-giving relationship.

Needs of children in permanent placement

The fundamental philosophy of permanent placement as already argued, is to enable children to form a 'significant psychological attachment' to a caregiver in a 'new family group' where the child can 'develop a sense of belonging in which his or her sense of continuity and personal and cultural identity are maintained' (CYPF Act 1989(s13(f)(iii)). However, all children bring with them their own histories, and the quality of the child's pre-placement care is frequently characterised by some form of maltreatment or neglect. It is within this environment that the child has learned how to cope in the world and how to view relationships, including the willingness to trust others.

Schofield (2002; 2003) suggests that promoting family membership for a child is of utmost importance. It is particularly significant for the child to gain a sense of psychosocial security within the home, which in turn translates to the world outside the family. Schofield and Beek (2005) further suggest that sensitivity and acceptance toward the child's birth family as well as the child is required. This aspect is of particular relevance to children in permanent placement care where it is expected that ongoing contact with their birth family will prevail (Derrick, 2004). However, Schofield and Beek (2005) question as to whether a child can truly feel part of their new family while still 'belonging' to their birth family and suggest the need to promote the idea of shared identity.

An ongoing longitudinal study ($n = 52$), commenced in 1997 in the United Kingdom, following children placed under the age of 12 in long-term foster care has focussed on several areas of long-term foster care, including what promotes family membership (Schofield & Beek, 2005). Data gathered for this study was generated from interviews both with the children and the caregivers. Interviews were conducted at the commencement of the placement and then again 3 years later with the intention of following the sample into adulthood. The findings of this study suggest family rituals such as those around birthdays and Christmas, as well as family photographs of the child and their new parents openly displayed appear to promote family membership, which in

turn seems to provide a sense of security, stability and belonging (Schofield & Beek, 2005).

Difficulties for children and permanent placement families: Views currently espoused in the literature seem to concur that generally children with the most disturbed histories, coming from high-risk family backgrounds of adversity and maltreatment are the ones most likely to be placed for long-term and 'permanent' foster care (Howe & Fearnley, 2003; Schofield & Beek, 2005). Furthermore, there appears to be an assumption that the parenting provided by foster carers will reverse developmental damage, enabling the child to achieve good outcomes in adult life (Schofield & Beek, 2005). However, there is growing clinical and anecdotal evidence suggesting that a significant number of adoptive and foster carers of older placed children are running into major relationship and behavioural difficulties with their children, particularly during mid-to-late childhood and adolescence (Archer, 2002).

Much of the recent research on children's psychological development in situations of adversity identifies not only how their behaviour is affected, but also how, when they are removed to safe family environments, the strategies employed to help them survive situations of abuse and neglect continue to be employed in the new care-giving environment (Howe 2005; Howe & Fearnley, 2003; Schofield & Beek, 2005; Stovall & Dozier, 1998). Studies suggest that although these strategies may have helped the child survive in very difficult environments, they may also result in the child being ill equipped to take advantage of good-quality, loving and responsive substitute care, and that many children seem unable to elicit or respond to sensitive care and protective parenting (Howe, 2005; Stovall & Dozier 1998). For example, Schofield and Beek (2005) argue that:

> children who have adapted to maltreating environments find it hard to process information about a different reality in their new home, and that paradoxically the more the parents try to offer good care the more devious they may appear to the child and the more likely they are to be treated with fear and contempt. Thus new carers are often viewed with distrust and suspicion, as people to be controlled, as a source of anxiety and deception rather than sources of security (p. 5)

A paper by Howe and Fearnley (2003) describing the characteristics and typology of attachment disorders observed in adopted and fostered children, suggests that the deficits and disturbed states of mind that attachment disordered children bring to the relationship with their new carers are likely to increase the levels of stress between them and their parents. They identify "the clinical presentation in many cases is of a child who avoids being cared for, behaving as if the adoptive parent (usually the mother) is a potential source of hostility, abuse and neglect, unable to provide care and protection" (p. 378).

Howe and Fearnley (2003) hypothesise that as a result of overwhelming feelings, the child tries to remain in control of a fragile, vulnerable self, by being bossy, angry, rageful, aggressive or seductive. Consequently, the parents are in danger of feeling helpless and angry when faced by so much aggression, confusion, need and mental fragmentation. Furthermore, that these feeling of helplessness may lead to the parents deciding to abdicate the role of caregiver, no longer willing or confident they are able to provide the care the child desperately needs.

Adjustments to change: Conclusions drawn from literature looking at how children adjust to the complex changes of transitioning into a new family are similar (Holloway, 1997a; 1997b; Howe, 2005; Howe & Fearnley, 2003; Minnis, 1999; Schofield, Beek, Sargent & Thorburn, 2000; Steinhauer, 1991; Trisoliotis, 2002). It has been suggested that adopted children and children placed in foster care remain at risk of a number of developmental impairments (Howe & Fearnley, 2003). Comparing adjustment for adopted children and children in long-term foster care, which is akin to permanent placement, Triseliotis (2002) posits that around half the children in long-term foster care display high levels of emotional and behavioural problems.

Research further suggests, that many children are inadequately prepared for transitioning into a new family and that "working with children prior to the placement should be an integral part of their placement support … *and* … should include information about their new family" (Lowe, Murch, Borkowski, Weaver, Beckford & Thomas, cited in Archer & Burnell, 2003, p. 40).

Cumulative losses: Derrick (2004) identifies that for most children an alternative permanent living arrangement is sought usually after interventions to hold the family together have failed, and that during this time the child may have been removed and reunited with birth parents several times. During the time away from their birth parents the child will have been in temporary foster care and "it is not unusual for a child to have several different foster caregivers a year and over several years this can amount to a very significant number of placements" (Derrick, 2004, p. 20). This then results in many children having multiple placements, and consequently multiple separations and multiple parental figures (Schofield & Beek, 2005). Steinhauer (1991) speculates that with each separation the child's sense of lovability, security and stability will have been further undermined. Schofield and colleagues (2000) concur with Steinhauer's (1991) assertions, suggesting that children who have had multiple placements have already had to manage the contrasting expectations of a succession of families whose family norms may differ greatly. They speculate that repeated failures are likely to undermine confidence, resulting in the child seeing themselves as incompetent, ineffective, unattractive and unsuccessful.

Additional losses for the child may include the loss of friends, siblings, familiar surrounding, school and extended family members (Neil, Beek & Schofield, 2003). In addition to overt losses, Brodzinsky (1990) highlights covert losses including loss of status, loss of genealogical continuity, and loss of continuity in the sense of self. It is further suggested that such losses can affect the sense of security in the relationship with the new parents and presents challenges to the care-giving on a day to day basis (Neil, et al., 2003).

Discontinuity of identity: It has been noted by Howe and colleagues (1999) that even though a child's early environment may not have been ideal, once a child has formed an attachment with a birth parent or subsequent parental substitutes, separation is likely to be experienced as distressing and anxiety provoking.

Schofield (2002) brings to attention the loss of identity for a child who is removed from their birth family and what this may mean to the child, suggesting "the birth family may have been dysfunctional but at least it was a real family like other peoples and therefore socially legitimate" (p. 266). The author cites Goffman who talks about a "'spoilt identity', which can reduce a 'whole and usual person' to a 'tainted, discounted one'" (Goffman 1964, cited in Schofield, 2002, p. 266). Schofield further highlights, that children are likely to be faced with questions about their identity that may cause some difficulties for them (for example why their surname name is different from their parents, or why their 'real parents' do not look after them). The author poses the question of what it might mean for a child when the truth cannot be shared (Schofield, 2002).

Self esteem / self efficacy: Schofield and Beek (2005) maintain that children whose lives have been pervaded by loss and inadequate care-giving are left feeling unloved and unlovable. This is particularly so if care shown by previous caregivers has been sporadic and unpredictable and if the environment has led to life having been frightening at times. The authors further contend that young children have a tendency to "see themselves as magically responsible for events, resulting in some children experiencing themselves as bad, dangerous and only worthy of punishment" (2005, p. 15). These findings correspond with early studies conducted by Steinhauer (1991) who suggested that as a result of family chaos, conflict and inconsistency, children form a negative initial picture and see themselves as unlovable and deserving of rejection. He further maintained their self image is likely to be confused, reflecting the inconsistency of their parents. The author concurs with the concept of magical thinking, suggesting young children are likely to believe their 'badness' caused their rejection and removal from the family, which reinforces the child's image of him/herself as unwanted and unlovable and consequently will undermine the child's confidence (Steinhauer, 1991).

Schofield and Beek (2005) suggest self esteem is more likely to develop when parents find ways to highlight the child's progress and convey their confidence in the child and the child's abilities. They suggest self-efficacy is promoted when the child develops age appropriate levels of autonomy. The authors further posit that as children begin to

experience their ideas and wishes as being valued they begin to develop a range of skills which increases the child's "sense of mastery and efficacy" (p. 18).

Forming new relationships: As identified, a crucial aspect in the statutory policy for permanent placement is to enable the child to form 'a significant psychological attachment' to a caregiver (CYPF Act 1989 (s13(f)(iii)). Studies discussing the 'hoped for' outcomes for children moving into a foster care arrangement seem to concur that it is anticipated the child will form secure attachment relationships with their new parents, (Derrick, 2004; Lanyado, 2003; Waddell et al., 2004).

It is suggested that while this may be possible for the small group of children who have experienced stable, 'good-enough' care and who are placed in early infancy, it is more complicated for children placed at older ages (i.e., beyond six months), especially if such children have experienced poor or disrupted care (Howe, 1998; Minty, 1999; Sellick & Thoburn, 1996; Triseliotis, Shireman & Hundlebury, 1997). It is further suggested that the task of forming new relationships is much harder for children who are likely to have developed defensive behavioural strategies that were adaptive in the birth family but now potentially create barriers in their new families (Howe & Fearnley, 1999; Schofield et al., 2000).

Schofield and Beek (2005) identify that the important challenge for foster parents is in providing the opportunity for a child to form new attachment patterns. However, they expose a significant discrepancy between process and theory by identifying that attachment theory and subsequent research on attachment theory has tended to focus on parenting in relation to attachment in infancy, whereas the majority of children forming new attachments in permanent placement families are likely to be in middle-childhood (Schofield et al. 2000; Triseltiotis, 2002).

A major challenge for foster parents is to provide a secure environment for children in middle childhood, who have predominantly come from backgrounds of psychosocial adversity, and may have experienced cumulative separation and loss, often through

multiple placements, leaving them wary, distrustful and controlling when they enter a new placement (Schofield & Beek, 2005). However, there is little research or guidance from literature in relation to how caregivers might be expected to do this (Schofield & Beek, 2005).

A longitudinal study undertaken by Steel, Hodges, Hillman and Henderson (2003) suggests that to achieve the outcome of 'felt' security for the child moving into a new family situation much will depend on the understanding, patience and tolerance of the parents, and in particular the new mother's capacity to reflect on the child's experience. They posit "the link between the parents' minds in particular and the child's mind will be influential in adoption and foster care" (cited in Schofield & Beek 2005, p. 6).

Steinhauer (1991) bring to attention a potential difficulty for children as they start to form a secure relationship with their new caregivers. The author suggests this may prove to be a real struggle for the child having to come to grips with having two sets of parents. Moreover, this may be particularly difficult if the child begins to love and build up trust with their new parents who may be very different from the child's biological parents who the child continues to have contact with via access visits. Steinhauer (1991) further suggests that if the child begins to prefer the foster parents they may experience guilt and sense of betrayal of the natural parents.

Considerations for permanent placement parents

It is generally agreed that children most likely to be placed for permanency are those with the most disturbed histories and with complex needs. A recent review suggests, perhaps ironically, that parents accepted to become permanent placement parents tend to be ordinary families in the community with very variable levels of skill and support (Schofield & Beek, 2005).

Overall, literature identifies parenting as primary to childhood development, with the majority of studies presenting parenting as important for facilitating children's health and

social development (Gerhardt, 2004; Howe & Fearnley, 2003; Schofield & Beek, 2005). However, there appears to be little research in relation to assessing skill level and personal capacity for caring for a traumatised child. In particular, whether potential carers have an adequate understanding of child development, and perhaps more importantly, the possible consequences of developmental disruptions, including the effects of maltreatment and the significance of loss and grief on a child's psychological and emotional development (Schofield & Beek, 2005).

Stovall and Dozier (1998) assert that not only are children affected by their environment, but reciprocally the social environment is affected by children and their needs and behaviours. This places great demands on new carers and consequently placements run a high risk of getting into major difficulties. Howe (2005) maintains that maltreated children are likely to make great emotional demands on parents, resulting in the parents feeling as if they are losing their bearings in the relationship as the child's mood and behaviour switches from need, rage, depression and indifference. Schofield and Beek (2005) posit it is likely to require great patience and tolerance to fully accept the child who is displaying provocative behaviour inviting negative responses or when praise and affection is rejected or misinterpreted. The authors further suggest a lot of skill is required to deal with these behaviours, while at the same time, to help children to understand that they are accepted and valued for who they are, for better or worse.

Triseliotis and colleagues (1997) suggest a child's psychological needs in relation to attachment, loss and identity are highlighted as 'additional tasks' to be negotiated that do not concern children brought up by their birth families. Furthermore, each of these tasks places particular demands on adoptive and foster parents, whose parenting role in meeting the child's needs is far more complex than that of birth parents and who will always be aware that these children have a genealogical and psychological connection with their birth family (Neil, Beek & Schofield, 1997).

This then may pose several questions for new parents. For example will they be able to cope when faced with this level of inconsistency of emotional regulation and testing

behaviour which may undermine their parenting skills; will they be able to provide what is needed psychologically for the child they have taken into their family; what level of understanding is required for parents embarking on this undertaking; and what do parents need in the way of support to help them meet the needs of their child.

Needs of parents: Lowe and colleagues (1999) assert that just as there is sometimes inadequate preparation for children moving into a permanent living arrangement, the same can be said for parents. Briggs (2003) maintains this should include an exploration of what the placement might mean for the child, further suggesting that potential caregivers may gain a fuller, more human picture of the child by having access to some additional background information contained in the case files which may not necessarily come across in edited reports. The author posits this may assist potential parents to strengthen their commitment to the child or alternatively decide they do not wish to proceed with the placement.

Howe and Fearnley (2003) assert that many parents, without support and expert help, find themselves caught up in the child's distorted rationale of how relationships work, suggesting "the placement either staggers on unhappily or breaks down" (p. 378).

It is suggested that social work plays an important part in the well-being of children in care and that it is the social worker who has the possibility of taking an overarching and ecological view of the child's progress through foster care (Howe et al., 1999). Schofield (2002) discussing a psychosocial model of long-term foster care concurs with this assertion, concluding that active social work is required in a number of different areas, primarily with the child, the carers, and the birth family but also with other agencies that play a part in the well-being of the child. This may pose questions in terms of the New Zealand model of permanent placement and the current legislation that once parents take additional guardianship of the child the statutory agency withdraws this level of support.

Expanding on the importance of social work involvement, Briggs (2003) brings to attention the value of a systemic approach, suggesting that while children need to be put

at the centre of the permanence process, that "parents, professionals and all other agencies need to work together as part of a team which validates the contribution and expertise of each" (p. 41).

Parents' motivation: There is a scarcity of literature in relation to the motivation of parents offering long-term foster care and permanent placement. A recent review cites findings from a 1991 survey published in 1993 by the National Survey of Current and Former Foster Parents Association (NSC & FFPA) for the US Department of Health and Human Services (DHHS) (Rhodes, Cox, Orme & Oakly, 2006). The quantitative study (n =1313) used data provided by a sample of then "current" ($n = 1048$) and "former" ($n = 265$) foster families. The authors of the survey developed a list of 28 stated reasons for becoming a foster parent.

The results showed that parents had multiple reasons for being foster parents. Most cited they wanted to provide a child with love and a good home. Two thirds indicated they wanted to provide a home for a child who would otherwise be in an institution and because they wanted to help children with special problems. Over half the parents believed fostering was a way of doing something for the community and approximately a quarter identified their main motives as being unable to have children, wanting to adopt, wanting to have a larger family or wanting to parent after their children had grown. See Table 2.

Table 2

Reasons for Fostering and Percent Endorsement (n = 108,592): Adapted from Rhodes, Cox, Orme & Coakley, (2006).

Reason for fostering	%
Wanted to provide a child with love	89.9
Wanted to provide a good home for a child	89.4
Wanted to provide a home for children who would otherwise be in an institution	62.3
Wanted to help a child with special problems	58.9
Wanted to do something for the community/ society	52.4
Wanted to be loved by a child	39.6
Wanted a larger family	29.9
Thought about adopting and thought foster parenting was a good way to start	26.1
Could not have any, or any more, children of my own	25.0
My own children were grown and I wanted children in the house	23.3
Wanted companionship for my own child	14.8
Wanted to care for a child but did not want permanent responsibility	14.5
Wanted to adopt but couldn't get a child	12.5
Wanted a certain kind of child (e.g., a girl or a five-year old)	12.3
Wanted companionship for myself	11.5
Wanted to fill time	11.3
Religious beliefs	11.2
Knew the foster child of the child's family and wanted to help	11.1
Was abused or neglected myself	6.9
Wanted to increase family income	6.6
Did not want to care for an infant	5.7
Was single and wanted a child	5.0
Had a child who died	4.2
Am related to child	2.1
Was a foster child myself	1.9
Thought a child might help my marriage	0.8
Wanted a child to help with chores or work in family business	0.6

Note. The percentage of missing data ranged from 4.3 to 6.7%. Families endorsed a mean of 6.6 (SD = 2.8) and a median of 7 reasons for fostering. Reasons for fostering were approximately normally distributed.

Other studies have yielded fairly consistent descriptions about reasons for fostering (Andersson, 2001; Baum, Crase & Crase, 2001; Kirton, 2001). A qualitative study conducted in Sweden, with a sample of 21 foster families caring for 10-11 year old children, identified four different reasons or motives for taking care of foster children (Andersson, 2001). These reasons occurred with equal frequency within the sample, and were listed as; relatives who feel responsible for a certain child; couples who want children and have not been able to have children of their own; families where the mother wants to be at home taking care of biological children as well as foster children; parents with grown-up children who want to fill the 'empty nest' by becoming foster parents.

These statistics provide some insight into parents' motives for providing foster care. While it has to be is acknowledge that foster care is somewhat different to permanent placement, some of the reasons may be transferable and relevant to the motives of parents' entering into permanent placement living arrangement.

Summary

It would appear that much of the current literature gives weight to the negative impact on a child's psychosocial development caused by adverse conditions, particularly those that incorporate some form of maltreatment. The present chapter identified and discussed the possible implications for children growing up in these conditions and how that may impact on their psychosocial development, and in particular how they view themselves and themselves in relation to others. The question was then discussed as to what children, who have lived in an environment of adversity or maltreatment, are likely to need to help them to adjust to a new benign environment. A further complication was identified as to the consequences for children who have experienced multiple care placements and consequently multiple caregivers, and how this impacts on the expectation that the child will be able to form an attachment to their new caregivers. The needs of the placement parents was considered, identifying that if the placement parents are not well supported the placement runs the risk of breaking down.

Chapter Four: Theoretical Framework

Introduction

The following chapter discusses the theoretical underpinnings of the present study, which explores the transition into a new family of children who have been traumatised in infancy or early childhood by abuse or neglect. The research calls on a child developmental framework, incorporating social, cognitive, psychological and emotional development. Theory will be used to understand the effects on child development, including the child's capacity to form healthy social relationships. The available research is interpreted largely within a developmental-psychoanalytic framework. The focus of this review will be the importance of family relationships for the child's development and the possible impact of disruptions and separations on a child.

Social matrix

More than half a century ago child psychoanalyst Erik Erikson presented a theoretical framework, in which he introduced the concept of a *social matrix* (Erikson, 1950). This framework suggests individuals develop in relationship to their caretakers within their particular family and in the context of that family's historical-cultural heritage. As such, due to the idiosyncratic experiences of each individual and family system, the everyday experiences encountered by an individual will have a specific meaning for that person. Erikson maintained that all stages of human development were influenced by the environment and that it was from the quality of care-giving that the infant learns to trust or mistrust that the environment will provide an adequate level of care for them. Erikson stressed the importance of predictable patterns of interaction with tolerable levels of frustration for optimal psychosocial development (Maier, 1988).

Following this, several theorists and many researchers, have relied on an ecological model as a foundation to assess child development. Healthy development has been described as a complex process involving social, cognitive, emotional, biological and

spiritual domains (Bronfenbrenner, 1979; Collins, Muccoby, Steinberg, Hetherington & Bornstein, 2000; Zeannah, Boris & Lurrieu, 1997).

The role of attachment theory

In more recent years, research on child development has been influenced by attachment theory and the importance of a selective primary attachment relationship. Child psychiatrist and psychoanalyst John Bowlby is frequently referred to in the literature regarding attachment theory (Brisch, 2000; Fonagy, 2001; Gerhardt, 2004; Karen, 1994). The concept of attachment was first proposed by Bowlby in an effort to link ethology, with evolutionary, psychoanalytic and cognitive developmental theories (Bowlby, 1969). His work was inspired by early studies conducted by Spitz (1945) showing that children raised in institutional settings often failed to thrive. From Bowlby's own work at the London Child Guidance Clinic (1936 – 1939) with children who were regarded as delinquent, he became interested in the underlying reasons for the delinquent behaviour. The features commonly identified in the children's behaviour were their affectionless nature, their lack of remorse, and their propensity to steal, furthermore that the thefts were often pointless (Karen, 1994). From his findings, Bowlby suggested this behaviour resulted from early separation, particularly between the ages of six months to four years between the child and their mother. The term *maternal deprivation* was coined to explain this concept. Bowlby postulated that this separation resulted in antisocial behaviour by the child (Bowlby, 1969). He further suggested the antisocial behaviour was 'unreachable depression' and that "behind the mask of indifference, is bottomless misery and behind the apparent callousness, despair" (Karen, 1994, p. 54).

Bowlby's subsequent research suggested that early human attachments were the result of a biologically based desire for proximity and contact between infants and adults, and that these were essential for healthy social development. He defined attachment as the intensive affective tie that develops between young children and their primary caregivers and that once formed the attachment persists even in the absence of the primary caregiver. Bowlby used the term *secure base* to describe the function of the attachment

bond between the child and caregiver. That the caregiver is viewed as providing a secure base from which the child can explore their environment and return to when feeling unsure. Then once the child gained sufficient reassurance, they are able to resume exploring their environment (Bowlby, 1969).

A number of studies appear to support the contention that positive early selective attachments are necessary for children's emotional development, concluding that for optimal development children need the provision of a predictable environment and reliable parenting (Ainsworth, 1974; Bretherton, 1987; Holmes, 1993; Fraiberg, 1980; Grossman & Grossman, 1991; Main, Kaplan and Cassidy, 1985; Rutter, Kreppner & O'Connor, 2001; Sroufe, 1979). Furthermore, research suggests that the availability of consistent, sensitive and nurturing parenting from a primary caregiver, particularly in the pre-school years, is crucial for children to establish secure attachments (Hildyard & Wolfe, 2002).

Of importance to the present study are the findings from research in relation to the suggested optimal time-frame in which a child develops attachment relationships, and moreover what may be the result of a disruption to that process. It is proposed there are critical phases in the development of attachment, such that, by ages six to twelve months infants develop selective attachments to key caregivers (Bowlby, 1969). Subsequent studies seem to concur with this assertion. Overall, studies appear to agree that the origins of the child's self-concept are laid in the first two years of life and that the child internalizes a sense of themselves that reflects how they think they are perceived by their primary attachment figures (Bretherton & Munholland, 1999; Crittenden, 1995; Cairns 2002; Srouf &Waters, 1977).

The term '*internal working model*' coined by Bowlby (1969) is consistently referred to in literature to describe the internal representation of the self and the self in relation to others that is developed during the early period of a child's life. From a very early age a child lays down representations of the self and their primary attachment figures, and it is suggested this reflects the child's view of, and confidence in, the attachment figures'

capacity to provide a safe and caring environment (Archer & Burnell, 2003). It is further proposed that it is these models, and early experiences, that will organise the child's thoughts, memories and feelings regarding attachment figures and "act as guides and predictors of future behaviour for the child and analogous attachment figures, such as adoptive parents" (Archer & Burnell, 2003, p. 65).

Although the work of Bowlby is widely referred to, there are several studies that question aspects of his findings. A major critique is that the children in his study were from deprived backgrounds and therefore it has been argued his findings could not be generalised to all children (Chodorow, 1978; Oakley, 1981). A further aspect that has drawn much critique is Bowlby's exclusive focus on the mother-child relationship to the exclusion of the role of the father (Chodorow, 1978; Leupnitz, 1988; Mead, 1962; Mitscherlich, 1963; Parsons, 1964). Looking from an anthropological model, Mead (1962) postulated that traditionally child care was shared by a stable group, and while maternal care is important, it is not an exclusive part of this. Leupnitz (1978 cited in Homes, 1993) objected that Bowlby was using biology to justify what is essentially a cultural product of a 'patriarchal but father-absent' society. Chodorow (1978) also discusses the impact of absent or abusive fathers, maintaining this results in unsupported mothers, and further suggests it is the lack of a strong father identification figure that is more likely to result in antisocial behaviour and disparagement of women.

Later studies focussing on Bowlby's original work have offered an update to his earlier findings. Rutter (1979) identified that in Bowlby's original study, only a quarter of the children had been subjected to major separations in infancy from their mother and suggested instead the antisocial behaviour observed by Bowlby was not linked so much to maternal absence as to family discord. Furthermore, the author noted that children who lose their mother from death have a near normal delinquency rate, whereas the rate is much higher in children where there has been active discord between parents and lack of affection (Rutter, 1972; 1979).

Tizard (1977) however, asserts that results of her follow-up of children raised in institutional care show, as the maternal deprivation hypothesis predicted, that as infants these children had shown excessive clinging and diffuse attachment behaviour. By eight years old they were attention seeking, restless, disobedient and unpopular. The author further concurs with Bowlby's suggestion that the period of six months to four years may be critical in terms of forming stable relationships, asserting that children adopted after the age of four remained antisocial in their behaviour (Marvin, Cooper, Hoffman & Powell, 2002; Tizzard, 1977).

More recent studies also appear to support Bowlby's theory of attachment and use the founding principles as a basis for further inquiry. Focussing on disorders of attachment and the treatment of the disorder, Brisch (2002) suggests that as a result of empirical studies, attachment theory is "one of the most solid founded theories of human development that has contributed to the understanding of human development throughout the life cycle" (p.14). Using attachment theory to understand the impact of early maltreatment of children, particularly by their caregivers, Howe (2005) postulates that Bowlby provided a radically different way of thinking about children's development.

Overall, it would appear studies seem to confirm that continuity in relationships is necessary for children, suggesting that disruptions should be minimised, particularly in the first few years of life. The above ideas on child development provide a context for comparison in identifying risks to development. In addition, this information is useful for understanding how the early histories of the children in this study may influence the transition into a new care-giving situation.

General risks for development

Separation and the impact of separation: One of the concepts central to Bowlby's theory of attachment was the impact of separations between an infant and their primary caregiver. Bowlby suggested that the greatest intensity of initial separation is likely to occur when separation takes place between six months and four years (Bowlby, 1973;

Bretherton, 1985; Quinton & Rutter, 1976; Spitz, 1950). The reasoning conveyed is that during these years, due to the developmental stage of cognitive and emotional development, children are particularly vulnerable to separation (Bretherton, 1985; Quinton & Rutter, 1976; Spitz, 1950). Children's cognitive development at this stage is insufficient to allow them to understand the reasons for separation, or allow them to express easily the distress generated by the disruption of their primary attachment relationship (Bowlby, 1982). In addition, this is a time children are intensely dependent, both physically and emotionally, on their primary caretaker (Karen, 1994).

Of importance to the present study is how separations between a child and his/her primary caregiver may affect subsequent emotional development and influence their capacity to form new attachment relationships. Looking at the impact of long-term foster care on children, Steinhauer (1991) pays much attention to disruptions to the primary attachment relationship and how this may impact on the ability of children to adapt to new situations. Drawing on the work of others (Bowlby, 1973; Goldstein, Freud & Solnit, 1973; Stayton & Ainsworth, 1982) Steinhauer attempts to understand how this may influence the new care-giving relationship for both the child and new parents as they begin the process of establishing a new family. The author posits that children separated from their attachment figures, to who they are selectively bonded, miss their parents and mourn for them. He further asserts that the more distressed the parent-child relationship and attachment bond is "the more intensely the child is likely to resist the separation and the harder it will be for that child to mourn successfully" (Steinhauer, 1991, p. 27).

The concept of mourning may be relevant to the experience of children entering permanent placement. Steinhauer (1991) asserts that "to mourn successfully the mourner must accept the fact that someone to whom he or she was attached is gone and must make a corresponding change in his or her inner [psychological] world" (p. 27). Furthermore, this change is achieved by allowing the gradual withdrawal of interest, caring, and feelings invested in the child's memory and mental image of the lost attachment figure. Discussing children taken into care, Steinhauer considers that unlike the permanent loss of a parent through death or adoption, for children taken into care, including permanent

placement, the primary attachment figure is not permanently 'lost', instead the situation is more ambiguous and as such may hinder this process (Steinhauer, 1991).

The term '*detachment*' is referred to as the work of mourning. The purpose of this process is the giving up of the lost person. It is further suggested the process of detachment "must be completed before the child can accept the finality of the loss and be freed to transfer those feelings to a parent substitute" (Steinhauer, 1991, p. 27). Bowlby (1973) introduced the concept of *gradual detachment* which he identified as the periodic experiencing of grief, and conceptualised this as a normal response to loss which includes emotions such as anger, pining, sadness and preoccupation with memories and fantasies of the lost person.

One of the questions in regard to children transitioning into a new permanent family may be whether they have had the opportunity to grieve and mourn the lost relationships with their previous caregivers, including temporary foster carers whom they had begun to rely on. Of further relevance to the present study is that prior to being permanently placed, the children are likely to have had multiple separations from their primary and substitute caregivers during this period, and consequently have experienced multiple losses that they may not have been able to mourn. This may result in the children not being able to easily transfer to their new permanent care-givers.

Implications of insecure attachment: Attachment theory provides a framework for understanding deficits and risk factors in early childhood development. In particular, the quality of the relationship between a child and their primary caregiver is viewed as a particularly significant risk factor. The literature indicates that children who experience insecure or poor attachment to a primary care-giving figure have greater difficulties in interpersonal relationships in later childhood. Furthermore, the quality of a child's attachment relationship has been identified as an indicator for healthy emotional and psychological development, and a predictor for social development (Ainsworth, 1984; Bowlby, 1963; 1988; Karen, 1994; Sroufe, Edgeland & Kreutzer, 1990).

A much referred to benchmark for categorising secure and insecure attachment in children is an assessment tool known as the "Strange Situation" which was devised by Mary Ainsworth in 1963 (Karen, 1994). Ainsworth, a colleague of Bowlby, first conducted this assessment with children and their mothers at the psychology department of John Hopkins Universtity, Baltimore (Karen, 1994). Ainsworth's aim was to test Bowlby's 'secure base' theory by observing how 12 month old infants related to their mothers, firstly in a benign environment, and then in situations likely to provoke uncertainty in the infant (Karen, 1994). From the responses of the infants she categorised secure and insecure attachment patterns of behaviour. Table three presents the patterns of attachment initially identified and characterised by Ainsworth.

Table 3

Attachment styles proposed by Ainsworth, adapted from Karen (1994).

Attachment Style	Characteristics
Secure	Children openly exhibit distress when left by their mother. They will look for her and may start to cry, but are able to seek comfort from their mother when reunited with her and can be easily consoled. They become calm and are able to resume play.
Avoidant	Children react to the separation from their mother with little upset or protest. In the mother's absence they continue to play, although they may follow her with their eyes as she leaves the room. On return the child instigates no physical contact.
Ambivalent	Children demonstrate great distress on separation and cry intensely. On their mother's return they are not easily consoled, remaining upset and clingy, taking far longer to achieve emotional equilibrium and return to play. When picked up by their mothers they express desire for physical closeness while at the same time behaving aggressively toward their mother by kicking, biting or turning away.

Subsequent to Ainsworth's conclusions, a fourth pattern was later identified by Main and Solomon (1990), which was categorised as *disorganised attachment*. Children classified as having disorganised attachment demonstrated unusual patterns of contradictory behaviour around their caregiver, such as running towards their mother and then stopping abruptly, turning around and running away from her. At other times they would appear to freeze and seem to have lost their continuity of sequence in their behaviour (Brisch, 2002).

Aside from the brief overview provided here, offering a basic understanding and comparison of secure and insecure attachment behaviour in young children, a full review of the Strange Situation (i.e., how it is conducted and assessed), and a discussion of its implications for permanent placement is outside the scope of the present thesis. For a more detailed review that reader is referred to Holmes (1993), and Karen (1994).

From these early studies, subsequent research has refined the classifications of insecure attachment patterns of behaviour, which it is suggested are not in themselves regarded as pathological, but rather the child's attempt to behave in adaptive ways in response to their caregiver's attachment style (Main & Weston, 1981). Attachment patterns regarded as concerning and likely to result in a child or parent-child dyad being referred for therapeutic intervention have been re-categorised by clinicians such as Crittenden (1995), Fraiberg (1982), Lieberman and Pawl (1988), Zeanah, Mammen and Leiberman (1993). These authors suggest that severely maladaptive attachment patterns result from early abuse or neglect (cited in Brisch, 2000, p. 59-60). For a comprehensive review of attachment disorders the reader is directed to Brisch (2000).

A number of longitudinal studies have been conducted to assess the correlation between early attachment patterns and subsequent social development, see Egeland & Sroufe, 1974; Grossmann and Grossman, 1991; Zimmermann, Spangler, Schieche and Becker-Stoll, 1995 (cited in Brisch 2000, p 36). Edgeland and Sroufe (1997), discussing the results of their 'Minnesota Studies' assert that infants assessed as securely attached in infancy were characterised at pre-school age as being more socially able, and by six years

of age demonstrated congruent emotional affect. Children categorised as insecurely attached in infancy were found to be less socially able in preschool and did not demonstrate congruence of affect at age six years. Similar findings were echoed by Grossman and Grossman (1995) and Zimmermann et al. (1995).

The temperament of the child: As compelling as the arguments suggesting attachment bonds formed in early development are a predictor for emotional and social development (Bowlby, 1988; Edgeland & Sroufe, 1974) there are also compelling arguments put forward offering differing viewpoints. Several authors (e.g., Chess & Thomas, 1987; Kagan, 1984; Levy, 1943; Thomas, Chess & Birch, 1968; van den Boom, 1988) argue that Bowlby and Ainsworth have ignored the role of innate temperament (Crain, 2000).

Developmental psychologist Jerome Kagan posed the question whether "a mother's love for her infant is necessary for the child's future mental health" (Karen, 1994, p. 249). The author further questioned the concept that early life experiences form any lasting psychological structures such as Bowlby's internal working model, further suggesting the terms "secure" and "insecure" attachment are misnomers, asserting instead that what is actually being measured are aspects of the child's behaviour that reflect its inborn temperament. With regard to inadequate or rejecting environments, Kagan questions the long-term impact of this to a child's emotional health, suggesting it "lasted only as long as the child remained in that environment … *[and that]*… environmental influences come and go, but heredity lasts" (Karen, 1994, p. 254).

Child psychiatrist, Stella Chess, also questioned the level of importance given to the quality of a child's early caretaking experience. Her interest stems from her work with disturbed children, and from what she felt was an assumption commonly held amongst mental health workers, that if a child had a problem it was likely to be caused by the mother (Chess, 1987). Kagan, Chess and Thomas (1987) propose a stress-diathesis model emphasising a child's temperament and genetic predisposition as being more central to their psychological and social development, including how they are able to adapt to new situations, rather than the importance given to the early mother-infant relationship. Chess

and colleagues maintain that not all children are equally vulnerable to stress, and that infants' responses to stress are increased by temperamental traits (Thomas, Chess & Birch, 1968).

Discussing the potential causes of attachment disorders, Brisch (2000) appears to take into account both the attachment model and ecological model. He posits "the socio-emotional development of attachment quality is only one aspect, albeit an important one, of the entire developmental spectrum of the parent-child relationship" (p. 39). This author further notes that important life events such as divorce, relocation, illness, or death of a parent in the first year of life may be capable of transforming a secure quality of attachment into an insecure one (Brisch, 2000).

Psychophysiology of trauma and neglect

In an attempt to assess the affects of adversity and maltreatment on development, there has been a great deal of interest in recent years on neurophysiology and brain development (Karr-Morse & Wiley, 1997; Lauder, 1988; Perry, 1993; 1994; 2000; Schore, 2001). Perry (2000) whose interest lies in the effects of trauma on the developing brain, suggests the brain of the developing infant is shaped and structured by the quality of the interactions between the infant and the environment far more than previously thought. In discussing the work of Perry, Cairns (2002) suggests "that children whose environment is hostile or lacking in nurture, end up thinking with a different brain" (p. 46).

Four key periods, or growing points, in the building of the brain have been identified (Perry, 2000). It is suggested that throughout gestation and up to eight months after birth, the brainstem undergoes a critical period of formation. It is thought that injuries and developmental deficiencies at this stage are permanent and irreversible. During the first and second years of life the midbrain is developing and the infant is learning to develop muscle control and to relate to other people. From years one to four the limbic system forms. This part of the brain will allow for the regulation of complex emotional states, the

development of social language and the interpretation of social information. Perry further maintains that during this time empathy is developed and attachment relationships are formed. During years two to six the cerebral cortex develops, the functioning of this part of the brain determines many of the attributes which will define the growing personality, creativity, abstract reasoning, humour and verbal competence (Perry, 2002).

As identified throughout chapter three of this thesis the majority of children entering a permanent placement living arrangement will have been subjected to some form of adversity or maltreatment during these critical periods of brain development. If the assertions made by Perry (2002) are to be accepted it would suggest these children are unprepared emotionally and psychologically for adjusting easily to a new situation with different expectations and social rules.

Links between brain development and attachment: Research has linked brain development to the quality of attachment a child has with their primary care-giving figure (Fonagy, Gergely, Jurist & Target, 2002; Schore, 1994, 1996). Focussing on affect regulation and brain development in relation to attachment relationships, studies have investigated how the young mind forms in the context of close care-giving relationships. Investigations have included infants who have experienced severe stress and trauma and the potential impact of this (Howe & Freanley, 2003). Links have been identified between severe attachment failures, the neurobiology of trauma, the neuropsychology of disorganised attachments associated with abuse and neglect, the impairments in early development of stress coping systems of the brain, and psychopathology (Schore, 2001). It has been postulated that it is the quality and character of the caregiver's mental and emotional attunement to the infant that effects the child's neurological and psychosocial development (Schore, 2001). Furthermore, Shore proposes that how a young mind forms in a highly stressful care-giving relationship can explain much of the symptomatology in maltreated children (2001).

In discussing the impact of a child's attachment relationship on brain development and subsequent psychosocial skill acquisition, Cairns (2002) suggests, children with unmet

attachment needs are "constantly in survival mode, and [they] have little interest in others except as possible resources to be used" (p. 65). The author maintains this is likely to result in the child's inability to trust and may lead to an inability to distinguish between people, or discern the degree of trustworthiness of others. Cairns further postulates that children with unmet attachment needs have a poor understanding of emotions which reduces their capacity for empathy. Furthermore, they do not find it easy to engage with others, or with their environment, they are not emotionally expressive and frequently are experienced by others as unusual, appearing to work with a different set of social inhibitions from their peers (Cairns, 2002). It is further proposed there is a qualitative difference between the brains of securely and insecurely attached children, such that insecurely attached children are unlikely to have the rich and varied language of their peers and as a consequence will probably be unable to express their inner states through language (Cairns, 2002). In addition, non-verbal communication is ignored or misunderstood by these children and they are chronically subject to excessive anxiety and excessive shame. These deficits "effectively preclude the curiosity, playfulness, imagination and joy [with] which securely attached children approach life" (Cairns, 2002, p. 65).

Psychoanalytic theory

The theoretical structures introduced thus far have focussed on the role of the facilitating environment and the child's social, cognitive, emotional and psycho-physiological development. The general body of psychoanalytic theory offers some further understanding of how individuals manage uncertainty and anxiety. This aspect is integral to the current study as it provides a context for understanding the psychological impact of permanent placement and associated anxieties for both the parents and children.

Several different schools of thought come under the overarching term psychoanalysis (Fonagy, 2001; Gabbard, 2004; St.Clair, 2000). Discussion and comparison of these schools is outside the scope of this study, instead the focus will be on the basic concepts

of psychoanalysis and the relevance of psychoanalytic understanding to the experience of the participants in this research.

Psychoanalysis has always investigated the ways in which an individual's history colours present behaviours and relationships, and traditionally studied relational issues such as a child's relationship with its parents (St. Clair, 2000). St. Clair notes that all psychoanalytic theories are concerned with explaining how the past influences the present, and how the inner world of the patient distorts and influences the external experience. Furthermore, all psychoanalytic theorists are interested in the person's inner world, and explore the world of relationships past and present and how the early and past relationships influence present psychic and social functioning (St. Clair, 2000).

Making links and points of contact between psychoanalysis and attachment theory, Fonagy (2001) points out that "modern attachment theory and modern psychoanalysis have as their fundamental epistemic aim the description of the internal mechanisms responsible for the discrepancy between actual and psychic reality" (p. 159). Fonagy further identifies that both psychoanalysts and attachment theorists privilege the first years of life of importance to the relationship between social development and personality development, and that "psychoanalysis shares the assumption of attachment theory that the infant-caregiver relationship is not based on physical need but rather an independent need for a relationship" (2001, p. 162).

While traditional psychoanalytic thinking as presented by Sigmund Freud focussed much of its attention on the unconscious, in particular instinctual biological drives, libidinal gratification, repression of drives and psychological processes in relation to these unconscious structures (Gabbard, 2004; Ursano, Sonnenberg & Lazar, 2004), later theorists, building on Freud's ideas, have sought to understand how the individual deals with, and manages these structures (Crain, 2000; Fonagy, 2001; McWilliams, 1994). Psychoanalytic theory subscribes to the premise that unconscious dynamics are a product of attempts to avoid, or master anxiety (Hollway & Jefferson, 2000). It is suggested this is achieved by the use of various psychological mechanisms, and the term 'defence' is

most frequently used to explain the process employed by the individual to deal with emerging anxiety, and operate at a largely unconscious level (McWilliams, 1994). In simple terms, the function of psychological defences can be described as preserving a sense of self-esteem in the face of narcissistic vulnerability, or to ensure a sense of safety when feeling threatened (Gabbard, 2004). It is further suggested that once unconscious anxieties are brought to consciousness they are able to be managed and resolved. (Gabbard, 2004).

McWilliams (1994) notes, however, that psychological defence mechanisms have many benign features and begin as healthy, creative adaptations and continue to work adaptively throughout life. Or are strategies for dealing with stress. It is suggested that individuals have preferred defences that become integral to styles of coping, and furthermore that this preferential and reliance on a particular defence or set of defences is the result of a complex interaction among at least four factors (McWilliams, 1994). These factors are identified as constitutional temperament; the nature of stresses suffered in early childhood; the defence modelled, and sometimes deliberately taught, by parents and other significant figures; and the experienced consequences of using particular defences (McWilliams, 1994, p. 97).

For a comprehensive list and discussion of psychological defence mechanisms the reader is directed to the work of McWilliams (1994).

Summary

The present chapter has identified a number of theoretical frameworks that will be used in the context of the present study to inform and analyse the experience of children and parents entering a permanent placement living arrangement. Namely, Ecological models, Attachment theory, Neuro-developmental and Psychoanalytic models.

Firstly, an Ecological model has been used, which focuses on the social matrix that a child develops within the context of its environment. This was selected, based on the

underlying assumption that it is the environment that will provide a foundation for the child's social development.

Secondly, Attachment theory provides a model to understand the impact of a child's earliest primary relationships and how the child forms an internal working model of them self and themselves in relation to others. Using attachment theory the impact of separations is taken into account, taking note that those occurring between the child and their primary caregiver during their formative developmental years may result in insecure attachment and/or maladaptive behaviour.

Research linking brain development, the quality of care-taking and the response to trauma and neglect in a child's formative years is the third framework used to inform this study. This model provides a context for understanding the potential psychological and emotional outcomes for children who have been subjected to maltreatment by people who they relied on for their basic care.

Finally, psychoanalysis provides a framework to interpret the psychological and emotional experience of the participants, taking into account their unconscious, or unspoken, thoughts and how this may impact on their capacity to manage the experience they are embarking on.

These models have been drawn upon to aid in understanding the link between a child's early developmental history, their subsequent social and cognitive development and their capacity to adapt to a new living arrangement. They have also provided a context to identify what new parents, many of whom have little experiences caring for children with disturbed histories, may be faced with as they enter into permanent placement.

Chapter Five: Methodology

Introduction

The following chapter introduces and discusses the methodological approach adopted within the present study. In the first instance, the chapter opens by presenting the aims of the study, following which the rationale, underpinning the decision to use collective case study methodology is discussed. Finally, the analytic approach employed with regard to the analysis of the material is described, and important ethical factors pertinent to the study are considered.

The aims of the research

The primary research goal underpinning the present study was to capture the experience of children and parents as they entered into a permanent placement relationship. In order to develop a deeper understanding of the impact of permanent placement on each participant, the experience was considered within a broader social context, and took account of each of the participants' histories and other contextual factors. Ideas drawn from psychoanalytic theory were subsequently used to extend insight and explore the meaning of these experiences for each participant.

Specifically, the present study examined several inter-related aims, which operate at different levels:

1. To provide a detailed contextual analysis of the experience of children and parents entering a permanent placement family arrangement.
2. To use the findings from the analysis of the case study data to reflect on theoretical ideas that inform the practice of caring for these children. The needs of the parents were also examined from a psychological perspective, in order to consider what may be necessary to support them as they embark on this process.

In addition to these overarching research questions, the present study also sought to address several subsidiary questions. These included exploration of:

- How children and parents can best be supported in this process?
- What is the likelihood of a secure attachment relationship being formed between the child and new parents?
- Is the preparation for both the child and prospective parents adequate as they embark on this experience?
- What ongoing support is needed by the parents in terms of caring for a child who has already experienced abandonment from their natural parent and possibly additional attachment figures?

In pursuing these aims, the research focused on three case studies involving children and permanent placement parents transitioning into a living arrangement together. It was anticipated that the focus of this discussion would centre on the experience of each of the participants within the context of their unique circumstances.

From the analysis of the participants' experiences, it was also anticipated that areas for further exploration would be identified. In particular, this research was open to identifying ideas by the participants that may lead to beneficial changes for future participants, including the statutory agency, which could be considered helpful to the practice of permanent placement.

Finding an appropriate methodology

The decision to employ a particular methodology is critical to the overall milieu of a study as the methodology adopted provides a framework through which information is gathered, aggregated and analysed (Hollway & Jefferson, 2000). For instance, in the present study, survey research could have been helpful in determining measurable factors, such as the average length a couple had been waiting before they were accepted as suitable permanent placement parents, or how many placements children are likely to

have had before a 'permanent' home had been sought. While this information would have provided some insight into the lived experience of the participants, it would not have offered the deeper understanding of the particular psychological aspects of the experience which may influence the future relationship between the child and new parents.

The present research is intended to supplement the largely quantitative body of research available in this area (e.g., Triselotis, 2000). Unlike much existing research, the present study sought to use a qualitative case study design, which focused on the specific meaning of the experiences for a particular child and their permanent placement parents. In order to gather and interpret the rich data provided by the participants, it was vital from the outset that the methodological paradigm chosen complimented the complex framework, outlined above, whilst remaining true to my own experience of working therapeutically with children and families, as well as my theoretical understanding.

Qualitative methodologies: Qualitative research is commonly utilised to gather detailed data, generally from small numbers of people (Saratakos 1998; Veal, 1997). There are a variety of approaches that may be considered by the qualitative researcher, with the research question largely responsible for shaping the approach selected (Engel & Schutt, 2005). However, the researcher's preferences and experiences also exert a significant influence on the methodology chosen. As such, it is acknowledged that my background as a psychoanalytic child and adolescent psychotherapist, with over ten years experience working with children and families who have come together through permanent placement, has influenced the methodology of choice, as case study most closely resembles the clinical approach utilized in my own practice.

Case Study: Case study methodology can be understood as being an in-depth exploration of one particular case (situation or subject), via interaction or observation, for the purpose of gaining depth of understanding about that particular participant within the specific context in which they were investigated (Yin, 1989). Case study methodology has been used extensively in social science research but has frequently been considered an inferior and weak methodology, which lacks sufficient precision, objectivity and rigour

(Sarantakos, 1998). However, case studies are increasingly used as a research method for purposes of exploration when attempting to gain information in situations that are complex. However, such methodology does not claim to have generalisability due to the small sample sizes often utilised, nor does it attempt to quantify results (Sarantakos, 1998; Yin, 1994).

The aim of case study methodology in qualitative research is to provide an open and flexible research approach to a social phenomenon, in a way in which the participants are integral to the interpretation of the phenomena observed. Referring to case study as a methodology, Depoy and Gitlin (1998) maintain that this approach is helpful when little is known about a phenomenon. Such an approach is also useful to explicate in-depth understandings of a phenomenon; to examine change over time, in one or more individuals; or to examine theory. Permanent placement is a relatively new form of family constellation and therefore little is known about this phenomenon. Furthermore, in contemplating the research design of the present study, it was anticipated this study would be conducted over a three month period, to allow for examination of change over a period of time.

Yin (1989) maintains that a case study is a form of inquiry that "investigates a contemporary phenomenon within its real life context" (p. 13). He further suggests that case study "allows the researcher to show the significance of history and [to] retain a sense of the real person or people who are being spoken about" (Yin, 1989, p. 13). As the focus of the present study was the lived experience of each child and each parent within the context of their life history as they enter the phenomenon known as permanent placement, this form of inquiry was considered to lend itself to a study of this type. Furthermore, it has been suggested that case study is particularly suited to situations in which it is impossible to separate the phenomenon from their context (Yin, 1994). In the present study, it was anticipated that each of the individual children and parents would bring their own set of variables with them into the experience. Therefore it was the assumption of the present author that it would be impossible to separate the participant's histories and other variables from the phenomena of permanent placement.

A particular strength of case study methodology is that it offers a means of investigating complex social situations, which consist of multiple variables of potential importance in the understanding of a phenomenon (Merriam, 1998). The advantage of a case study is its ability to show links between individual parts of the experience and the phenomena as a whole (Stake, 1994). For research that is anchored in real life situations, case study provides a rich and holistic account of a phenomenon, offering insight and illumination of meaning to the reader. Furthermore, insights gained from the case study play an important role in advancing a field's knowledge base, by providing a platform for future research (Merriam, 1998). Within the present study, the focus has been on examining the meaning of the individual experience for each participant and exploring how this experience has influenced and has been influenced by the overall experience of permanent placement. As such, it is the experience of the participants in this study, rather than the facts related to the phenomenon of permanent placement that will provide understanding and inform policy and practice. Due to the focus being on the experience of the individual participant, it was anticipated that several other areas were likely to be identified during data collection that would warrant further investigation.

Collective case studies: Given the limitations and critiques surrounding the use of case study as a qualitative research design (i.e., limited generalisability, poor external validity, and seen as lacking in precision, objectivity and rigour) the present study sought a more robust informative methodological approach. A methodology that expands on the positive aspects identified for the case study framework is that of collective case study. The primary difference between singular and collective case study is that collective case study aims to seek some balance between the specificity of each example and the desirable ability to draw general reflections about a phenomena from a number of different cases (Stake, 2000). Furthermore, consistency or commonalities of themes obtained by multiple informants may give insight into the shared experiences of the participants as a whole (Stake, 2000). In discussing collective case study, Sandelowski (1996) suggests this approach is especially useful for showing how the same set of factors can interact differently, or have varying consequences in different cases. That is, it is postulated that variables that are particular to an individual can in fact produce common outcomes. This

thinking concurs with earlier research (e.g., Stouffer, 1941) which postulated that case researchers seek out both what is common and what is particular about a case. However, it has also been suggested that ultimately the end result regularly presents something unique.

Collective case study has been given preference over singular case study when the researcher aims to either strengthen or test the ability to generalise the findings of a single case study to other cases (Depoy & Gitlin, 1998). Therefore, multiple cases are postulated to enhance external validity or generalisability of findings (Miles & Huberman, 1994). While the ability to generalise the results of the present study to other individuals entering a permanent placement relationship was not an overt aim of the current research; through developing a depth of understanding of the experience of the participants, in conjunction with the application of theory, the importance of identifying common themes, or indeed absence of common themes, may prove valuable to informing social work practice and current policy.

While it appears that overall a collective case study approach would lend itself well to the current research, the limitations of case study as a methodology first need to be considered. Merriam (1998) suggests the special features of case study research that provide the rationale for its selection also present certain limitations in its usage. In particular, although rich description and analysis of a phenomenon may be desired, a researcher may not have the time or money to devote to such an undertaking. Merriam (1998) further suggests "the study may be too lengthy and detailed for policy makers to read and use" (p. 41). An additional limitation of case study is that the case study may oversimplify or exaggerate a situation, leading the reader to reach erroneous conclusions about the phenomenon being discussed (Guba & Lincoln, 1981).

It has been suggested that qualitative case studies may also be limited by the sensitivity and integrity of the investigator who is the primary instrument of data collection and analysis (Merriam, 1989). However, it is acknowledged that the role of the qualitative researcher also has advantages when the research being conducted is by a researcher with

particular knowledge of the subject matter (Merriam, 1989). My training in child and adolescent psychoanalytic psychotherapy, in addition to many years of clinical experience working with traumatised children, and with children and families who have gone through the experience of permanent placement, provides me with particular knowledge of the subject matter of this research. However, it is acknowledged that this prior contact with, and intimate knowledge of, the subject matter may have led me to develop several biases and priori assumptions prior to embarking on the present study. In particular, these reflect my observations that in general, children entering permanent placement care, are emotionally scarred, and the prospective parents may be somewhat naive in their expectations of how the placement will work out.

Further concerns have been raised about case evaluation, suggesting there are no clear guidelines to inform how the final report is to be constructed. As such the investigator is left to rely on his or her own instincts and abilities throughout the research effort in regard to the form this report takes (Merriam, 1989). Guba and Lincoln (1981) suggest "an unethical case writer could so select from among available data that virtually anything he wished could be illustrated" (p. 378). This highlights the importance for authors of case study research to be aware of their own biases and the potential impact these can have on the final product. Hammel (1993), in discussing researcher bias, maintains that case study has been faulted for both its lack of representation and lack of rigour in the collection, construction and analysis of the data. Moreover this lack of rigour is further linked to the problem of bias, which may be introduced by the subjectivity of the researcher. The question of bias, along with reflexivity, ethical consideration and limitations in relation to issues of reliability, validity and generalisability are discussed in greater detail later in this chapter.

Despite the potential limitations of case study, the strength of *collective* case study lies in its ability to provide a framework to examine the same phenomenon across a small sample of cases and enable the findings to be compared for commonalities and differences. Therefore, the present research draws upon collective case study as its guiding model for data collection and analysis.

The analytic framework

While the overarching framework of collective case study was selected to provide a substantative base from which to conduct the present study, according to Stake (2000) case study cannot in itself be considered a methodology. As such collective case study relies on a particular underlying approach to provide it with substance. While some case studies are purely descriptive, many are a combination of description and interpretation (Merriam, 1998). Interpretive approaches seek to understand the meaning people attach to their life experiences, rather than look for facts to substantiate claims (Stake, 2000). Merriam (1998) suggests analytical case studies are differentiated from more straightforward, descriptive case studies by their complexity, depth and theoretical orientation. Merriam concurs with this, noting that "interpretive case studies contain rich, thick description" (1998, p. 38). This methodology allows for depth of interpretation and, in the context of the present study, provides a useful framework within which psychoanalytic theory can be illustrated and developed (Rustin, 1997). It was anticipated that an interpretive approach, using a psychoanalytic theoretical framework would allow for an increased level of depth of interpretation that lends itself to a study of this type.

Interpretive framework: The process of interpretation requires a framework through which people's experiences can be understood. The interpretive framework utilised within the present study was provided by psychoanalysis. From a psychoanalytic perspective it is recognised that experiences, memories and accounts are filtered through the subjective experience of the person (McWilliams, 1994). Furthermore, it is suggested that the process of filtering an experience need not be treated as an impediment to understanding of the facts of a person's life, but rather can be viewed as access points for encountering the meaning within it (Gibson, 2003).

Discussing psychoanalytic interpretation, Frosh, Phoenix and Pattman (2003) suggest that the emphasis on interpretation may need to be extended to recognise that the meanings people produce are not simply arbitrary textual productions, but are emotionally

instigated structures of meaning that govern how they live their lives and therefore give insight to their subjective experience.

Hollway and Jefferson (2000) argue that the research subject's inner world is not simply a reflection of the outer world, and furthermore that:

> their inner world cannot be understood without knowledge of their experiences in the world, and whose experiences of the world cannot be understood without knowledge of the way in which their inner worlds allow them to experience the outer world (p. 4)

From a psychoanalytic perspective, the relationship between the researcher and the participants must carry not only an awareness of the researcher's position and theory, but also an awareness of unconscious emotional dynamics between them (Hollway & Jefferson, 2000). These experiences, which are often regarded as impediments to the logical work of research, in this framework become essential sources of insight into the meaning of the experience (Frosh et al., 2003). It has further been noted that within the research process the subjectivity in both the participants and the researcher is a fundamental part of the research process (Frosh et al., 2003).

With regard to analysis and interpretation of data, Hollway and Jefferson (2000), posit:

> psychoanalysts have a model of knowledge which places primary knowledge on their own involvement in understanding a patient *[and]* as researchers, therefore we cannot be detached but must examine our subjective involvement because it will help to shape the way in which we interpret the interview data (p. 33).

This then highlights the critical importance of self-reflection, which is crucial to the researcher's abilities to locate the meaning and assumptions they bring to the research. The object of self-scrutiny is not simply to recognise the researcher's involvement in the process but to learn from it (Frosh et al., 2003).

Methods

The methods used in this research have incorporated a combination of approaches. Primarily, in-depth, semi structured interviews with both the parents and children were

used (see Appendix G & H). In addition, the children were interviewed in a setting that provided an opportunity for non-directive engagement with creative mediums such as art and play. All the children engaged in one or more of these mediums during each interview.

Sampling strategy: Purposive sampling was used to select the participants, all of whom were recruited through the Permanent Placement Unit (PPU) branch of Child Youth and Family Service (CYFS). Social workers made the initial approach to families they deemed suitable for the present study and who met the criteria. Their role was primarily to enquire whether the potential participant would be willing to be involved in the study. An information sheet was provided to the participants introducing them to the purpose of the study (see Appendix C, D, & E). This described the purpose of the research and illustrated the structure of the interview process.

Selection criteria included recruiting participants for whom permanent placement outside of the extended family had been sought, who were 'first time' permanent placement parents, with children aged between eight years and twelve years at the time of recruitment.

The rationale for seeking participants who were not members of extended family was based on the observation that there has been a paucity of New Zealand based research regarding non-kinship family groups in the literature, whereas several studies have been undertaken in New Zealand with regard to kinship foster care (Worrall, 1996; 1999; 2005). Finally, the parents approached for selection in the present study were first time permanent placement parents as it was anticipated that 'first-time' permanent placement parents would be particularly vulnerable to experiencing difficulties in adjustment.

The rationale for the age range of child participants was that children over the age of eight years would be more able to provide reliable verbal responses and discussion. The upper limit of twelve years was decided on due to my assumption that permanent placement after this age would be rare. Moreover, it was also considered that children

after this age would be in a different phase of development, that is, individuation from parents, and identity development (Blos, 1979; Erikson, 1985). The age parameter for the child participants was decided upon prior to gaining information from CYFS that identified the age parameters used to guide statutory policy for permanent placement of children outside of the extended family is between birth to nine years. However, this age band fell within that which had been initially proposed for inclusion in this study and did not present significant difficulties with respect to the completion of the study.

A small sample of three case studies (*n* = 3) was sought for inclusion in the present study. While there may potentially have been several advantages to utilising a lager sample (i.e., greater ability to generalise the findings of the study and an increased sensitivity to observing findings that may not be reported when a small sample is employed), it was considered a sample of three would likely provide sufficient data to identify emergent themes (Stake, 2000) particularly given the time and resource constraints of a Master's thesis. Primarily, it was anticipated that each case study would allow for a deep understanding of each participant's subjective experience within the context of permanent placement. Furthermore, by gathering data from three individual case studies, it was anticipated this would allow for the examination and identification of commonalities and differences across a varied section of participant experience.

Setting: Interviews with the parents were conducted in their homes, whereas the interviews with the children were conducted at the Auckland University of Technology Child Psychotherapy Clinic. This clinic provided a playroom environment designed to put children at ease and accommodate free expression. The use of a setting such as this was considered important for the present study, because as noted by several authors on the topic of conducting research with children, whenever a child is interviewed it is important that it should be as informal and unofficial as possible (e.g., Gollop, 2000). Given the nature of the research, the child's home may have restricted their willingness to be open and honest in their responses, whereas a neutral setting allowed for an informal interview process.

Data collection

Demographic data: Background information regarding each participant was gathered from case notes held by the PPU. This information provided a rudimentary social history of each participant, as well as the number of placements each child had experienced prior to permanency being sought, and each parent's motivation for embarking on the experience. By obtaining this background information, the data was able to be placed into an historical and situational context, from which similarities and differences between each participant group could be identified and therefore assist with triangulation of data.

Interviews: Three interviews were conducted with each child, and with each set of prospective parents. The interviews with the children and parents took place separately. The initial interview took place prior to the child's transition into the family, the second interview took place approximately one month after the transition and the third interview took place between three and five and a half months after the transition. The information was gathered using semi-structured interviews. The tone of each interview was conversational, and while several questions were prearranged, in general the interviews followed the direction of what emerged during the interview.

In addition to responding verbally during the interview, the children were free to engage in creative mediums, such as drawing, painting, clay-work or free play. This was not a requirement of the interview process, but rather a free choice made by each child. This contributed to putting the children at ease, as well as increasing their means of self-expression. It is widely accepted that children are frequently more able to express their ideas in a non-verbal form (Axline, 1955; Erikson, 1950; Winnicott, 1971)

Interviews with the parents were audio taped, whilst the interviews with the children were both audio and video taped. The interviews were transcribed by my self, and the child's non-verbal material was used alongside the taped interview for analysis. Brief notes made directly after each interview, recording any incongruence of words, behaviour and affect, were also employed to help inform the analysis of the data. In addition, consistent with

psychoanalytic theory, the interviewer's own response to the interview processes, in conjunction with the raw data gathered was taken into account and became an integral part of data analysis.

Data analysis

As noted by Stake (2000), there are important decisions to be made about what aspects of a particular case are chosen to study. Initially, it was anticipated that I would meet with the children and prospective parents separately and discuss with them their thoughts about moving into a permanent placement living arrangement. It was further proposed that I would then meet with each participant one month after the transition had occurred to determine whether or not their expectations had been realised and what difficulties, if any, had arisen and how this was being managed. However, this broad parameter felt unwieldy and lacked focus for comparative analysis. I then called on my experience of working therapeutically with permanent placement families and the complexities of past and current life experiences they bring with them. This has frequently been accompanied by the 'thwarted' hope, particularly held by the parents, for the relationship and the escalated frustrations and anxieties in relation to their current relational experiences. Using this experience it then seemed important to investigate whether common themes occurred across the case studies, and to observe whether or not similar themes occurred across the sample groups that reflected my clinical experience.

Understanding the case material: In order to familiarise myself with the data, the preliminary analysis of each interview occurred directly after the interview. This provided the opportunity to become familiar with each participant and to identify any ambiguities within the narratives, or aspects that needed further attention or clarification that could be addressed during subsequent interviews. Each interview was listened to in its entirety a minimum of two times before it was transcribed. With the data obtained from each child the videotaped interview was watched in it's entirety with notes made in relation to the themes of their play, their body language, their dialogue and the tone of their narrative. The audiotape was used when necessary if the dialogue on the video was

unclear. This process enabled me to reflect on the experience of the participants and the nature of their narrative, as well as reflect on my own experience of being with the participants. This process encouraged and deepened reflection on the material, allowing for the possibility of new questions and ideas to emerge.

After the final interviews were complete, I returned once more to the beginning and was immersed once again in the data. In order to encourage a continual process of self-reflection and commentary in relation to this study, each interview was read and re-read, or viewed and re-viewed several times to establish themes that might inform the structure of each case study. In addition, psychoanalytic theory was combined with my therapeutic knowledge and clinical experience to begin to assist with the identification of the themes that were emerging.

Developing themes: Although each of the case studies appeared very different in presentation, common themes began to emerge across the different interviews and participant groups. This suggested it might be possible to structure the material into three categories. Specifically, it was identified that themes emerged around the concepts of hopes, anxieties and coping strategies of the participants, as well as in regard to how aspects of these changed over a period of time. This structure provided for sufficient openness to allow for the different experiences of the participants to emerge and also allowed for some degree of comparative discussion to occur across the case studies. Significantly, this structure also fitted with the general categories of literature reviewed in this study.

Structuring analysis: In structuring the analysis of the present study, I drew upon the theoretical framework of psychoanalytic theory (see Chapter Four). According to psychoanalysis, anxiety is an unpleasant feeling in response to something within the environment or within oneself, and in order to manage these unpleasant feelings psychological defences are employed to protect the self from threatening thoughts (St. Clair, 2000). In the course of the interview process the participants' conveyed their

anxieties about how the experience may be in reality and then went on to offer both their hopes and some understanding as to how they coped with their anxieties.

Steps in developing the analytic framework

Step one – getting a feel of the material: The process of analysis began by reading and viewing the interview material in order to get a sense of what each participant was saying directly and indirectly about their experience. Particular note was taken of the emotional tone of each interview, and in the case of the children the themes in their play. I also reflected on my own responses to the material and reaction to being with the participants.

Step two – exploring possibilities for meaning in the interview material: The second step of analysis was guided by the theoretical framework of psychoanalysis. In keeping with the theoretical model central to this study I looked at the 'parts' of the experience in order to determine how then they influence the 'whole' (Stake, 1994). Taking into account three interrelated processes; a) the participants' emotional experience as it was presented, b) knowledge of the histories of each of the participants, c) the movement in the expectations held by the participants taking note of commonalities within their narratives, I then systematically drew out material from the focal interviews that appeared to correspond to any of these areas and began to explore the possible meanings under different categories.

Step three – theoretical structuring: Step three involved structuring the ideas identified in step two into a more formal analysis, which linked each of the different ideas into a coherent and logical whole. In essence, it was assumed that there was a link between the emotional experiences of the parents and the children, and that this would help to define the expectations and disappointments within the process of permanent placement. At each level, hopes and anxieties were identified, as were coping strategies that enabled the participants to manage their anxieties.

Step four – exploring my interpretations: Throughout the gathering of data the transcribed interviews were discussed with my thesis supervisor, as were my attempts to understand the data and draw out the commonalities and differences.

Additionally, it is important to note the content of each interview was referred to in subsequent interviews with the participants, in such a way that I would frequently recall something that had been said during the previous interview. This provided the opportunity for further exploration of that particular aspect of the participants' experiences, thereby gaining further insight into the experience.

Step five – comparing the author's interpretations with the participants' experiences: The final stage of analysis consisted of presenting the ideas that emerged from the analysis to the parent participants. This process allowed for clarification of the data and proposed themes, and provided an opportunity to evaluate how my analysis 'fitted' with the parent's own experience. In consultation with my thesis supervisor it was decided not to present the interpreted analysis to the children at this stage. Drawing on my clinical experience and theoretical knowledge, it was felt that interpretation of their experience may evoke feelings of anxiety (Gershuny & Thayer, 1999). It had already been indicated to the children that I would meet with each child following the completion of the present thesis ("my book") to let them know what I said about their experience and how I intended to use the information to help other children.

Interpretation of data

It is important to acknowledge the complexities of transcribing the data while remaining faithful to the participants' experience. As indicated in step one, the emotional tone used by the participants, in addition to their body language, was taken into account during analysis. In the case of the children the themes of their play were also carefully considered. However, as Merrian (1989) points out, it is the researcher who selects what aspects of the data to use. While this is accepted, in order to condense the content of eighteen interviews, decisions had to be made about what to include and what to exclude.

Ultimately data was selected for analysis, but in doing so this selection process was guided by a genuine and open desire to understand the experiences of the participants, and was achieved by following the steps identified above. Therefore, it is proposed that the data presented has remained as faithful to the participants' experiences as possible.

An interpretive approach, using a psychoanalytic lens was used to guide data analysis. Psychoanalytic theory is commonly used to understand children undergoing difficult circumstances (Fonagy, 2001). As identified, my assumption at the commencement of this research was that it would be the emotional and psychological experiences of both the parents and children that would warrant further investigation. Therefore while the verbal interviews remained the focal point of analysis, attention was also paid to other aspects of communication. In particular the choice of words used by the participants and the congruence of the words, facial and body expressions. In the case of children, their play and art work was also taken into account in the analysis of data[7].

Analysis of the taped interviews took into account the thematic content of the narratives as well as the emotional tone of the participants. The interview process was conducted in three distinct phases with analysis occurring after each set of interviews. Common thoughts, statements and themes were noted to identify shared meaning, including the level of warmth, responsiveness and sensitivity exhibited by parents based on their descriptions of the child in their care and accounts of management of difficulties with the child.

Reviewing data after each interview enabled themes and specific issues to be incorporated into the subsequent interview. Throughout the data analysis I reflected on my own subjective experience both within the process and toward the raw data. In particular I reflected on my responses to the data gathered from the children, which was particularly moving.

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[7] N.B. Child psychotherapists have a particular training that incorporates the understanding of, and ability to interpret the symbolism of a child's play (Carek, 1993)

Although each of the case studies had its own story to tell and each one was extremely rich in content, a thematic framework was decided upon in order to identify similarities and differences within and across the cases. In relation to the primary motivation for this study, that is, to obtain a deeper understanding of the emotional and psychological experience of each participant, by taking account of the common aspects that emerged from the data, the focal point was the hopes, anxieties and coping strategies of each of the participants.

Ensuring rigour in the research

Reflexivity: Qualitative data analysts display sensitivity towards how a social situation or process is interpreted (Altheide & Johnson, 1994). In addition, reflective qualitative research ensures that aspects of social reality are reflected and contemplated critically by the researcher (Sarantakos, 1998). A reflective research process is required when researching complex systems to ensure that insights from meanings that emerge are understood within the context of the phenomena being researched. In qualitative research, meanings are considered to be a reflection of, and are understood in terms of, the social context in which they were developed (Sarantakos, 1998).

A reflexive stance was maintained throughout the process of data collection and data analysis in an attempt to maintain ongoing awareness of the changing research context.

Reflexivity involves the researcher immersing him/herself in the research (Brown, 2002). However, as Brown (2002) points out, often important information gathered in the research process is ignored when it comes into conflict with an already held hypothesis. Therefore reflexivity requires the researcher to closely monitor and reflect on findings and acknowledge the subjective nature of the research.

Hollway and Jefferson, (2000) suggest qualitative researchers cannot be detached from the research process, but rather must examine their subjective involvement, as this will help shape the way in which the interview data is interpreted. They further note,

"psychoanalysts have a model of knowledge which places primary knowledge on their own involvement in understanding the patient" (Hollway & Jefferson, 2000, p. 32). In relation to using a psychoanalytic lens to interpret data, it has been proposed that there needs to be an emphasis on reflexivity, incorporating the subjectivity of the interviewer including unconscious, conflictual forces rather than simply conscious ones (Hollway & Jefferson, 2000). It is suggested that my own clinical experience would provide a perspective that is integral to the understanding of children and their caregivers. Such an understanding was anticipated to inform an understanding of both the narrative and observed material and incorporates an individual intuitive experience.

Gadamer (1906/1982; cited in Smythe, 1998) places emphasis on the need to be open to what is the other. The underlying philosophy of this emphasis is two-fold, firstly to bring the researcher's attention to his/her need to be aware of their own bias and secondly so that new insights can emerge. As identified, within the chosen methodology of collective case study there is the potential for researcher's bias to unhelpfully influence data collection and analysis (Guba & Lincoln, 1981). While it is acknowledged the researcher's own understandings cannot completely be set aside, by being aware of their own bias or prejudice, the researcher can monitor their interpretation of the data (Geanellos, 1998). By being open to self reflection, and reporting assumptions held prior to conducting the research, this can help others determine whether, or how, the researchers' perspectives have influenced their conclusions (Engel & Schutt, 2005). It was my assumption that prior to the permanent placement arrangement being formalised, both the children and the prospective parents woul`d have hopes and fantasies that this arrangement would be a positive experience for all of them. However, it was also reasonable to assume they may have harboured anxieties regarding how the arrangement would be in reality.

A further assumption held by this researcher was that by facing their own anxieties, and hearing the child's anxieties, the parents may develop a better understanding of the child's experience. In turn, this may help to inform them as to how they may best facilitate the child's integration into the family. In line with this view, psychoanalytic

theory suggests that once unconscious anxieties are brought to consciousness they are able to be managed and resolved (Gabbard, 2004).

Rigour: Rigour is essential in qualitative research in order for the findings to be believable, credible and meaningful. Within any research design provision must be made to ensure rigour, or trustworthiness (Lincoln & Guba, 1985)

Guba and Lincoln (1989, cited in Nolan & Behi, 1995) propose four 'parallel' criteria for ensuring trustworthiness of qualitative data. Whilst the criteria are not universally agreed to or adopted by qualitative researchers they do provide a useful framework when looking at the rigour of the present research. The criteria, of credibility, transferability, dependability and confirmability will be discussed in relation to this study.

Credibility: The process of ensuring credibility relies on triangulation of data including respondent validation. Trochim (2002) advocates that participants are the only ones who can judge credibility. Participant validation in this study was sought by checking back with the participants. Prior to drawing conclusions, a final interview was held with the parents to discuss the findings of the research and how the interviews were interpreted. Participants were able to discuss the findings and confirm the validity of analysis. In order to ensure credibility of the data gathered from the children, checking back was undertaken during the interview process. Previous data was referred to in subsequent interviews which provided the opportunity for clarification.

Transferability: Transferability refers to the degree to which the findings can be generalised to other contexts and settings. A concern with case study methodology is in the generalisability of the findings. There is a limit to the extent to which external validity can be attained by a case study. However, the limited external validity of a case study is in part overcome by its ability to generalise findings to theory (Depoy & Gitlin, 1998). Theory is used extensively as a foundation to guide the findings of such research. In addition, as suggested by Trochim (2002) "the qualitative researcher can enhance transferability by doing a thorough job of describing the research context and the

assumptions that were central to the research" (p. 1). Qualitative research holds that there is no 'universal truth' and that the research and findings are shaped in part by the influence and presence of the researcher (Parker, 1999). Outlining my assumptions and clearly defining my position, contributes to the transferability of this research. Every attempt has been made to ensure transferability in this study by the provision of sufficient descriptive information.

Dependability: The concept of dependability emphasises the need for the researcher to account for the extent to which the data is dependable. Maxwell (2002) uses the term 'descriptive validity' to refer to the accurate reporting of what the researcher has heard and seen, as well as issues of omission. Furthermore, reliance purely on a textual transcript cannot feature aspects of the participant's tone and non-verbal communication which can be important to the interpretation of the participant's perspective.

In the present study, all interviews were audio taped and in the case of the children, their interviews were also video-taped. This provided a reliable and dependable source of data, which included emotive speech, and therefore ensured that misinterpretation of relevant dialogue was minimised. Tapes were listened to and viewed several times before and during the transcription of data.

Confirmability: Confirmability refers to the degree to which the data can be confirmed or corroborated by others and the extent to which the findings are 'real'. In this study confirmability has been demonstrated by the process of checking back with the participants. Sarantakos (1998) refers to communicative validation in which additional questioning of the respondents occurs. The semi structured nature of the interview process used in this research provided a flexible framework allowing for the instigation of additional questions to encourage expansion or to clarify statements or issues raised (see Appendices C and D). During each subsequent interview, reference was made to aspects of the data previously gathered. In addition, there was a final interview prior to the write up of the Conclusions Chapter to discuss the analysis of data and possible

conclusions drawn from the data. Through taped interviews and written documentation a clear audit has been left that gives transparency to the research process.

Limitation of the methodology

Whilst it was hoped the rich data would provide insight into the emotional and psychological experience for both the children and prospective parents forming a new permanent placement family constellation, it is acknowledged there are a number of limitations to the research.

Timeframe: The present studies focus on the transition period of the child moving into the family which has only provided a snapshot of the experience. This may be viewed in different ways with regard to limitations. In some situations this could be regarded as the 'honeymoon phase' when things are new, exciting and as yet 'a little unreal', with the mundane aspects of family life yet to be encountered. Conversely, the initially settling in period may alternatively be viewed as being fraught with difficulties, and in a sense what might appear to be problematic may merely be due to the necessary adjustments required by each member of the family. An alternative timeframe of one year may have provided a more accurate long-term picture with regard to both of the positions mentioned.

Sample size: As with any small sample, the research findings are limited. While it was stressed that generalisability of the findings of the present study was not the aim of this research, it is important to reiterate that the findings of this research provide insight into the experience of a small group of people, each of whom came with their own complex histories. However, reflecting on arguments surrounding generalisation, Denzin and Lincoln (2000) support the notion that to "study the particular is to study the general" (p. 370). Through the use of collective case study, it was anticipated that this approach would allow to some extent for a level of generalisability, but it will not necessarily identify obvious gaps that may require attention, or the overall benefits that might be encountered by permanent placement families.

Ethnicity: The predominate ethnicity of the participants in this study was of European New Zealanders, apart from one participant group of mixed ethnicity, with the child being of different ethnicity from the parents. Gathering the sample from Auckland, New Zealand, where there is a large ethnic mix and in particular a large Maori population it was anticipated that Maori would be represented in the sample. However, while one Maori family constellation was identified, the participants declined to embark on the study. The absence of Maori participants in the present study may be due to a number of factors. In particular, it is recognised that Kinship Care may be the preferred method of out of home care for Maori families (Worrall, 2005), or alternatively, this lack of representation may simply be due to the time restraints of the study, in which no Maori participants were able to be identified during the data collection phase. It is perhaps also important to add that within my own clinical practice, different ethnic groups are frequently represented as consumers of clinical services, which suggests permanent placement of children is not restricted to European New Zealanders.

Ethical considerations

The participants in this research were particularly vulnerable in several ways. The prospective parents may have felt under scrutiny and may have been concerned that the findings could influence the decision to accept them as parents for the child being placed in their care. It was vital that the parents who participated in the study were absolutely clear that the researcher was not attached to CYFS, or had any involvement in the statutory processes. It was emphasised that the decision to accept them as permanent placement parents would not be jeopardised in any way by their involvement, or decision not to be involved in the research. It was further emphasised that they could withdraw from the process at any time with no one other than the researcher being informed about their decision to withdraw.

The children may also have felt anxious that the researcher had some influence in the process of them being placed with the family they had come to know. From my clinical experience, I am aware that children are very sensitive to feeling that they could say or do

something that may cause 'something bad' to happen, or cause things to go wrong, and therefore are likely to be guarded in their responses. As with the adults, each of the child participants needed to be informed that the researcher was not involved in any decision making process with regard to what happened to them. This was conveyed in language they could understand, emphasising that whatever they said was confidential and that in the write up of the study they would not be identified in any way. They were also informed, both by their social worker and by the researcher during the initial meeting, that they were not required to answer any questions if they did not wish to do so. This was reiterated at the beginning of each subsequent interview. Each child was also informed that they could withdraw from the study at any time if they wished to. However, I am very aware it is difficult for any child to say "no" to an adult, and for a vulnerable child this is compounded. Therefore a procedure was put in place to ensure the child could withdraw with minimal anxiety or embarrassment. Each child was informed they could get someone other than themselves to relay to the researcher their wish to withdraw from the study. They were also given suggestions as to who they could talk to about this. In addition, each child's willingness to continue was re-established prior to each interview. No coercion was used, nor was any reward offered to the child to participate.

As with the parents and children, the statutory agency involved may also have felt vulnerable, or under scrutiny, during the assessment process. In particular, they may have been concerned that the findings may have shown them in a bad light. To ameliorate this, a meeting with the staff to discuss the research proposal was undertaken. A further meeting to discuss the findings of the research has also been agreed to.

Children's consent to participation: Issues related to research involving children raise several ethical questions regarding informed consent, privacy and confidentiality. The Auckland University of Technology Ethics Committee (AUTEC) guidelines regarding child participation in research are rigorous and have been closely adhered to by the

present study. Due to the age of the children, [8]assent was obtained in a manner that is consistent with ensuring the well-being of the child and discussed with them in understandable language. Consent was also sought from CYFS, who at the time of interview held guardianship of the children. Prior to the subsequent interviews with each child, the new permanent placement parents discussed with the child whether or not they remained willing to continue to participate with the research (see Appendix F).

Confidentiality and use of disguise: To ensure confidentiality for all participants, pseudonyms have been used and every attempt has been made to exclude any identifying data throughout each of the case studies. In accordance with AUTEC all data was stored in locked filing cabinets on the premises of Auckland University of Technology (AUT).

Ethical consideration with regards the Treaty of Waitangi were included as part of the ethics approval. While Maori participants were not specifically sought for this study, neither were they excluded. As described above, the lack of Maori participants could perhaps be considered a limitation of the current research.

Given the nature of this study, which could have elicited memories and emotions that were unmanageable for either the child or parents, provision for therapeutic intervention, or contact with other services was made available if necessary.

The research was approved by:

The Auckland University of Technology Ethics Committee (AUTEC) on the 18th May 2005 (Ethics Application Number: 05/27).

The Research Access Committee (RAC) Child Youth and Family (CYFS) on the 20th July 2005

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[8] For a more detailed discussion of a child's right to proved assent versus consent, the reader is referred to Parsonson, (1997)

Summary

This chapter provided a methodological framework for the discussion of the case material in the following chapter. It offered a background to the choice of case study, and the analytic approaches used to interpret the material gathered. Details of how the case studies where constructed were discussed, in addition to the process undertaken in analysing the material. The methods used to gather the data, and in particular, consideration of including children in research was identified. Ethical considerations of this were also identified and discussed. The chapter following describes the consultation experience with each of the sets of parents and each of children who took part in this research.

Chapter Six: Case Study One

Introduction

The following three chapters introduce the children and parents in the study. Brief background information is provided to place the emerging data within the context of the participants' historical background. All the children had been in previous foster care prior to permanency being sought and all the parents were first time permanent placement parents. One set of parents had their own children and also had previous experience of providing foster care. For the other two sets of parents this was their first parenting experience.

The sources of participant information were gathered from Child Youth and Family Services (CYFS) file notes, informal discussion with each child's social worker, three audio-taped interviews with the parents at their home, and three interviews that were both audio and video taped with the each child. The meetings with the children took place at the Auckland University of Technology's Child Psychotherapy Clinic. The focal data was gathered by interview however, this venue provided the opportunity for the children to engage in non-directive play and creative mediums if they wished. Each child engaged in these mediums during each interview.

The themes of the case studies focus on the hopes and anxieties of each participant and how they coped with their anxieties.

Participant profiles[9]

Parents: Peter and Mary are in their late forties and have been married for 13 years. It is the second marriage for both of them, Peter has two children from his previous marriage and Mary has three children from her previous marriage. Together they have one child Jason, who at the time of the first interview was 13 years old. Mary's oldest child, Aaron

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[9] Participant names have been changed and all identifying data has been disguised.

from her first marriage, died unexpectedly almost four years ago at age 15 years, two years prior to them applying to the Permanent Placement Unit (PPU).

Mary is the eldest of three children and described herself as easy going. She currently works part-time as a teacher-aide. During her childhood her mother fostered several children and her youngest brother was a fostered child who was subsequently adopted into the family. Peter, the third of five children, described himself as friendly, loyal and dependable, and that he liked to make others happy. He works in the clothing manufacturing industry.

Peter and Mary described themselves as Christians who do their best to follow the teachings and principles of Christianity and raise their children in a loving environment with good morals and open mindedness. They described their biological son Jason, as a very giving and loving child with a propensity to take care of people.

Child: The child moving into the family is Gemma who at the time of the first interview was just about to turn 11 years old. She has two half sisters, both older than her, an older brother and a younger half brother. Gemma has had four foster care placements prior to the home she is about to move into with Peter and Mary as well as a failed 'permanent' home. She has attended four primary schools and has lived in different parts of the country.

Gemma was first removed from the care of her birth parents when she was approximately 18 months old, at which time she and her siblings were uplifted by CYFS due to neglect and placed in temporary foster care. As with most children who come into care, the initial plan was that she and her siblings would be returned to their mother's care, however this has not happened and the five children remain in care. Initially the siblings had regular contact with one another but as the siblings got placed separately this contact has been limited. Gemma hasn't had any contact with her birth mother since she was six years old or with her birth father, who she has no memory of, since she was baby. It was unclear as to when she last had contact with her siblings.

Sixteen months ago, after nine and a half years of temporary foster placements, Gemma was referred to the PPU within the Department of CYFS. After a period of five months she was placed with a permanent care family, however, this came to an abrupt end after four weeks, when the caregivers decided not to continue the placement. Gemma was once again put into temporary foster care where she was living at the time of our first interview.

Interview one: Prior to the transition

The first interview with Peter and Mary took place approximately one week before Gemma moved in with the family. They had met with Gemma on three occasions and on the last occasion she had stayed for an overnight visit.

Peter and Mary discussed the process they went through leading to their decision to apply to become permanent placement parents which is relevant to the overall analysis of this case. This was not their first experience of caring for a child unable to continue living in their birth family. Prior to applying to the permanent placement unit, they had provided foster care for the child of an extended family member for a period of five years. The child was two years old at the commencement of foster care and was transferred to another family member when she was seven years old. It was not Peter and Mary's decision to stop caring for the child and they felt the loss deeply. More recently they entered into an informal foster care arrangement with another child, it was thought this would have been a long-term arrangement but as it transpired the child was only with them for six weeks. Once again it was not their decision to terminate the arrangement.

It was after the loss of the first foster child that Peter and Mary first considered permanent placement. However, after the death of their son, this idea was put 'on hold' until they separately began thinking about it again. They each saw a CYFS advertisement in different newspapers and revisited the prospect. Peter recalled "it was actually quite funny, I was reading the local paper one day and came across this ad and I don't know why it caught my eye but it did…, and I put it to one side. Then about three days later

Mary said to me "hey come and look at this" it was the same ad in a different paper, so I went and got the ad that I still had and we were looking at the same ad."

They also felt that as a result of the events over the last few years they had re-evaluated the priorities in their lives as identified by Peter "I think we've done a lot of re-thinking over the years, especially in the last four years. We lost our son four years ago and it changed the whole aspect of our life. I think that's probably more the reason we are doing it, you know to give another child a chance really, that we didn't have…"

In deciding to proceed, the couple had two stipulations, they did not wish to provide a home for a boy and that the placement had to be permanent. This was explained by Peter "we could not take a boy, it would feel too much like we were trying to replace our son, but we still wanted to give a child a home and it may sound a wee bit selfish but it had to be permanent because we really couldn't face giving another child back."

The overall process took longer than Peter and Mary anticipated and from their point of view there wasn't sufficient communication from the Department, which left them thinking that they might not be accepted as prospective parents. Peter recalled with a slight laugh "you sort of wonder whether they actually want you to do this, whether they actually think we're suitable, you know…" Mary offered her thoughts "I mean we had the last [training] session and they show you the photos of the children and said "not all of you people will be suitable but we'll let you know" and we didn't hear anything and we presumed that okay we're not suitable."

Mary in particular was distressed and felt unsure whether to continue or withdraw from the process, saying "we nearly cancelled the whole thing because I was really upset, people lose interest when they have to keep on chasing something, I didn't think they were as forthcoming as they should have been…" Approximately one month after the completion of the training programme Peter rang the Department and recalled "they did explain that we would have to do the chasing, to make sure we were serious about what we were getting into, to make sure you're not doing it on a whim."

It was during this 'waiting' time that they were approached to take another child on a less formal basis and because they felt unsure about whether they had been accepted by CYFS they went ahead with this arrangement which, as indicated, turned out to be a temporary care arrangement.

The decision to continue with the permanent placement, they maintained, was in response to their son's Jason's request. According to Mary "Jason was actually the one who said "please can we go ahead" he was probably the pushing in the end…, then I thought, well we'd said we were going to do it, so because he was upset about us pulling out, we decided to go ahead with it."

Child's process: Gemma, like any child in the care of CYFS about to be placed with a new family, had less opportunity to reflect on the decision. She regarded it as CYFS decision that, a) they wouldn't let her live with her birth mother, and b) it was up to the social worker whether she saw her birth family members. When asked how she found out she was moving to a new family she responded "when I went to the previous home, where I am now, the social worker told me that I was only going to be there until I got adopted."

In response to the question about why she thought the decision had been made that she would be adopted, Gemma made no reference to the initial circumstances that had lead to her being in this predicament, but responded very much in relation to the 'here and now' of her life, saying "'cause I've been moving since I was really, really little and I've been waiting to get a home with people I could stay with forever. I have to keep on making new friends and then like leaving friends and stuff, it's really yukky. Usually I'll get nice and comfortable in a home and then they'll find a new home for me."

Hopes (parents): Mary and Peter identified their primary hopes in relation to permanent placement as, a) to provide an opportunity for a child who was not able to live with their family of origin and, b) for the child to have the experience of being part of a stable family. They felt they could offer both of these things, as identified by Peter "the most

important basic thing that a child needs is permanence and stability. I mean without that it's like building a house without any foundations." Referring to Gemma he reflected "it seemed that just when the poor little thing got settled and comfortable she got shipped off somewhere else. I can't imagine what it's like, but it must be horrible, there's never been any stability or permanence, and children need that."

They also hoped that the experience would provide a good experience for their son, concluding "and of course, Jason being on his own now, we thought it might be nice also for him to have somebody else in the house around his own age, someone he can relate to, company for him. We'll never replace his brother, but here is another child that needs a home and he [Jason] could be company for another child that's been through a lot as well, they can lean on each other, they've both been through stuff."

Hopes (child): It appeared Gemma had similar hopes to Mary and Peter. When asked what she thought would be the best thing about moving into a new home she responded "I'll have an actual family then," going on to mention the names of members of her new family, including extended members of the family she had met on one occasion, identifying them as "my aunty and my cousin." She further asserted that this will be her "settled place" which she can "get comfy in…*and*…find some new friends and have them for as long as I like." It would appear Gemma was very focussed on 'belonging' and it is not surprising that she focuses on potential friendships as developmentally she is at the stage when having friends is important to her social development. During the pre-adolescent stage of development, friends are important in terms of identity formation, and necessary to navigate the developmental task of psychologically and emotionally separating from parental figures to achieve differentiation and ultimately adult autonomy (Maier, 1988; Crain, 2000).

Anxieties (parents): Along with their hopes, Peter and Mary acknowledged some anxieties about embarking on the experience. In addition to the initial thought that they may not be accepted as permanent placement parents, they identified additional areas of potential concern, in particular they were not expecting the experience to "be a life-long

honeymoon." They also wondered what the experience would be like in reality for their son Jason who they initially identified as one of the reasons they thought providing a home for another similar age child would be a good idea, Peter reflected "I hope we don't, even inadvertently, forget about Jason…" Peter further reflected with a laugh, one thing that worried him a little bit was whether the children would like one another, posing the rhetorical question "what if they didn't get along and they just despised one another at the first meeting..., how on earth could we make this child welcome and continue to meet Jason's needs properly and make sure he felt comfortable."

A further aspect they thought could prove difficult was Gemma's need for attention, identified by Mary "even though we've only had her for the weekend, there was a little bit of attention seeking coming from Gemma, trying to be number one." Mary continued "and even though she's been through a lot and tossed from family to family she's quite outgoing for a child who's been through a lot…, she's quite out there in your face for a child." Peter, although more moderate in his assessment, concurred "before we first met her I did sort of expect her to be a little bit more reserved, a little bit less outgoing," acknowledging with a laugh that he "was quite surprised at how outgoing and open she was." They went on to compare Gemma to the child they fostered for five years and seemed to be beginning to anticipate this experience may be very different. Mary described the first child as "very withdrawn when she first came to live with us, would keep herself to herself and go and hide in her room..." Identifying the anticipated experience with Gemma, Peter commented "I guess you just expect children in that situation to be a bit reserved, a bit shy, a bit uncertain, but that wasn't the young lady we met."

Mary further identified that she was worried about the teenage years and suggested "this is difficult with any child," and acknowledged that Gemma at nearly 11years of age was not far away from this developmental stage. Toward the end of the first interview there appeared to be a further, barely mentioned, anxiety for Mary, that maybe Gemma herself wouldn't want to be with them and that she wouldn't settle with them. When talking about the immanent move Mary identified that Gemma "is a bit unsettled at the

moment…, when we had her she wanted to move in straight away but now she knows it's happening there's a bit of a tug of war going on [between saying goodbye to her current placement and moving into her new placement], she wants to be here but she wants to stay there." Apparently Gemma's current foster care mother had concurred that Gemma was a bit unsettled at the moment.

Anxieties (child): In terms of voicing any anxieties, Gemma was less able to overtly do this. When asked about any worries or concerns she may have about the upcoming move she was unable to identify any. This will be addressed further when discussing how she copes with the situation she finds herself in.

Coping (parents): Mary and Peter rely on their life experiences to understand the complexities of their current situation. Furthermore, despite their concerns, they identified that they feel well equipped to manage any difficulties that may come along, and suggested their initial experience of fostering had given them a taste of what to expect from a child who has learned not to trust the people who are responsible for caring for them.

To allay their anxiety that they may 'not being suitable' Peter was able to recall information that they "would have to do the chasing" to indicate they were serious "they don't make it easy on purpose because they want to make sure they get people who are serious that's just the way it is." Mary and Peter also introduced the fact that they had been asked to take another child. Focussing on this detail may have protected them somewhat from understandable fears of being rejected through the process of fostering, and enabled them re-establish some sense of their own control of the situation.

At times there was a 'meant to be' quality about the way Mary and Peter spoke about the connection with Gemma. Peter described her as "the one we wanted but she was advertised as [different name]." Peter added "it's funny because from what I understand she is the child that [social workers] were…" Mary continued the sentence "thinking about" Peter concluded "she's the child in the ad that we read."

Although there was an acknowledgement of the loss of their oldest son which had caused them to re-evaluate their lives, there was no overt acknowledgement of wanting to replace him and fill the void in their lives, despite some indications this was so. Both Mary and Peter identified the wish to "give another child a chance we didn't have…," further identifying that another child would provide company for their son. Their decision that the placement "had to be permanent" suggested they could not bear the loss of another child.

With regard to their anxieties about the potential negative impact on their younger son, they identified that it was Jason who asked them to continue when they were considering withdrawing. However, perhaps some consideration is warranted as to whether Jason's motives were driven by his own desire or his awareness of his parents' need. Mary and Peter talked about Jason's resilience and capabilities, identified by Peter as "knowing Jason as I do he'll be fine, he's very resilient, apart from being a very loving and giving child. I think he's just simply going to enjoy having a sister. There will be arguments they'll get out sorts with each other…" Mary concluded "just like siblings." They went on to talk about the first time the children met, and maintained that Jason and Gemma hit it off instantly "you would think they were siblings because they have so much in common."

In order to cope with their anxieties about Gemma's attention seeking and precocious behaviour they seemed able to remind themselves of the vulnerable, untrusting child who had been moved around different families. After initially identifying Gemma's attention seeking behaviour, Mary went on to describe Gemma as "lovely" which was echoed by Peter "yes she's a darling." In a matter of fact manner he suggested "there'll be a settling in period, some attachment issues, we know it will take her a while to settle in and accept us as her family, just as I suppose we've got to get used to her. We don't for a moment think it's just going to be instant happy families." Calling again on their life experiences he continued "we know full well what effect trauma can have on a child, so we know there's going to be some hard times, but it's worth it really, because at the end of it all there's one more child that's had a good, or at least half good childhood and a chance at a

good start in life." Peter further suggested Gemma's outspokenness was perhaps "her way of masking her own feelings…," and in response to Mary's suggestion that Gemma was "cheeky and quite rude" Peter minimised this assertion by suggesting "she was a little bit cheeky, but not in a malicious way, more a familiar way."

To cope with the possibility Gemma might not want to be with them and consequently be faced with the loss of yet another child, they focussed on Gemma's experience, and what it might be like for a child who finds him/herself in her situation. Peter suggested she may be thinking "I know the people I'm living with, I don't really know Peter and Mary and if I go and live with them, are they going to send me back like the last people did." He continued "one of the things we've got to do is to try and reassure her that we're not going to send her back…*because*…that will be in the back of her mind for some time."

Coping (child): In line with her developmental stage and cognitive capacity, Gemma appeared to cope with her unspoken anxieties in a variety of ways. At a conscious level she constructs a 'stable and loving' family for herself. Even before she has made the transition into the family, the family members become 'her family' making reference to meeting "my aunty, my cousin and my sisters." However, it was noticeable that when she was discussing her 'new family' she didn't initially include any reference to Jason who could, at an unconscious level, be experienced as a threat to her 'specialness' (Gabbard, 2004). It may not have been entirely accidental that Gemma neglected to mention the name of her new brother as it would be understandable that her strongest fantasy was focused on having a mother and father, and as such a similar age sibling may be both a little daunting as well as a potential rival to her new parents' affections.

It appeared from Gemma's interview that it was very difficult for her to overtly acknowledge any anxieties about her up-coming 'new family' situation. In response to my question about why she thought the decision had been made for her to be 'adopted' she matter-of-factly said it was because she was always having to "leave and change her friends" and that she "just gets nice and comfortable in a home and then they'll find a new home for me." There was no acknowledgment of the underlying events that had lead

to this situation. When identifying the best thing about moving in with Peter and Mary, Gemma indicated that she "will have a family then," and that when the social worker told her a family had been found for her she was "really, really, really…, happy, too happy for words." There was no mention of feeling worried or concerned that this arrangement, like the others to date, would not work out. In response to the possibility of having some worries about how things may be, she announced "I don't actually have any worries." Given Gemma's past experiences of being moved from family to family and with each move likely to increase feelings of rejection and loss, it would be expected she would have some level of anxiety about this upcoming move. Instead, she appeared to ignore any feelings that could evoke this anxiety. In response to a question about her feelings of moving from one situation to another she identified she got "really annoyed" and when asked whether she got any other feelings, she responded with "yeah, I feel sad" however this was spoken with a question mark and a marked absence of emotional affect.

Other aspects of the interview that focussed on feelings were avoided or also discussed with absence of affect. At times Gemma used distraction to manage her anxiety. For example when asked whether she thought there was anything that might be a bit tricky or a bit difficult moving in with her new family she identified this would be "having to pack all my clothes…" There was no mention of the possibility she may not like her new family or they might not keep her which has been her previous experience. There was no mention that past experiences had not given her cause to be this optimistic.

There were further aspects that appeared to illicit some avoidance on Gemma's part. When asked what she thought her moving in with a new family might be like for her 'other' mum, the mum she lived with when she was very little, she asked, again in her matter-of-fact way, if I meant her "biological mum" going on to say "she doesn't actually know, but if she did know I think she would feel happy," and after a moment "she'll be really happy for me, but in a way she'll also feel sad because she still loves me," which is perhaps a way of managing her unconscious thoughts about the initial and ongoing reason for the separation from her birth mother.

Discussing whether she had any memories of her birth mother, a memory she recalled, which she described as a "really good memory" was when she and her older sister were playing together and her sister pushed her and her mother gave her sister a smack. Noticeably, as Gemma talked about her birth mother, recalling another memory about her time in kindergarten her voice and terminology became regressed, referring to her mother as 'mummy'. Later on, when naming the male clay figure she was making, she identified the name as "one of my brother's name" and then went on to ask if I knew she had "one big brother, my biological brother," however, she couldn't remember how old her brother was or where he lived. This seemed to signify that although there isn't a physical connection between her and her birth family she is still psychologically connected to them.

Another way Gemma seemed to cope with the reality of her situation was to frequently make reference to being 'wanted' and 'special', which again may be considered at odds with the reality of her life experiences. Referring to the position she will have in her new family, that of the youngest child, she identified that she "hates being the youngest," even though "I do get spoilt, 'cause the youngest always gets spoilt, too spoilt." Then, as if to confirm the fact she is the youngest, and thereby special, she identified that she is unable to pronounce words such as "saudage" (sausage) and "hosdible"(hospital) pronouncing them in a similar way to very young children.

When asked how she thought Peter and Mary might be feeling about her coming to live with them, she said "they're actually really excited." Her response to what she thought they may be thinking would be the best thing about Gemma moving into their family, she took the focus back to herself and suggested it was so that she "can get comfortable without moving again."

Summary of Interview One

It would appear that consciously Peter, Mary and Gemma need to keep the hope that this time, the possibility of forging a new permanent family will work out. However, there are

indications that psychologically they may be less sure of this. Peter and Mary wondered whether Gemma will like them, while Gemma seemed unable to face the possibility that they won't like each other. Peter and Mary identified aspects of caring for a traumatised child that may prove to be challenging, however they were able to contextualise these potential challenges and call on their life experiences to contain their anxieties. Gemma appeared to manage the situation by denying the reality of her life journey to date and by minimising the impact of moving yet again.

The second interview gives insight to the emerging anxieties for each of the participants and how this impacts on their experience.

Interview two

Introduction: Due to the Christmas break, the second interview with Gemma took place approximately two months after she had transitioned into the family, and due to scheduling difficulties the interview with Peter and Mary didn't take place until approximately three months after the transition. All participants presented in a very different frame of mind from the initial interviews. The hopeful anticipation they held was somewhat dampened as they faced the reality of learning to live together. Peter and Mary described Gemma's behaviour during the three months since the first interview as demanding and that the relationship between Gemma and Jason had been particularly fraught.

Hopes (parents): Peter and Mary seemed to be struggling to hold on to the hope for the relationship, but once they'd voiced their anxieties that had at times lead to feelings of despair they seemed able to restore a degree of hope. The intervening time between interviews seemed to have been testing for all family members to the point Mary had wondered whether she could continue with the placement. However, she had been able to find glimmers of hope that had enabled her to continue, identifying that "in the last couple of weeks [Gemma] has done a turnaround, since she's been back from camp she's been really good."

Peter, it seemed, had been able to hold on to a more hopeful outlook than Mary, although he acknowledged it had been Mary and Jason who had borne the brunt of Gemma's anger and testing behaviour. He concurred with Mary that Gemma seemed to have done a turnaround and added "she has been trying to connect with Mary a lot more, trying to bond." He provided evidence of this by way of an illustration "one night Gemma was lying on the floor and then got up and went and snuggled up to Mary and looked at her and said 'I love you mum' and I thought that's great we're getting somewhere."

Hopes (child): Gemma was quite subdued throughout her second interview and in the main, monosyllabic with her answers, to the point that at times I felt shut out of her world. This interview gave a different impression of her hopes for the placement, unlike her first interview when she appeared to be holding the hope about having "an actual family," and being "settled and comfy."

One of the themes in her play, however, appeared to symbolise a degree of hope. Toward the end of the interview Gemma played with the doctor's kit and tended to 'sick' toys, and even though the 'patients' were very sick with life threatening diseases such "meningococcal" with the right treatment they got better.

Anxieties (parents): The anxieties held by Mary and Peter prior to Gemma transitioning into their family appeared to have come to fruition and in some areas had been more problematic than they had anticipated. They had found Gemma's envy of Jason and her attention seeking behaviour particularly difficult to manage. Discussing her behaviour they described her as having to be "number one" and that when this was denied her, she "will fly off the handle." They liken Gemma's anger to a 'two year old' tantrum and identified that her anger was mainly directed toward Mary. Mary described the experience of going weekend shopping "every weekend without fail, you'd go out to the shopping centre and if she is told she can't have something she'd stand yelling in the shopping centre at me like a two year old…" They held further concerns about the swiftness of Gemma's mood change identified by Peter "the change is immediate and dramatic, so sudden, one moment she can be happy, the next moment the expression on

her face changes so dramatically…" Mary interjected "a lot of the time you're flabbergasted because you don't know what causes her to act like that…" They recalled several incidents that had occurred over the last three months that caused them to consider whether they could continue with the placement.

Of growing concern to both Mary and Peter was the impact the last three months has had on their son Jason. Discussing this, Peter acknowledged "it's very hard for him actually, very, very hard; basically, Gemma has pushed him away." They described numerous incidences where things had been difficult between Jason and Gemma. It would appear these incidences typically occurred when Gemma was vying for Peter or Mary's attention. Mary identified comments frequently made in the first few weeks by Gemma to Jason "Gemma always says, 'I'm the youngest in the family' and 'I'm more special than you'." Mary felt to some degree this was as a result of the CYFS process where children are usually placed either in a home where there are no children or where other children in the family would be several years older than the child being placed, and concluded "this is what CYFS, or the other families, feed the children… I know they're trying to make them feel that the family wants them but they 'feed' them that they are better than all the other children because they're going to be the youngest and the youngest is always spoilt." This expectation had been echoed by Gemma in her first interview.

The third area of concern that had increased for Peter and Mary was Gemma's extrovert behaviour. It would appear the potential difficulties associated with adolescence have presented earlier than expected. Mary and Peter talked about Gemma's interest in boys and recalled a couple of incidences that had caused some "alarm bells to ring." Peter conceded he and Mary had "wondered on more than one occasion whether it would have been a lot easier with a younger child."

Anxieties (child): As with her hopes, Gemma wasn't able to indicate verbally any worries or anxieties that had arisen during the time she has been with the family. In response to my reflection that "being in a new situation can sometimes take a bit of getting used to…, getting used to people doing things differently and having different

expectations." Without making eye contact Gemma responded with a monosyllabic "yeah." In response to my recollection she had been in a few families and I wondered if there were other questions she thought would be good for me to ask in relation to what it's like for children when they move into a new family, she said with absence of emotion "I don't know, they're all the same really," which seemed to indicate a disillusionment of the hoped-for family where she feels she belongs.

Coping (parents): Despite the difficulties expressed by Peter and Mary they continued to manage their anxieties by looking at the positives in the experience as well as being able to remind themselves of, and seek to understand, the vulnerable child inside the attention seeking pre-adolescent. They realised Gemma had attempted to 'play them off against each other', Mary identified "I was the 'baddie', he was the 'goodie' and her behaviour would change as soon as he walked in the door..." The way they coped with this was to talk openly in front of Gemma about the events of the day so that she knew they had no secrets from each other.

At times, when relaying some of the more difficult experiences they had encountered during this period, Peter and Mary appeared to lighten their distress by using laughter. For instance, when Peter introduced his observation that Gemma is not a 'sharer', this was done so with a laugh and when Mary discussed the incidents at the shopping centre she also relayed with slight laughter. Other incidences were also 'softened' by the use of laughter, thereby minimising any potential distress and feelings of concern in relation to Gemma's volatile behaviour and their voiced anticipated hope that the "honeymoon period might have been a bit longer."

They don't lose sight of Gemma's early history which appeared to help them understand the contradiction between her behaviour and her psychological experience. In an attempt to understand Gemma's need to draw attention to herself as being the 'best and most special child' Peter suggested "I think she wanted to fit in and in order to fit in she had to be, or feels she had to be, better than perhaps she thought she was." He went on to make sense of this by reflecting on Gemma's history "I think because she's had so many false

starts, numerous foster placements and the last permanent placement didn't work out, I think she felt there was something wrong with her."

Mary identified that they had "eleven years of bad habits to try to break." Peter on the other hand suggested "it's not as much bad habits as eleven years of bad stuff building up" reasserting "she has been from foster home to foster home, relative to relative, and then more foster homes and then what she thought would be a permanent home…, it's as if she's expecting it not to work and is trying to help it along." He summed it up, perhaps accurately, that psychologically "she's basically always had her bag half packed."

They further identified that whenever Gemma talked about her life before coming to live with them it has been without any emotion. Peter again made sense of this by relating it to Gemma's history "I think she's just become hardened which is really, really sad," and concluded "hopefully we can soften her up a bit."

In response to thinking about what things they were enjoying most about having Gemma with them, Peter cautiously suggested he thought "a lot of that is still to come," which perhaps indicated he continued to hold the hope this will emerge, and identified "on the odd occasion she has been a real pleasure to have around," and described Gemma as "an interesting little person who is capable of a great deal of love and affection even when she's being a little scamp," and concluded "she is a sweet kid." This description of Gemma seemed a contrast to the reality of their experience over the last three months, but by minimising the overt behaviour and attempting to look at the potential for change, appeared to enable Peter to hold on to his sense of hope for this child and the family. Mary on the other hand appeared more philosophical about the situation and seemed to believe that the best way of ensuring that things progress smoothly is to take charge of the situation.

In relation to their obvious distress and concern about Jason, they identified ways they are coping with this, particularly in their efforts to reinforce their relationship with him

"to let him know he is as important as he was before," and they had instigated counselling for both children.

Coping (child): Gemma seemed to be coping with the difficulties of new expectations by denying they exist. When asked whether some things hadn't turned out as she thought they would she said "not really," and in response to my recalling that she'd had no worries prior to her moving in to her new family, she confirmed she still didn't have any worries. In relation to how she thought it was going for [mum and dad] she responded "good." Gemma indicated she didn't think about her previous family saying "forget the past times and remember the good." Perhaps in an attempt to restore her hope, she reminded me that the difference with this family is that she is "going to live with them forever."

When asked how things were going with her new brother, Gemma acknowledged that at times things were difficult between them but she minimised the level of distress both she and Jason had been experiencing by saying "one will say something's big and the other will say it's small and we'll keep going on and on and on and on." In response to my question whether there had been any big arguments, she vaguely responded "not really."

During the time between interviews Gemma had attended a camp which occurred around a particularly difficult time at home when being away from the family could have caused her to experience going to camp as being 'sent away,' but her way of managing this potential anxiety was to suppress or minimise any feelings that may have been evoked, responding to my question "what was it like being away from home?" with "it wasn't that bad actually."

Summary of Interview Two

It seems that during the last three months all family members have faced some difficulties finding ways to 'fit' with one another. They have needed to accommodate the reality of their situation, while finding ways to hold on to their hope that this arrangement will

survive and flourish. This had been managed, primarily, by Peter and Mary taking charge of the situation and operating from an executive parental position (Barker, 1999). The effect of this seemed to have restored their parental management while the family re-structure themselves. Furthermore, it had provided Gemma with the experience of not being rejected, despite her unacceptable and unrealistic demands.

It would appear that when Gemma tested the expected family rules to the limits, which resulted in Mary reaching the point of considering terminating the placement, the situation "did a turnaround." There did, however, appear to be a growing concern about the relationship between Jason and Gemma and how best to manage this. In an attempt to address this concern, Mary and Peter have instigated therapeutic assistance for both children.

Interview three

Introduction: The final interview with Gemma took place approximately five months after the transition, and the final interview scheduled with Peter and Mary was approximately five and a halve months after the transition, however, Peter wasn't present at the final interview due to unexpected work commitments.

It appeared there had been some improvement in the 'settling in' process since the last interview with a significant ongoing improvement in the relationship between Gemma and Mary. In contrast, however, it seemed more of a distance had developed between Gemma and Peter. The relationship between Gemma and Jason could at best be described as tolerable.

Hopes (parents): Mary seemed to have recaptured her hope that things would work out, as she identified "we're doing really well, I must admit I really struggled with it in the beginning but we've come through, we're on the upside now, better than I thought I would do in such a short time."

As she discussed her relationship with Gemma, Mary identified how Gemma had become more 'attached' to her. She recognised, however, that this could be Gemma's attempt to alleviate her own anxiety, as she recalled "we'll be walking somewhere and she'll come out with 'I love you mummy. Do you love me?'" Mary elaborated "she'll probably say it about ten times a day on a weekend, it's the reassurance she needs." In regard to Gemma's volatile behaviour, Mary expressed her hope that this was under control, and identified "although we did see a lot of anger in the beginning…, I think we've actually got past the anger."

The overall change was perceived by Mary, as Gemma's genuine desire to be part of their family which in turn seemed to have reignited her hope "I think she's trying to be a part of the family and make sure she fits in." Discussing the concern that had been raised in the last interview about whether they thought they had taken a child 'too old', Mary recalled that their concern at that time had been whether "they wouldn't be able to mould this child into their family" and concluded "but now she's moulding quite well."

Hopes (child): For her part Gemma also seemed more optimistic, she identified that things were going well 'at home' and described her routine when she comes from school, which seemed to indicate her 'felt' sense of belonging in the family. In response to my question, how she thought the other family members were feeling about being part of "this new family" Gemma responded "happy." Going on to explain her mum was happy "'cause now she's making someone else happy as well as making herself happy." She was less certain about Peter, and indicated she thought he would be feeing "okay, I guess."

In addition, Gemma talked about having friends which she had identified in the first interview as being important to her and she suggested "everyone at school is my best friend."

Anxieties (parents): Despite the renewed hope expressed by Mary she did identify continued concerns they are facing. These are mainly connected to the relationship

between Gemma and Jason which, from their perspective, had not seen much improvement. Additional concerns that had arisen for Mary, which also impact on Jason, are related to Gemma's resorting to infant-like behaviour. Gemma was also beginning to ask questions about her early history and why she is in the situation she is in.

Mary identified "we're going through the baby stage," and acknowledged she was aware of this possibility "they warned us this may happen, that some children do revert back to a baby stage..." She went on to discuss the impact of this on Jason "it's quite hard because [Gemma] will be right here on the floor holding on to my leg, or in the shopping centre she'll have her arm around me asking for cuddles." As she reflected on how Jason was adjusting, Mary conceded "up and down, he is feeling the insecurity of Gemma's need for attention, sometimes he will go to his room and I'll go and talk to him and say this will pass." The way she and Peter had managed this situation was by Peter taking on a more active role with Jason, Mary expressed the hope "if I give Gemma all the attention she needs [her regressed behaviour] will disappear a bit faster."

Mary continued to voice her ongoing concern in relation to Gemma's precocious behaviour and interest in boys, worried that due to her background she "is likely to be always looking for love and attention, and maybe thinks if she wins the boy that's what she going to get." She went on to voice what may be her greater anxiety "but you don't want her to be getting pregnant."

Within the family setting Gemma had been voicing some of her own anxieties, which in turn appeared to be evoking some anxiety for Mary, as she acknowledged she struggled to know how best to manage this for Gemma. One of Gemma's emerging anxieties is her 'sense of belonging' and the permanence of her placement with this family. The other issue is related to her 'sense of identity'.

Discussing Gemma's insecurity about the permanence of her placement, Mary identified that Gemma "hates [the social worker] visiting," and that prior to visits Mary had noticed that Gemma became anxious, and would ask "why does she have to come here?" When

Mary had asked Gemma why she did not like the social worker, Gemma conceded "I don't know, I don't like her," but had been unable to elaborate what it is she did not like. Mary believed it is because the social worker had uplifted Gemma from other placements and her visiting may illicit memories for Gemma of her past experiences, incorporating feelings of rejection and abandonment. Mary's understanding of Gemma's anxiety appeared to have some merit as she further identified Gemma had been questioning her history of impermanence and had asked, in relation to her previous care-giving arrangement "why didn't they keep me?"

In regard to the question of identity, Gemma had been asking whether she will ever see her birth mother again. She had also been talking about other members of her family of origin, and had wondered who she 'will be like'. Mary acknowledged she feels torn about what to say to Gemma with regard to her questions about her family of origin and contact with her birth mother and conceded she did not have the answers, nor did she know what the future will bring for Gemma.

Anxieties (child): Similar themes emerged in Gemma's interview. Much of the time was spent by Gemma identifying how well things were going and how she was adjusting to being in her new family. The regressed behaviour and infantile terminology identified by Mary was also noticed when Gemma talked about Mary and Peter, and frequently referred to them as 'Mummy' and 'Daddy' in a much younger child-like voice.

During the interview Gemma made a sand-tray picture which included spelling out her name in the sand. She talked about her name and explained that her birth mother had told her the meaning of her name, Gemma also referred to her birth mother as "Mummy." Gemma was subdued as she worked on her sand-tray picture and at times stuttered in an infantile way as she spoke. Without prompting, Gemma continued to talk about her birth mother as she recalled "'cause I saw her the last time when I was turning 6, she told me then and she, she, taught me how to spell my name and when you do the [letter in her name] you have to do it like that, with a little flick." Gemma continued, with her voice changing to a sing – song tone "I've got heaps of mummies, all around…" and then

stopped abruptly. In response to my asking how many mummies did she have, Gemma replied "every house I've been to I've had a mummy, so that's like about 15 or 20." From Gemma's known history this information is inaccurate, the number of homes she has been placed in is six, but perhaps this is an indication of her internalised experience of not belonging, or of not being claimed by any mummy. I asked if she remembered any of [her mummies] and she let me know she remembered one or two. She then began singing again and moving her body in a dance-like way *"do you remember it was long ago when you were young and innocent then"* she stopped and announced "that's a song by Michael Jackson," to which I reflected "that's what it was like for you, you were young and innocent," to which she responded "yeah." Gemma's anxiety appeared to increase as she began an intense search for coloured stones to put in her sand-picture, her head lowered and her hair fell around and covered her face. After several minutes of continued searching, Gemma announced "do you know the only time I've seen my birth father was when I was 8 months old?" she went on to concede she did not "remember him or even know what he looks like." She recalled he sent her a Christmas present two years ago, and I suggested he must have been thinking about her, to which she replied light-heartedly "yeah, he loves me," and started singing again *"he loves me and I didn't even know it"* she stopped singing and said "that's freaky, someone loves me and they're not known."

Coping (parents): It appeared Mary had continued to find ways of coping with the additional difficulties that had arisen. In regard to the infantile behaviour displayed by Gemma, this was managed by providing what she believed Gemma needed by way of extra attention. She also noted they are coming up to six months in the placement and that one of Gemma's previous placements had lasted eight months, and suggested that maybe Gemma's regressed behaviour was "stemming from that…"

In order to manage the effects on Jason, Mary acknowledged she is co-opting the help of Peter to provide what she was currently unable to provide for her son. Furthermore, when Jason complained about the lack of attention he was receiving, Mary found ways to ameliorate this such as "sending him off to the movies with his father, just to give him

some one on one time." She further acknowledged that Jason was finding counselling helpful as it had provided him with "an outside person to talk to."

Mary continued to make sense of Gemma's demanding behaviour by relating it to the legacy of her history and suggested "Gemma is searching for acceptance, even more than love, acceptance that you're going to keep her." Referring to the statutory process, Mary suggested that "once it goes through the 'channels' and she becomes a permanent child I think she will settle down."

Although Mary continued to voice her concern about Gemma's precocious behaviour, she appeared to be coping with this by taking charge of the situation and letting Gemma know the family expectations. She anticipated that Gemma "will accept it, we are quite firm on morals, but I don't regret it because there are a lot of girls who get pregnant when they're young…" With regard to Gemma's tantrum-like behaviour that can re-emerge at times, Mary again had coped by taking charge of the situation "I've found you've got to deal with it straight away…and defuse it…then she's fine."

When faced with questions from Gemma about her past, and her experiences of loss and rejection, Mary had been able to call on her own experiences of loss "I've tried to explain to her, you know, that you've lost your mother, but lots of people lose people we love and you know we manage to keep on going."

Coping (child): Gemma's typical way of coping emerged during this interview as she focused on how special she is, despite having identified she has had heaps of mummies, none of whom have continued to care for her, and a father who 'loves her' but whom she had not had contact with since she was eight months old. In response to the end product of her sand-picture she described herself as "very creative" and her picture as "beautiful and perfect just like me."

Gemma appeared to 'claim' her position in her new family as she identified in an infantile voice "mummy says I'm a good girl and she loves me." She maintained she

knew she was loved because "mummy hugs me, she'll give me a big hug and daddy hugs me sometimes." When asked how she thought things were working out with her sibling she maintained "it's working out good, very good, very, very good," in conjunction with this assertion Gemma started to sing and sway in a dance-like way *"very, very, very,… good,"* and concluded in an exaggerated voice "they love me." Gemma further 'claimed' her place in the family by talking about her daily routine and the 'family rules'.

With regard to how she is settling into her new school, Gemma mainly talked about her friends, however, there appeared to be an exaggeration or absence of discernment as she suggested "everyone at school is my best friend."

Summary of Interview Three

It seemed Gemma has continued to attempt to find external evidence to validate her 'specialness' while at the same time denying the reality of her past experiences. Her [new] 'mummy' loves her, her birth mother gave her a beautiful name and taught her how to write it and her birth father loves her even though he hasn't seen her since she was eight months old. She further suggested everybody at school is her best friend. However, some level of anxiety related to loss, abandonment and identification appeared to have emerged noted in her questions to Mary about why she was not "kept" and whether she will be like members of her family of origin.

Mary and Peter appeared to have been able to restore their hope that the experience will turn out well for all of them. They had taken 'charge' of situations they had found problematic and had let Gemma know they discuss things openly. They had continued to use their own life and parental experiences to inform their understanding of how to manage each 'new' difficulty. They had also instigated therapeutic assistance for both children.

Chapter Seven: Case Study Two

Participant profiles[10]

Parents: Simon and Chris are both in their mid-thirties and have been in together for over ten years. Neither have any children. They live in a semi rural area on a lifestyle block South of Auckland. Simon works part-time as a teacher-aid, in addition to managing their property, and Chris is a speech therapist.

Simon is the eldest of four children and described his upbringing as having been good, due to having caring parents and a supportive family background including close relationships with cousins, aunts and uncles. Chris is the eldest of three children and has two sisters, four and six years younger than him. He indicated he did not enjoy his childhood due to the pressure to do well, and having to be responsible for his younger siblings. His mother was described as an "excellent parent," very open with affection and always put the family first, whereas his father was described as colder, and a man who did not show his feelings. Chris recalled that as a child he did not do much with his father, however, he maintained that as an adult he and his father have become close.

Child: The child moving into their family is Trent, who at the time of the first interview was just about to turn eight years old. He has a half brother eight years older than him and a half sister five years older than him. Trent has had five foster care placements prior to the home he is about to move into with Simon and Chris. Most of the placements have been brief, between two and six weeks, apart from the last placement which lasted for five and a half months. He has attended four primary schools.

There had been extensive CYFS involvement in relation to Trent's siblings, and ongoing police call-outs due to domestic violence and suspicion of drug use. The first recorded incident that included Trent was when he was nearly three years old at which time an investigation by CYFS found that all three children had been subjected to neglect. As a

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[10] Participants names have been changed and all identifying data has been disguised.

result, measures were put in place to promote improvement in the children's welfare. Despite concerns of an unstable home life Trent wasn't removed from his birth parents' care until he was six years old. Although a plan for Trent to return home had been drawn up, this was not achieved, and his mother agreed to a permanent placement. Contact between Trent and his mother continued, by way of supervised visits, until just before his move into his permanent placement. Trent was in temporary foster care at the time of our first interview.

Interview one: Prior to the transition

The first interview with Simon and Chris took place approximately one week before Trent moved in with them. Up until this time they had 'informally' met up with Trent for short periods on two occasions. The plan was that there would be three further meetings in the early part of the coming week and then he would move in on the Friday of that week.

Simon and Chris discussed the process they went through leading to the decision to apply to become permanent placement parents and how they found the application experience. Initially it was Chris's idea to apply to permanent placement. He identified "I've always wanted kids, I'm sort of a family person," he further maintained "I think we're at the stage of our relationship when everything is going well and we just thought we could do it." Simon was perhaps less psychologically prepared as he acknowledged "it's something I'd never thought about…, but I was on board quite soon though." It was Chris who responded to a CYFS permanent placement advertisement, and acknowledged he'd looked at the advertisements over the years. His initial contact with the Department had been to find out more about the process and was very pleased with the response, identifying that "it was very good, very positive, someone phoned us back straight away and it happened very quickly."

Chris admitted to some anxiety about whether they would be regarded as suitable by the Department "I kind of thought we wouldn't get chosen because of our set up, it's only

recently that we've actually thought we could do this, I thought we'd get to the final stage and it would be, 'sorry, thank you but…'." In response to the social worker informing them the next step was to speak with their employer and referees he expanded "we thought then, it's getting to the stage now were we're going to be rejected." However this was not the case, as they were accepted.

Simon and Chris felt the overall process took longer than they had expected, with the delay between completing the training programme and hearing back from the Department leaving them feeling somewhat anxious. They began to resort to their earlier thought that they may not be regarded as suitable, as recalled by Chris "you think the worst, you just think it's not going to happen." They went on to talk about the contrast between the time it took to be accepted as permanent placement parents and the quickness of transitioning the child into the family, which in their case was under three weeks from the initial meeting, which they felt did not leave a lot of preparation time.

Child's process: When Trent was asked how he found out he was moving to a new family and how he felt about that decision, he responded "my caregiver told me, yeah, and um before that I didn't want to go to another family, yeah, but I had to." In response to a question about why he thought the decision had been made for him to move Trent started "well because, um…" he then paused and looked questioningly, and acknowledged "I don't know."

Hopes (parents): The primary hope for Simon and Chris entering permanent placement appeared to be the opportunity to complete their family. As identified by Chris "it puts more into your life and gives a different aspect on things…, being more like a family."

They also hoped Trent would like them and not be disappointed with having two dads as opposed to a mum and dad. Chris commented "I'm hoping from what [the social worker] says he'll be quite happy, I don't know if he knows the set-up yet" and reiterated "I hope he'll be happy…, and he'll feel safe and secure and he can trust us." A further hope they held was that this experience would provide a sense of belonging and stability for Trent,

identified by Simon "that this is his permanent home and that he won't be shifting again." These sentiments were echoed by Chris "we're hoping he can realise this is not just another change…, it's forever now."

It may be that they also see this as an opportunity, as far as possible, to have a child of their own. In response to how they view the concept of permanent placement, Chris suggested "well it's as near to adoption as you probably get, he'll be living with us permanently and it's like open adoption really isn't it? It's not so different, except he comes with his own history and he's still got his parents."

Hopes (child): Trent was not able to state his hopes and expectations about moving into a new family. He appeared to have very little understanding about why the decision had been made that he would be moving into a new family apart from "because my mum and dad were fighting." He did identify, in response to what he thought would be the best thing about moving into a new family that it would be to have "a mum and brothers and sisters."

The symbolism of Trent's play on the other hand may offer insight into his unconscious hopes. He spent most of his time playing with rescue vehicles, ambulance, police car, fire engine and coast guard boat. The theme of his play was of people being rescued and being looked after with particular focus on the coast guard who "saves people if they're drowning."

Anxieties (parents): Chris and Simon voiced a couple of areas they were anxious about in relation to the experience they were about to embark on. The main areas that appeared to evoke some level of anxiety for them were in relation to Trent's acceptance of them as parents and their own ability to provide what he needs. Chris conceded "what if he's really unhappy, if he doesn't want to be here?" Simon added "that's the main thing really." Chris continued with rhetorical questions "what if he doesn't want to settle here, what if he's unhappy, what if he thinks 'well I'm not going to have a mum you know, two dads'."

They also talked about becoming instant parents and how that may impact on their lives. Chris talking to Simon commented "you had butterflies this week, suddenly realising it's going to happen and our life is going to change," which Simon conceded. Chris further identified "whereas when most people have a child they have nine months to prepare and then they have a baby and they have all this time. We're going to have an instant little adult really, a person in his own right coming with his things and being transplanted into our life."

Anxieties (child): Trent conveyed his anxiety in a number ways. He overtly acknowledged "I didn't want to go to another family" and in response to my question whether he thought it was a good idea he shook his head, signalling "No," however, he wasn't able to identify what might have been a better idea. In response to what he might be feeling a bit worried about Trent identified "I'm usually a little bit shy."

Once again it was Trent's play that offered more insight in to his potential anxieties. In his play with the rescue vehicles he created a scenario where the people on the big coast guard boat get put onto the little lifeboat to be rescued which takes them "back to everywhere, but not to their home." Trent's play suggested he may be trying to make sense of what is happening in his life that he has no control over.

Coping (parents): Simon and Chris use a number of coping strategies to manage their anxieties. In terms of their capacity to parent they appeared to feel well equipped due to their professional experience of working with children. When discussing the CYFS training programme, Simon indicated "I'm not sure if I learned anything, I think being used to working with children, and a lot of the time I'm dealing with social skills and behavioural management." Chris concurred and suggested "we've had a lot of experience with children." He did however, concede "I know it's very different to having your own child, but we've still got strategies." In response to potential behavioural and social difficulties they thought they may encounter, Chris referred back to their experience "we'll do the same things we rely on in our work, and talk, we do a lot of talking about things, initially it will be very difficult for [Trent] because he won't know how we do

things, so we'll have to explain everything as we go." Simon also referred to their experience "and positive reinforcement…, we've got a big bag of tricks." Chris further identified his personal view of children "I love kids, Simon loves kids as well, but I'm more so, I've got nieces and nephews, I've always got to have kids around, it kind of puts more into your life."

They also talked about having a strong support system that they can call on, and the importance of this for them, Chris identified "we've got some good friends around us to help, everyone we've talked to has been really positive about it." Simon concurred as he identified the process family and friends were going through in preparation for the arrival of a new addition to the family and added "they're very excited."

Referring to their lifestyle and how having a child may impact on that Chris commented "we've got a very kind of safe, boring, life…most of our friends have got children we live that kind of family life anyway, it's just bringing someone else into it."

To manage their anxiety in relation to the possibility of Trent not wanting to be with them, they were able to keep in mind the contact they've had with him so far. Simon referred to the initial meeting and suggested "it went very well actually he was very friendly and was offering us some of his chips within the first two minutes…" In response to how they thought Trent might be feeling about the placement, Chris recalled the feedback they had received from the social worker "I'm hoping from what [social worker] says he'll be quite happy. I don't know if he knows the set-up yet, but he's mentioned us, and he knows he's going to be placed permanently and he must think it's a bit strange that we've come up out of the blue and met him twice." Simon added "apparently he's saying when are we going to see Simon and Chris again, so there's certainly something subconscious going on."

In an attempt to allay the anxiety they both felt that they may 'not being suitable' they again call on their professional experience. Discussing the selection process, Chris suggested that the way the training programme was delivered "sorts out people who are

more suitable, I think the ones who stayed were the ones who maybe thought 'I could deal with the possible problems which are going to arise' and as Simon was saying, we've got a lot of experience with children."

The couple acknowledged a level of anxiety they'd had in regard to their sexuality being a barrier to being accepted as permanent placement parents, highlighted by Chris "I don't know how many countries would…, or what the chances are of adoption or permanent placement for gay couples." He further acknowledged "I kind of half thought we wouldn't get chosen because of our set-up." Chris also noted his concern that Trent might be disappointed about not having a mother. He was, however, able to ameliorate this anxiety by keeping in mind what they can bring to the experience and what they can provide for Trent, rather than focus on the potential gaps.

There appeared to be a degree of minimisation when they referred to the reason the decision had been made for Trent to be removed from his mother's care and placed permanently with another family, which may be an attempt to deny the reality of the circumstances and the meaning of this for Trent. Talking about Trent's mother, Chris suggested "he knows she does love him, she just can't look after him…" He continued "him knowing that he has got a mum might make it easier really. I think it's positive that he's not going to lose his mum." Perhaps for Chris, minimising the effects of Trent being permanently removed from his mother's care and the assertion that he knows he has got a mum, is an attempt to manage his own thoughts of the possible disappointment Trent may experience at finding he is being placed with two dads.

In respect to their thoughts of how they think it might be for a child having two families, Simon acknowledged that Trent "has talked about his father and family and mum so they are obviously on his mind," and with regard to their thoughts about ongoing contact between Trent and his family they both conclude it would be "wrong to stop him." However, a degree of caution was voiced by Chris "we'll see how it goes and see how he settles here, at the same time it'll depend on how mum is on the visits, whether she's supportive, it's what's best for Trent."

Coping (child): It appeared that Trent is able to use a number of coping strategies, while at the same time it is possible that he has repressed some of the experiences that have lead to his current situation. He seemed genuinely perplexed when asked why he thought the decision had been made for him to move into a new family and the reason he has been in several foster care situations, other than to say "I didn't want to go to another family." Later on in the interview, in response to my reflection that he didn't want to leave his current caregivers, Trent at first concurred and then changed his mind and said "but I do want to leave them now," perhaps this was an attempt to gain some sense of mastery of the situation he has no real control over. In response to how his birth mother might be feeling about the situation he offered the same response as Gemma, saying his mother would be "very, very happy." Another way Trent appeared to cope psychologically was by minimising the reason he is in this situation, as he suggested with absence of affect, the reason he went to a caregiver in the first place was "oh, because my mum and dad were fighting."

Trent seemed to find it hard to answer direct questions and frequently used distraction by focussing on his play or would ask questions in relation to the toys, equipment and the time. During our play with board games, he exhibited anxiety in relation to loosing the game, and in order to overcome this fear he exercised control by taking charge and changing the rules, which may have been a symbolic representation of his attempt to manage his feelings, of once again finding himself in a situation that he had little control over.

Summary of Interview One

It appeared that Simon and Chris, were able to rely on their experience to keep the hope that they would be able to manage the situation they were about to enter, and furthermore that their professional experience would enable them to provide a good home for Trent. They used this knowledge to manage their anxiety about Trent's possible disappointment of having two dads, and their inexperience as parents. Trent's experience seems to be one of bewilderment, perhaps reflective of other children who find themselves in situations

they have no control over. His play seemed to suggest his confusion as he identified the people rescued are taken "back to everywhere but not to their home."

Interview two

Introduction: The second interview with Trent took place four weeks after he had transitioned into the family and one week before the second interview with Simon and Chris. Despite some areas of concern, all participants seemed positive about the start to their experience as a family. Trent continued to find it hard to verbalise his thoughts during the interview process so again attention has been paid to the symbolism of his play and his indirect comments made about his relationship with Simon and Chris.

Hopes (parents): For their part, Simon and Chris indicated "It's been really good and remarkably easy," with Chris expressing "we were expecting things to be a lot worse." They did, however, acknowledge there had been a couple of moments of uncertainty which will be elaborated on under anxieties. Simon, however, maintained "most of these happened in the first week, before he started school, when he actually started school things got a lot easier." Chris continued "we couldn't have asked for a nicer start to things really and it's getting better, we're getting to the part where we don't feel we're walking on eggshells, you know we've been firm with him and we've had to tell him off and he's reacted really well." He concluded "he seems very at home, very happy."

They see confirmation of Trent's settling in by his 'disguised' questions as to how long he will be with them, identified by Chris "he keeps asking how old will you be when I'm thirty, or how old will you be when I'm…?" Simon added "he's said when you die will I live in this house and look after (cat and dog) and your DVD's?" He had also, with what might be described as pseudo naivety, clearly been asking for reassurance, with questions such as "why is my name on this [his bedroom] door?" Chris further recalled Trent's comment "you know, no matter what I do, you'll still love me I think," which echoes what Trent had been told "we've said that before, I said to him no matter what you do we'll love you and you won't be moving out."

Although Trent's questions may be signalling to Chris and Simon that he is happy to be with them and is hopeful this will indeed be a permanent arrangement it may also be his way of assuaging his anxiety by gaining reassurance from them about the permanence of his placement.

It would appear that Chris and Simon had also been forging their sense of identification and connection with Trent. Simon identified that "he's got a good sense of humour, not that dissimilar to ours…*and*…he seems to like everything we do really." Chris added "it's been like almost a perfect match really." Chris further noted "he's fitted in really well and I like the fact that he does seem to like us, he's still quite young for his age and wants us around, he wants us to show him things and he likes to have hugs and that makes us feel as though we're more than just people who just look after him."

Hopes (child): The underlying theme of hope conveyed by Trent was his sense of belonging. His verbal responses were minimal, in as much that he indicated he was "happy" when he found out he was going to be placed with Chris and Simon and that 'things' had been as he hoped they would be. He also indicated he liked his new school and referred to it by name. In response to thinking about who he would talk to if something was worrying or bothering him at home he said in a matter of fact manner "I don't know, both of them."

Other, less directive references to Trent's sense of belonging came from comments such as "I've got two dads." He also identified Chris, who was waiting for him in the waiting room, by his cough. Hearing the cough he stopped his play and identified "that's Chris 'cause he always coughs." Later in the interview, and again in response to Chris's coughing, he informed me "he's coughing 'cause he's got a bad cold, he's really sick," he went on to identify with Chris "I've got a cough too," in response to my wondering "what about Simon," he indicated "yeah all of us." He further identified with Chris when he asked "am I going to be in your book, can I be in the book? 'cause when Chris was little he went in a book too." A further indication of his sense of belonging was suggested when he talked about a friendship he has established, and identified that after our meeting

he was going swimming "with my friend Sam…, I've got a friend called Sam and he's my cousin."

As indicated, attention has been paid to Trent's play in an attempt to understand his psychological and emotional experience. Trent again used the rescue vehicles in his play, however, this time there was a greater focus on people being rescued and saved.

Using the coast-guard boat he showed me the rope ladder that he indicated was "so they can be helped." Introducing the fire truck into his play he let me know "they are going to rescue someone." He introduced the life-raft into his play and said "this little man goes on the life-raft, he needs to get saved." He then introduced the fire truck and moved the little man into the fire truck and positioned him between the two fire-men saying [he] could "hop in the front here."

Perhaps of further significance to the analysis of the current situation is that at the beginning of this interview Trent hurt his finger on a toy and needed a plaster. As he completed the above passage of play he announced "my finger's not sore now" referring to the plaster he concluded "I can take it off now."

Anxieties (parents): For their part, despite the evidence offered by Chris and Simon confirming their assertion that things were going well, they continued to convey some anxiety that Trent may be unhappy with the arrangement, and disappointed at not having a mother. Although they attested to having a good start, Chris identified "the first couple of days were really, really easy and lovely and then we had a day when he cried quite a bit and went into the corner and curled into a ball and cried." They identified further examples of Trent's distress, recalled by Simon "the weekend before he started school he curled up in the car a few times, and went really quiet." In response to a question about what has been the most difficult thing, Chris acknowledged "I'd say the crying in the first week, we found that really difficult to cope with because we didn't have the answer..." For any parent, it is difficult not having 'the answers' to help your child, for new parents this is likely to be particularly difficult. For Simon and Chris, who prior to bringing Trent

into their family, believed they could rely on their experience to provide 'the answers,' this may be compounded.

They both suggested Trent's sadness was due to the loss of his mother. Chris recalled "he got a picture of his mum out and I said to him one night "do you want to talk about your mum?" and he said "yes". I said well you can if you want…*and*…he said, you ask me questions" so we played 'questions' and he asked me questions about my mum."

In relation to Trent's sadness at the loss of his mother they questioned the quickness of Trent's transitioning into the family and the fact that his visits with his mother seemed to stop abruptly and wondered if this had contributed to his demeanour. In relation to the transition, Chris suggested "it was a bit too quick, it seemed to be rushed through which was fine for us but I think they hadn't weaned him off the visits enough. He went from seeing his mum weekly for quite a period of time, I think for the whole time he was in care, then to having just two a month, so it almost stopped really suddenly."

They were also beginning to realise that Trent's connection to them could be described as 'indiscriminate' and borne out of his neediness rather than a secure attachment (Brisch, 2000), and that perhaps he would be likely to relate to anyone in the same way, and offered examples to support this. In response to Chris asserting that Trent "likes to have hugs and that makes us feel as though we're more than just people who just look after him," Simon tempered this with, "but saying that, after he'd been with us for about a week we went over to a friend's house and he was getting on as well with this family as he was with us and we realise he makes attachments to anyone, we thought that was strange." Chris countered this by mentioning their friend's assessment "he thought he was responding well to us." Simon continued his own train of thought "he was responding really well with us, but within ten minutes he was responding just as well to a complete stranger as well, so he will attach very quickly to anybody." Again Chris countered Simon's doubt "but I think we've moved on from that."

In terms of their relationship, like any first time parents trying to navigate the unfamiliar business of parenting they admitted they have had a few difficulties, described by Chris as "it's been **mostly** good…"

Anxieties (child): As mentioned, the main concern for Trent appeared to be about the permanence of his new situation. In response to a question about what has been the most difficult thing about coming into his new family he answered "I don't know, just the moving, it's just all the moving around, I don't like moving around." In response to my recollection that one of the things he had been looking forward to was having a new mum and that the situation had turned out a bit different, Trent didn't verbally convey any disappointment and announced "I've got two dads, three dads, Chris, Simon and…, but I don't see my other dad." However, his play may offer somewhat of a contradiction to his verbal response. He brought a police vehicle into his play and then searched through the figures and found a police lady which he included in his play, his dialogue became somewhat confused, perhaps reflecting his own level of confusion "hey, I'd say they're two police boys, two police men," in response to my comment "did you think there was going to be a police lady as well?" he replied with a curious tone "yeah."

Coping (parents): Chris and Simon continued to rely on their knowledge and practical experience as a way of managing their uncertainties. In response to Trent's obvious distress at times, they acknowledged they found his crying in the first week difficult to cope with. Chris, however, was able to fall back on his skills to create a 'questions about mum' game to ameliorate Trent's distress. In addition, they are attempting to further minimise Trent's distress by talking to the social worker about instigating contact between Trent with his mother and thinking of other ways they can assist him.

In regard to the issue of having two dads, Simon indicated "he doesn't bring it up really, he just sees Chris and myself as friends, but to him we're both parents, he hasn't really said anything about a mum." Perhaps in an attempt to fill this void Chris mentioned "he sees a lot of our friend Karen, I suppose she's the most maternal role that we've got for him, he really likes her…" Simon identified that Trent "talks about his dad quite a lot, but

he never asks for him, I think he's his fantasy figure, he's the 'best' at this and the 'biggest', taller than the door, but he's never said he's missing his dad." Returning to the issue of Trent's mother Simon, acknowledged "but he has been saying he's missing his mum for about two weeks."

They rely on routine and reassurance to convey to Trent his place in the family and the permanence of the arrangement, which according to Simon "he does need a lot of reassurance and asks obvious questions because he needs some reassurance." Chris added "we say things such as "because we're a family…" and we try to do as many things that we can to build a sense of family. We've booked a holiday and we talk about Christmas, we try to talk about things in the future so that he knows there's going to be a future."

When they talk about the difficulties that have arisen in their relationship Chris acknowledged "yes we've had minor disagreements, and we have minor disagreements whatever, whether Trent was here or not, that's normal family life. We talk things over and anything major we'd talk over, and it's only been small things, and I think we've both been tired."

Coping (child): It appeared Trent has continued to cope by indicating his acceptance of his current situation. He has been able to gain reassurance about the permanence of his placement in a variety of ways from Chris and Simon by asking questions about his future with them, and he appeared to have accepted the situation of having two dads rather than a mum and dad. In his interview he did not talk openly about the loss of his mother even though this has been the cause of much of his distress at home, and he frequently answered "I don't know" when asked questions about any difficulties he may have encountered.

In response to my recalling that he hadn't wanted to move from his previous care-givers because he was happy there, he denied this by saying "no, I wasn't happy there." Perhaps here we see Trent needing to differentiate between his last experience and his current

situation in order to suppress any emerging anxiety of a further potential move if he was unhappy with Chris and Simon.

Summary of Interview Two

This interview saw Chris and Simon continue to draw on their knowledge, experience and reliance on predictability of routine to provide Trent with a sense of permanence. Trent appeared to have accepted the situation, and had found ways to gain reassurance that this placement will be permanent. It would appear, however, that as the reality of the situation becomes clearer for Trent, which on the one hand may be a source of relief to him knowing he will not be 'moving on' it has also brought with it the realisation of the loss of his mother. This clearly appeared to be a source of sadness for Trent as he acknowledged he missed his mother. Chris and Simon seemed attuned to Trent's distress and have attempted to find ways to help him manage this. They have also become aware of Trent's propensity to 'attach himself' to any available adult, but they manage this in different ways. Chris suggested they have moved on from this, while Simon was more cautious in his assessment.

Interview three

Introduction: The final interviews took place approximately 3 months after the transition and to all intent and purposes it appeared things were still going well for all participants. In the main Chris and Simon remained optimistic about the future and did not voice any regrets about their decision to become permanent placement parents. Some issues in regard to Trent's behaviour had raised questions for them and they are finding the financial burden frequently experienced by new parents somewhat of a problem.

As in previous interviews, Trent was not able to answer all the questions put to him, he was, however, more animated during the final interview and appeared at ease with Chris and Simon. This level of ease was further witnessed during my final interview with Chris and Simon at their home. Trent was at home due to illness, he was not, however, present

during the interview process. Prior to my leaving he was very keen to show me his bed-room and his collection of Star Wars memorabilia. During his final interview, the theme of his play moved from the possibility of people being rescued to being saved.

Other developments identified in this final interview were that therapeutic assistance had been instigated for Trent and arrangements were underway for him to have a visit with his mother.

Hopes (parents): Chris and Simon continued to voice their optimism about their decision and the future, they identified that things were still going well and according to Chris "we're still waiting for the disaster to happen and it hasn't happened it's been remarkably easy."

Although they both acknowledged a developing bond with Trent they each experienced this differently. Chris conveyed his sense of a change in the relational bond with Trent evidenced by "he's given such an amount back to us that you feel…, I don't know if I feel like I'm dad or anything, but I feel a connection." Simon on the other hand suggested the feeling was more "like a family, No! I don't feel like a dad, I'm not quite sure what I feel like at the moment." Echoing thoughts he voiced in the previous interview he commented "we feel connected, but I think it is sort of that surface level really." Chris proffered his differing point of view reiterating an assertion made in the previous interview "I think it's gone beyond that now, initially it was very kind of surface, but he likes being around us…"

They both continued to hold on to the hope that they are providing a good experience for Trent and that he is benefiting from his connection with them. Simon identified the developmental progress Trent is making, and noted that Trent is "beginning to spend some time by himself whereas a few weeks ago he wanted us around all the time, he wouldn't want to be in a room by himself when he first moved in, he'd want one of us to be with him." Chris concurred with the assertion of Trent's developing autonomy and recalled other examples to support this. However, he also noted that Trent can regress

quite quickly when he becomes unsure "I think he likes to know where we are, last week was he was crying but it was because I was upstairs and he was looking for me and he didn't know where I was…, he can handle us not being there as long as he knows where we are."

Chris further identified "his social worker and lawyer were here and they noticed a big difference in him." Chris repeated his often spoken assertion that Trent "appears happy and settled and loves being here and he thinks of this as his home and I think we do lots of nice things that he hasn't done before." He added that Trent's counsellor also thinks he's making progress and concluded "it's a happy story so far."

Hopes (child): Trent only minimally voiced his optimism, but while he didn't overtly express his hopefulness his play indicated a resolve of people being rescued and saved.

Trent verbally indicated that things were going "good" and talked about his immediate future with Chris and Simon mentioning the upcoming holiday and the recent visit to the snow. He now identified Chris as dad and Simon as daddy and maintained he would go to either of them if something was bothering him and that he found it easy to talk to both 'dad' and 'daddy'. He further indicated that he thought Chris and Simon were both happy about being 'a new family'.

When I mentioned to Trent that I was aware that some special things were going to be happening soon, he immediately said with a smile "um, my mum?" after this was reflected to Trent he added "and [holiday destination] soon." When asked what he thought Chris and Simon might be thinking about him seeing his mum, he responded "happy," which may have been a signal of his hoped for response from Chris and Simon.

For part of the interview Trent again introduced rescue vehicles into his play and asked if I remembered what happened in the play last time, I acknowledged I did. He instigated a similar theme to his play. He picked up two people and decided they were fishermen and brought the coast-guard boat over to the sand-tray and put the fishermen in the boat and

suggested "they might go in this boat." He then spent time 'fixing' the boat and putting other people on the boat, talking through what he was doing. The symbolism of his play suggested the most appropriate people i.e. the fishermen are now in charge of steering the boat. Later on in his play he introduced two people and put them onto the life-raft, identifying these as "a kid and a grown up." The people on the life-raft were then rescued by the fishermen on the coast guard boat. It could be interpreted this play was a symbolic recreation of Trent's experience, the fishermen symbolically representing Chris and Simon, while the "kid and the grown up" on the life raft may represent Trent and his mother.

Anxieties (parents): Despite their optimism there were areas that had continued to concern Chris and Simon. In addition, there were some newly identified areas in relation to Trent's demeanour that they have questions about. Simon, in particular, had continued to notice Trent's indiscriminate attachment patterns and suggested "he'll bond with visitors in minutes the same way he's bonded with us." Chris further noted their observation of Trent's lack of affect "one thing we've noticed is the fact that when you tell him off or growl or something it doesn't seem to affect him, it seems like he's got a big defence mechanism…*and*…he's not allowing himself to get, or show, that he's upset." They discussed an incident that would have been distressing for most children to which Simon concluded "but he wasn't really upset about it or showed to be upset." Chris suggested maybe this was because "he's learned to suppress things 'cause he doesn't seem to get really excited as well." They identified that in the main, Trent's excitement tended to be related to the anticipation of an event rather than the event itself, for example 'thinking' about going on a holiday or having money to spend or getting mail. They further identified that the reality for Trent did not seem to live up to the expectation and anticipation. In relation to a recent holiday to the snow which Trent had been excited about, Simon identified "when we got there and physically stood on the snow there wasn't a show of excitement, he didn't seem to be that impressed." Chris further noted "he doesn't seem to get upset, there have been a few days when he hasn't done too well…" resulting in loss of pocket money, but "he doesn't seem to react."

A further area of some concern for Simon and Chris was in relation to Trent's social skills, which in some ways appeared similar to his indiscriminate attachment behaviour. Simon identified that although he thought Trent would be upset if the children at school didn't play with him he conceded "he may have problems bonding with kids in the long-term. I don't think he's got a best friend. When we pick him up from after school club he's always playing with other children but you never see him with the same person… *and*…the friend I mentioned before is a friend we've created, we instigated that one."

Chris and Simon had also noticed a change in their financial circumstances which has become a cause of some anxiety. Simon noted "there's no free cash" Chris elaborated "you don't realise…, and the money we get [from CYFS] goes on child care, we didn't expect it to be easy and we wanted to do this, but it is a bit of a shock." This realisation had been a consideration in making their decision in regard to taking additional guardianship which Chris identified they will do "at our pace, we want to make sure we've got everything set up for him." He continued "we feel Trent is ours now and if they decide to take him away I don't think it's in his best interest." Chris further conceded they have had some advice from other permanent placement parents who had indicated they should not "rush it, because while [children] are in the CYFS system, if you want something you get it, once you sign the forms it's a different story. Discussing future financial considerations Chris noted that although counselling had been put in place for Trent now, he stressed "it is all very well doing it now but who knows whether when he's 10, 12 or 13 he'll need something again." This seemed to be quite a concern for Chris who reiterated and elaborated what could be the underlying anxiety "it's all very well to settle them in but that's not going to set them up for life and there'll be times when they'll go back, we don't know what Trent's been through, but I'm sure there's going to be times later on when he's going to need…, he may even resent us or question what's happened, so we want to make sure we've got that sort of support there for him then..."

Although the question of Trent questioning or not accepting their sexuality was not a current concern for them, Chris did make reference to Trent's father who he felt "couldn't cope with us looking after Trent."

Anxieties (child): In regard to Trent's anxieties, the main area that seemed to be emerging for him is the change in his relationship with his mother. This was voiced verbally and symbolically in his play. In response to voicing my understanding that there were some things going to be happening soon, the first thing he mentioned was the upcoming meeting with his mother, which could suggest this is something very near the surface of his thinking. However, in response to my wondering whether he had been missing his mum he avoided this discussion by physically moving away from me. When referring to the differences about living with Chris and Simon and living with mum he identified "not having mum here." When asked whether he thought seeing his mum would make it easier or more difficult for him not being with her he didn't answer, instead he turned away and engaged himself in a hammer banging game. He banged very hard for about 2-3 minutes and then stopped and took a deep breath and said "it's really hard." He resumed banging and after another minute or so said "it's too hard for me." It could be hypothesised his statements were saying more about his situation than the game he was playing. I asked if it "gets a bit hard thinking about your mum and talking about not being with her?" to which he didn't verbally respond, however, it was at this stage he commenced the coast guard and life-raft play identified earlier.

Trent was not able to identify what he would say to other children who were about to transition into a new family and commented "I don't know really."

Coping (parents): Chris and Simon had continued to manage their uncertainties by calling on their knowledge of child development and professional experience to understand Trent. They frequently take into account his past experiences in an attempt to understand his current presentation. They had continued to look at the positives and possibilities in regard to the experience of permanent placement, particularly Chris who frequently focused on the positive aspects with a determination that this arrangement will

work out and be successful. Simon on the other hand, while in the main also focused on the positives, at times added a cautiousness that was overridden by Chris.

Calling on their understanding of children, Chris and Simon had observed that at times Trent functioned as at a much younger developmental level. Perhaps due to this understanding, or their opportunity to parent a 'younger' child, they take this in their stride. Chris mentioned Trent's bedtime routine which "he's got to stick to." Simon elaborated on the routine "he pretends to hide under the sheets, same thing every night and I have to tell him where I'm looking for him, its real baby stuff." Simon offered an evaluation of Trent's development "he speaks with a lot of innocence, doesn't keep things to himself whatever's on his mind comes out," Chris interjected with "he appears to be happy."

In an attempt to alleviate any anxiety that Trent's behaviour and presentation may be a response to the new situation he finds himself in, they suggested it was more likely to be due to his past experiences. For example, in response to their observation that Trent does not appear to show any emotion when he was 'growled at' and in response to my question what they made of that, Chris suggested "maybe he's had to shut down his emotions, maybe it's too hurtful to think about and his defences come right up."

Chris and Simon acknowledged that Trent did not talk much about his life before coming to live with them but that when he has, Chris commented "I think he thinks he has to 'think it was bad' with his other caregivers and he has to paint the picture it was 'such a bad time'… to make us feel we're the best caregivers." In response to their thoughts about why he would do this, Chris continued "he wants us to feel good…"

As indicated, Simon and Chris had been finding things a struggle financially, but they coped with this by approaching the Department for assistance. Identified by Chris as they "want to make sure things are put in place for Trent so we know he's not sort of left. We will get used to the money thing, but if we're entitled to it 'cause the child care thing will

be until he's 14…, I just think if Trent was in care it will be a lot more. You're looking long-term with problems that could potentially happen, it's better to put things in now."

With regard to how they were managing their anxieties about Trent's birth parents, they appeared to be feeling more in control of the situation. Chris talked about the contact they have with Trent's birth mother which had been instigated by them "we've sent her photographs of Trent with a letter and we got a nice little note back and it seems on the surface very, very nice and I kind of feel for her really." There did appear to be a continued degree of minimisation voiced as to the circumstances that lead to Trent being removed from his birth family, referring to Trent's mother, Chris suggested "I don't think she was ever mean to him, I think it's just the fact that at that point she just couldn't cope." He continued "dad's different, but if Trent needs to see his dad we'll always talk about it and he's able to ask any questions, I think it's good to be open, but we're not going to have to worry or think about dad for at least another year." Perhaps Chris's closing comment was telling in terms of an underlying anxiety?

In the closing part of the interview Simon and Chris returned to the issue of their sexuality and some expectation that this may have meant no children in their lives, and a barrier to being considered for permanent placement. They pondered the irony that it is still hard for a same sex couple to adopt a child compared to a single person which Chris suggested "is silly really 'cause you'd think if you're a couple there's more of a stable family background." He concluded "but we class this as adoption really there's not too many things which we can't do, we're his parents now, or will be his parents, he refers to us as dad."

Coping (child): Trent appeared to cope with his anxieties primarily by denying his sad feelings, particularly around the loss of his mother. He further anticipated that Simon and Chris would be happy about him seeing his mother. Given that Chris and Simon had noted Trent had been going to great pains to let them know they are the best caregivers, his longing to see his mother may result in a level of anxiety in relation to divided loyalties. He appeared to have managed the reality of having two dads with little overt

anxiety, as he identified very clearly who was dad and who was daddy, he also continued to identify with them in terms of 'belonging' as he discussed his recent trip to the snow with them. His play around the fishermen and the coastguard boat appeared to be symbolic representation, and perhaps a level of acceptance that the people who needed help had been rescued by the most appropriate people.

Summary of Interview Three

Overall, Simon and Chris had continued to hold an optimistic position that the decision to become permanent placement parents had been a good decision, which they had no regrets about. They had, however, become more aware of the difficulties of caring for a child, who has had multiple caregivers. While they identified a growing bond with Trent, they acknowledged his propensity to attach to strangers, reminiscent of an indiscriminate attachment style (Brisch, 2000). This was viewed differently by Chris and Simon, with Chris asserting he felt it was changing. They further identified Trent's lack of affect, which had been frequently mentioned in literature as a common feature of children who have been subjected to multiple care situations (e.g., Howe 2005). Chris and Simon each voiced their different psychological experience of their connection with Trent. Chris discussed his experience in terms of whether he was feeling more like a father, whereas Simon suggested for him it felt more like a family. Trent appeared on one level more settled and there was a noticeable identification with his new caregivers. In his play, which continued the theme of being rescued, the narrative moved from the need to be rescued to being saved. However, there appeared to be some indication that Trent was still finding the separation from his mother difficult, and a visit had been arranged.

Chapter Eight: Case Study Three

Participant profiles[11]

Parents: Julie and Dave are in their mid and late forties respectively, they have been together as a couple for eight years and married for 4 years. Julie is a dental nurse and Dave runs a successful manufacturing business employing twelve staff.

Dave is the second of four children with an older brother, younger brother and a sister. He described himself as being close to his siblings and has several nephews and nieces. As a child he was very close to his mother, who was described as a full-time mother, and he shares her love of the outdoors. His father was described as a "typical father of that generation" who worked hard to support his family. His father was several years older than his mother. Dave described his childhood as very happy.

Dave started his own business as a young man working from his family home, he left home in his mid-twenties at which time he expanded his business. He described himself as having a lot of commonsense, is careful, considered and down to earth, a successful business man and a 'people person' with a good sense of humour. He believed he and Julie had a good marriage but the one thing missing was a child.

Julie is the second of four children with an older sister and two younger brothers, like Dave, she described herself as being close to all her siblings and has a lot of contact with them. Her father, also like Dave's father, and other fathers of that generation, worked hard to support his family. Her mother was a 'stay at home mother' until the children were in their teens, at which time she returned to part-time work. Julie described her parents' marriage as good and that they didn't argue much. She felt she had a happy, secure childhood and that she could always talk to her mother. Julie left home at age nineteen and travelled extensively. She described herself as honest, loyal, a hard worker,

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[11] Participants names have been changed and all identifying data has been disguised.

caring and sensitive to others feelings. She was also aware at times she can be taken advantage of because she can be a bit too soft.

Dave described Julie as more impulsive than him but acknowledged that they have a lot in common, such as their similar sense of humour, and if they argue it is usually over small things and they take time out and come back to discuss things. They both come from strong Christian backgrounds and have similar values and outlook toward life.

Both Julie and Dave had wanted children and had unsuccessfully tried to conceive after being together for two years. They considered IVF but due to a medical condition this was not deemed suitable. They had wanted to adopt a child but this had proved unsuccessful and they now think their ages are against them for adoption. It was this assertion that instigated their thinking that an older child may be more suited to fit into their lifestyle. They feel they have made the transition in their thinking from having a baby or toddler to bringing an older child into their lives. They realise any child will bring a big lifestyle change for them but they are committed to adapting their lives to accommodate a child. Of relevance to this case is that Julie and Dave have several friends who are of Pacific Island ethnicity.

Child: The child moving into their family is Amy, who at the time of the fist interview was one month away from her eighth birthday. She is the second child of her birth mother who is Samoan and the first child of her birth father who is Fijian. Amy has an older half sister and a younger full brother, who are currently in care with extended family members. It was identified that Amy's birth mother has mental health issues and consequently unable to look after the children safely. Amy was first removed from the care of her birth parents' when she was three months old, due to neglect. She has had five foster care placements prior to the home she is about to move into with Julie and Dave.

Initially, Amy was in the care of family members for seven months and then was returned to her father's care. The arrangement with her father lasted for a period of 8 months until Amy was once again removed due to concerns about her wellbeing. She had a brief stay

in foster care before being returned to her father's care. At this stage Amy remained in the care of her father until she was 5 years of age, most of this time they lived an itinerant lifestyle. Then due to further concerns about Amy's wellbeing she was removed again and placed with CYFS care-givers. Amy stayed with these care-givers for ten months until she was placed with an extended family member. This placement continued for one year until Amy was moved into an alternative care-giving arrangement with another CYFS temporary care-giver. After a year in this placement, Amy's social worker referred her case to the PPU. At the time of the first interview Amy was still with her temporary caregivers and due to move in with Julie and Dave in one week's time.

Information from the CYFS file indicated that Amy had not had contact with her birth mother for over a year, but that she had continued to talk with her father by phone every second weekend. It was reported she would like to see her mother and sister.

Interview one: Prior to the transition

The first interview with Julie and Dave took place a few days before they were due to meet Amy for the first time, and approximately two weeks prior to Amy moving in. They discussed the process that lead to them considering permanent placement and how they found the application experience.

Julie identified "when we realised we couldn't have a child of our own, and we'd considered IVF but then we realised that wasn't going to work, we thought about adoption." They went through the formalities of applying to adopt a child but this had been unsuccessful, and as indicated, they came to the conclusion that this may have been due to their age. Suggested by Julie as "you know, we were probably a bit older… and then as time went on we thought younger people are more likely to be chosen." She talked about how they found out about parenting a child through permanent placement "we found out from the adoption people…*and*…we didn't even know this existed and we were really excited, well I was, 'cause you know it was like a second chance." Dave focused on the benefits for the child "it's harder for older children, most people want, or

expect, to adopt a baby, but there are children who have had a hard time, being removed from their family, who need a loving home and somewhere that's stable and they won't keep on being moved on."

Julie and Dave found the application process quite easy, which they suggested may have been due, in part, to having already been involved with the adoption arm of the service. They, like others, found that after the initial wait, that once a decision had been made to place a child with them, the transition process was much quicker than they expected, which resulted in some level of anxiety. Julie identified the realisation as "it's actually going to happen" and asking herself the question "'are we ready for it and are we prepared enough'?"

Child's process: Like the other children in this study, Amy found out that she would be moving into another family from her current caregiver, and when asked what she thought when she first found out she said "cool." She didn't elaborate on this, and when asked if she thought it was a good decision or not a good decision she responded sparingly with "I do." Of all the children in this study Amy seemed the most cautious in her verbal responses which will be evident throughout the interviews.

Hopes (Parents): The primary hope for Julie and Dave applying to become permanent placement parents appeared to be the opportunity to complete their family. Julie talked about their initial hope of having a child of their own, saying "I always expected to have children, like you do, don't you?" Dave concurred "you sort of think it will happen and then when it doesn't you have to deal with it."

Discussing the process of shifting their focus of having a baby, to bringing an older child into their lives, Julie indicated this had meant quite a big shift in her thinking "it's quite a big change thinking about having an older child who comes with their own personality and everything that's happened to them. Whereas [with] a baby you are there from the beginning and have more influence in their life." She was able to console herself by focussing on the positives "but you know it will be really nice having a little person who

still needs your input, and being older ourselves it might suit our lifestyle better." Dave concurred with Julie's thinking about an older child fitting better into their life-style "we like to do a lot of outdoors things and that's probably easier with an older child."

Hopes (child): As indicated, when Amy was asked how she was feeling about moving into a new family she responded "cool" but she wasn't able to elaborate as to what she thought would be 'cool' about it. Later on in the interview when asked what she thought it would be like moving into her new family she indicated "fun" again she wasn't able to elaborate. Similarly, apart from identifying that she thought it was a good idea that she would be moving into a new family, she didn't elaborate on why she thought is was a good idea. In relation to how she thought Julie and Dave might be feeling about her moving in, she indicated with a shrug "I don't know," she then went on to say, more as a question "happy?"

Anxieties (parents): One of the anxieties held by Julie was whether the child would like them, and, in some ways perhaps more anxiety provoking, would they like the child, pointing out rhetorically "what if when we meet her we feel that we just don't like her, or she might not like us, that would be awful." She consoled herself and tempered this possibility "I don't think that will happen, but you know I just get these thoughts in my head..." Aware that Amy liked the family she was currently with, and had been with them for about one year, Julie acknowledged "she really likes [current caregiver] and likes her school and is settled there and this is going to be another big upheaval for her." Julie's anxiety seemed to escalate as she conceded "and there aren't any children around here that she can play with."

Dave identified a further anxiety in relation to whether Amy would 'fit' into their family "I'm thinking about her (physical) size, with her cultural background, she could be much bigger than us and I wonder how that will be especially as she gets older, that's something I've been thinking about."

Like other parents in this study, an area that elicited a level of anxiety for Julie and Dave was the prospect of managing adolescence identified by Julie "Amy is only eight but you do have to think about when she gets older and what it will be like when she's a teenager, it could be quite hard then, probably harder than with a child you haven't had from a baby." While Dave concurred with this, he also highlighted "but there's still a few years before we have to face that and by that time she will have been with us and she will have had our influence." As Dave talked Julie's anxiety seemed to decrease as she nodded at his pragmatic approach and calm manner.

Anxieties (child): Amy gave some insight into her anxieties both verbally and non-verbally. She conveyed her anxiety about who might be privy to the information I was gathering. In particular, she seemed worried that her social worker would be provided with the information, which perhaps offered some understanding in relation to her cautious / guarded responses. When asked whether her social worker had explained why she was coming to see me, Amy indicated "mmmnno," however, when I went through the procedure with her it was evident she had been given this information as she was able to tell me the number of times she would be coming to meet with me. I wondered whether this was her way of ensuring she would provide just what was required and not say anything that might jeopardise the upcoming placement.

Several minutes into the interview Amy asked, in relation to the venue we were using "are there people in here at the moment?" My sense was that she was anxious about people hearing us and reassured her that nobody could hear us and discussed the terms of confidentiality. She then asked "what about [social worker]?" again I reassured her that I would not be talking to her social worker or anybody in CYFS about what we talked about and that I'm not involved in the Department in any way or had anything to do with the decisions made by the Department. Amy continued, perhaps demonstrating the depth of her anxiety "what about your boss?" again I attempted to reassure her by letting her know about the person I would be talking to about my writing and the role of that person, which seemed to settle her anxiety somewhat. She did, however, continue to be cautious in her responses, and frequently appeared to minimise and manage her anxieties with a

smile or giggle. In response to a question in relation to her feelings about leaving her current school, she indicated this was "kind of sad and kind of cool." She was able to acknowledge that the "sad" part was because she will have to leave her teacher who she liked, but she couldn't then identify the "cool" part. She did, however, offer some further insight as to what it might mean for her, as she acknowledged she had been to several other schools, and expanded "but when I go to a new school I'll be shy," and that she "doesn't like playing with people." It is possible that Amy's responses were an indication that she is worried she will not make new friends, or a ploy to keep her self socially isolated either to avoid questions about her family situation, or the further disappointment of forming relationships that may not last.

When asked about the number of families she'd lived with, Amy was at first vague and then said with very little expression "ummm, three or, oh! four I think, about five I can remember." Five is accurate, which indicated she was aware of her journey to date, however, from the way she conveyed the information, the importance of it is somewhat minimised. This may have be an indication of the way Amy has learned to cope with the reality of her situation and provided further insight to her anxiety. That is, here she was about to leave yet another family to enter another situation which once again may prove to be a temporary measure. Her unwillingness to think 'too deeply' about her situation was perhaps further highlighted in her response as to what she is looking forward to the most about moving in with her new family, as she responded "Christmas, that's all I can think about," and perhaps an indication that she doesn't think too far ahead in terms of family. Amy did not appear to have much information about her new parents. She could not remember anything she had been told about them, including when she would be meeting them, which again may have been her way of not letting herself be too interested in the prospect of permanency.

Coping (parents): In order to manage their anxieties Julie and Dave focussed on the things they believe will support them in caring for Amy. They had made a decision that Julie would take three months leave from her job so that "I can be there for Amy and help

her to settle." Julie also felt this time was necessary for her to "understand Amy… what she likes and doesn't like," so that she could be a "good mother."

The couple also identified the support they were likely to get from wider family members. Julie suggested "everyone's really excited and have offered to help. I know I can just ring someone up and they will be there." Dave concurred "we're both close to our families and they've got kids so I don't think that will be a problem." He further discussed Julie's anxiety in regard to the lack of children locally in terms of Amy making friends, and identified "she will have lots of cousins and we've got lots of friends who have got children."

Although they had both indicated an older child may fit better into their lifestyle, they were aware having any child is likely to require changes, but did not see this as a major concern and likened it to all parents having to make changes to accommodate the needs of their child. Dave suggested "there will be changes, but I don't think it will be as big as having a younger child," Julie noted "our friends and family have got older children so in some ways that will make it easier."

Coping (child): Amy coped with her anxieties by being cautious in her responses, and by exuding a sense of self-reliance. When asked if she thought there might be anything that could be a bit difficult or tricky about moving into a new family, in her matter of fact manner she replied "um no, I'm used to it." Similarly, she minimised her sadness at leaving her current school where she is happy with the assertion that "it's kind of sad, and kind of cool."

Amy's non-verbal communication perhaps offered more of an insight into her thoughts and feelings. She spent much of her time working with clay and constructed a robot, which seemed to symbolically reflect the emotional distancing she seemed to use in this first interview. This way of coping was perhaps not surprising given that Amy has had little experience of controlling what happened to her. She may feel that it works best just

to do what she needed to do without question and had learned to protect herself psychologically by repressing her wishes and feelings.

Summary of Interview One

Julie and Dave appeared to have reconciled the loss of their dream of having a baby and had readjusted their thoughts to parenting an older child. However, they appeared to harbour anxieties as to how the experience would work out in reality, and fundamentally whether they would all like one another.

On the surface Amy did not appear to have any expectations of the new experience she was about to enter. She did not seem to have much information about her prospective permanent parents, or to have thought too far ahead, in relation to how this placement may work out. In contrast, however, an underlying anxiety was detected, indicated by Amy's questions about who would be privy to the things she and I talked about. This perhaps demonstrated her fear that she may say or do something to jeopardise the prospect of a new permanent home and family.

Interview two

The second interview took place with Julie approximately one month after Amy had moved in with them. Dave was unable to be part of this interview due to work commitments, but where necessary Julie felt she was able to speak on his behalf. While some of their initial anxieties had not been realised, others had emerged for them. Overall, however, they appeared to coping well with the challenges they had faced.

The second interview with Amy took place two weeks after the meeting with Julie. Again Amy was very self-contained throughout the interview and continued to be cautious in her responses, if anything, she was more guarded in what she offered in terms of her verbal responses.

Hopes (parents): One of the concerns Julie had held prior to meeting Amy, which had been a cause of some anxiety, was the possibility that they would not like Amy or that she would not like them, had not been borne out "we saw her and thought 'oh my goodness' she was just so loveable and it went really well, she was really shy and then she kind of thawed out a little bit…, she came over for the weekend and that went really well and then when she moved in …, it was good."

In response to whether it had been as they had expected or hoped, Julie remained positive "probably better, she's got so much personality, she's just so much fun to have in your home she's just an absolute delight." Asked what she enjoyed most about Amy she mused and identified again with laughter "gosh, everything you know, the funny things she comes out with, her little laugh, just her enjoyment of everything, she just enjoys everything and always wants to do things and she's just so bright."

The other side of their initial hope, had been the associated anxiety as to whether Amy would like them and here again their fears had not manifested. Julie identified with a laugh "I think she likes us and we've asked her, we've said "is it good living here?" and she said 'yep' and we asked, "do you like being an only child?" and she said 'yep,' so yeah, I think she's happy," Julie lowered her voice as she repeated "I think she's happy, it looks to me like she's settling in, she's settled, she has settled in." She continued "'cause she's said she feels comfortable, I know she's comfortable around me, she likes it when it's just us, she loves it when it's just us."

With regard to friendships and Amy settling into the family Julie identified "after the first couple of weeks she seemed to have settled in really well." She further identified "she's become good friends with my little niece Jenna which is really good. They've played together all holidays…" Julie discussed her hope for this friendship "I'm thinking that Jenna will be a constant in her life and it's good she's got that one person." Julie went on to talk with delight about one of the 'firsts' for Amy. They had arranged for Jenna to stay overnight "it was her first sleepover so that was really good," and described again with a laugh "they were giggling until 2.00 in the morning." The sense conveyed was that Julie

was hopeful that Amy was experiencing a 'normal' childhood and that they will able to provide this for her. Furthermore, that as parents, they are experiencing something they had almost given up hope of ever experiencing.

Julie concluded, perhaps like all new mothers identifying and comparing their baby with others, "I think we got an exceptionally good deal, I mean maybe all the other children aren't as good as her."

Hopes (child): The second interview with Amy saw her again resort to minimal verbal communication as she primarily offered monosyllabic responses to my questions. It appeared that her responses were more in line with coping with her unspoken anxieties. She did not verbally identify any sense of hope in relation to the developing relationship with her new family. Nor did she offer any sense of real connection with her new parents, which paralleled her time with me. Although she appeared at ease and engaged with me she offered very little of herself. When asked a question about how she was settling in and how things where working out she responded with "I don't know" this was often said with an exaggerated tone which gave the impression she did not wish to continue the conversation. When she was presented with purely factual questions, such as when she was due to start school, she appeared far more at ease and was able to answer. However, whenever an emotional component was introduced she would again resort to "I don't know," or diverted from the conversation by focussing on a game or activity.

Anxieties (parents): Several areas had arisen that appeared to be the cause of some anxiety for Julie and Dave. One of their major concerns was in relation to Amy's social skills, both with adults and other children. Julie talked about her concern that Amy does not seem to have established any friendships at school, and while this seemed to be a pattern for Amy, who has indicated she likes to play by herself, Julie was beginning to see it as a potential problem. She discussed her attempt to help, by suggesting to Amy "maybe you should hang around the other kids and try to play with the other kids" to which Amy responded "oh, I like playing be myself." Julie further identified the things that had been put in place at school to support Amy, but conceded that these hadn't been

successful due to Amy's lack of cooperation. Julie acknowledged that Amy herself did not appear to be worried about this issue but it was clearly something that was on Julie's mind as she noted "it doesn't seem to worry her whereas it worries me."

Julie discussed other instances they had noticed where Amy appeared to struggle in her social interactions with both children and adults "we're finding socially she's naughty, she's actually worse in front of people, I don't know if it's her way of rebelling because she's had to meet so many new people again…, but she does play up when there are visitors or when we're at someone's house." In an attempt to understand the possible reasons behind Amy's behaviour Julie speculated as to whether it was linked to jealousy. She described an interaction with another child who Julie has a close relationship with and identified "sometimes I can sense there's a little bit of jealousy, just a little bit with me, when Carrie was here [Amy] got upset because she felt Carrie was getting her own way all the time and she came to me and said "it's not fair we always have to do what Carrie wants" and I could see what was happening and had to explain that Carrie was a guest in our house."

It would seem that an overall change in Amy's demeanour had become evident, particularly in relation to Julie, who acknowledged "I feel in the last two weeks she's actually started to be very naughty with me, not doing things I ask, ignoring me. I'll tell her to do something and she'll turn around and do the opposite, so we've had to talk to her, but even telling her off didn't seem to work." Julie identified the difference between how Amy interacts with her and Dave, and suggested with a laugh "she's worked out I'm the softy and Dave's non-nonsense, you know Dave says jump and she'll jump, whereas me, she doesn't, in fact she'll totally ignore me."

Another area that has been the cause of some concern is Amy's self reliance, and how she managed her sadness, or how she reacts when she is hurt. Julie offered examples to illustrate this. Just after Amy moved in, Julie discovered all was not well "when she moved in I would go in and check her in the night and she had wet cheeks and I knew she'd been crying, it was really upsetting. I think she puts on her happy face in the day

and cries at nights, which I found really upsetting." Julie gave another example which seemed to be painful for all of them. It did, however, provide an opportunity for Julie and Dave to gain some insight into Amy's world and how she attempted to manage this by herself "the worse day was after she'd been with us for a week and she finished school, [the school she had been attending for approximately a year] that was her worst day, she cried, she actually cried in front of us, even though she didn't want to but she couldn't help herself and when I put her to bed that night she cried again, it was so heart breaking." Julie offered her understanding of this "she'd lost everything, she'd left everything, everything she loved, because she loved that school and she loved [caregiver]."

In relation to Amy's resilience when she is hurt physically Julie identified, "gosh, she's tough…, there was one time when she put her finger in the door of my car, I didn't jam it but did sort of hit it and that is painful but she didn't even cry, I tried to hug her, but she goes away if you try to hug her when she's hurt herself…, she doesn't come for cuddles when she's hurt herself."

With regard to the changes in Julie and Dave's relationship, Julie didn't feel this had raised much cause for concern. However, there had been times when she had wondered whether Amy's jealousy of others, including Dave, receiving more of her attention was a potential cause for concern, as she noted "there were one or two instances where I wondered if she was trying to [get in the middle of them]." Julie continued, identifying that bed-times are a particularly difficult and very time-consuming process, which had resulted in less time for her and Dave to spend together "we do have our time together but it's not very long, with all her stalling it might be ½ an hour that we have together, and in the beginning it was none, I sort of felt like I hadn't spoken to Dave for ages…"

Anxieties (child): Amy's guardedness suggested she had some level of anxiety which was difficult for her to discuss. It became evident during the interview that she had developed a number of strategies to help her cope with her anxiety or emerging anxiety, primarily by avoiding thinking and talking about her concerns or by minimising the

effects and focussing on the opposite reaction. She indicated that nothing had been 'worrying' since she had been with Julie and Dave, however, she did acknowledge with an "mmm" that moving in with a new family "can take a bit of getting used to." Amy would not be drawn by questions related to how things were different or how she was getting on with Julie and Dave.

Her anxiety surfaced a little when, after she had been able to answer the factual question of when she was starting her new school, was then asked how many schools she had been to, to which she replied with a nervous laugh "I don't know," when asked whether it was a lot, she replied "yeah." Anxiety was further signalled when asked what she thought Julie and Dave would say was the best thing they like about having her live with them Amy answered "I don't know." When pressed a little further as to what she thought Julie liked about having her with them she replied "I don't know, I don't know her thoughts." Perhaps it is too anxiety provoking for Amy to dwell on any thoughts, either her own or others, that may in any way connect her to any thoughts of the potential loss of yet another family.

Coping (parents): Despite aspects of Amy's demeanour and behaviour that have resulted in some anxiety for Julie and Dave, they appeared to be able to cope with this in a variety of ways. Julie had a tendency to laugh at the difficulties to lessen her anxiety, while Dave is more pragmatic in his approach. They are establishing family rules and both give considerable thought to what Amy's experience might be like and wherever possible attempt to find ways to alleviate her distress.

When faced with Amy's potential unhappiness and withdrawal from social contact Julie accepted what Amy says, that is, that she likes playing by herself. However, when faced with Amy's obvious unhappiness which resulted from the realisation that she was leaving the school and the caregiver she had been with for the past year Julie contacted the social worker and arranged for Amy to speak with her previous caregiver "I spoke to the social worker because she was missing [previous caregiver]..., so finally we rang and she spoke to her and after that she was fine."

With regard to Amy's emerging anti-social behaviour and her tendency to ignore Julie, they have introduced 'family meetings', identified with a laugh by Julie "we had to sit her down in a family meeting, she didn't want to, but we sat her down and talked about it," letting her know that even if she doesn't like someone "she's got to be polite." Julie had attempted to understand, and make allowances for Amy's lack of social skills, by thinking about how her past experiences may have influenced how she operates in the world "I think she's moved on so many times that she thinks what's the point of making friends, she's never made friends because she's always on the move and maybe it's like they say in the course, maybe she doesn't want people to start asking questions." Julie further identified what she had said to Amy to help her manage this potential difficulty "I've said to her if anyone asks why your mum looks different from you just say you're adopted, end of story, that explains everything, no more questions." While this may be a practical way to help Amy address the situation, perhaps it does not fully take into account the level of anxiety Amy may be holding in regard to this issue.

The initial anxiety voiced by Dave prior to meeting Amy in relation to the 'fit' of Amy into their family, is commented on by Julie "this hasn't been an issue, no she's just so adorable, and no, it's not an issue yet, isn't that funny because we know she's going to be tall and that's it." Although Julie and Dave had both become positive about Amy fitting into the family it may have been more of a struggle than they all would like to acknowledge.

Julie and Dave are putting much effort into trying to understand Amy's behaviour in terms of developmental stages. Julie recalled the information they received during the training course and identified "they did talk about developmental stages and how they can regress and it's actually a positive sign if they regress…, and they warned us they were going to push boundaries and they'll push to the limit once they feel safe, so Dave and I were saying well that's going to be really good when she pushes the boundaries because we know she's feeling safe." They also remind themselves that Amy is only eight years old "she looks older and at times she acts older so you automatically start thinking she's older but…, we've got to remember she's only a little girl."

Despite the fact they have encountered some things that they are aware may take time to resolve, Julie and Dave had remained positive about the future. In regard to thinking about any aspects of the experience they have felt disappointed about, Julie adamantly responded "No, no, nothing, no disappointments in [Amy] not so far."

Coping (child): As indicated, Amy copes primarily by avoiding and distracting from questions she doesn't want, or perhaps doesn't feel able to answer, or possibly even think about. She seemed to 'lose herself' in board games and used the content of the play to distract from, and avoid answering questions, and frequently said "pardon" when asked a question. The times she did answer, she seemed more relaxed with factual questions and tended to keep her answers factual. For example she was clearly able to identify how long she had been with Julie and Dave and when she would be starting her new school, but was less willing to talk about anything that had an emotional aspect to it.

At other times, she would promote an opposite emotion or highlight an aspect of herself that is 'capable' and self sufficient. When playing a board game, she suggested with a question-mark "I'm very good aren't I? I haven't played for ages." Although this could be interpreted as a sign of confidence in her abilities, from her demeanour it appeared to be more of a request for re-assurance. In contrast to this need for reassurance, Amy tended to cope by being self-reliant and when asked who she would go to if she had any worries or needed help, she replied "I don't know, no-one." This response seemed to echo the assertion made by Julie.

When asked what she liked best about being with Julie and Dave, Amy identified with a brief 'embarrassed' laugh "they are not really strict with me." In response to what she thought it has been like for Julie and Dave since she moved in with them she replied, again with a slight laugh "fun," however, she wasn't able to elaborate and identify what had been fun.

Sensing my questions where making Amy feel uncomfortable I kept them to a minimum and for the last part of our time together we concentrated on the board games Amy chose

to play. During this time Amy suggested on several occasions "I'm trapping you," and "I've got you" which mirrored my experience of feeling trapped as I attempted to gain a sense of her psychological and emotional experience, and resulted in me becoming immobilised to the point of not wanting to continue with my questions. Amy's distraction and avoidance appeared to serve her well in terms of coping with a potentially anxiety provoking experience.

My experience of being with Amy during this time, as she 'lost' herself in the board games was of being kept at arms length, resulting in feelings of isolation and loneliness and wondered if this was a reflection of Amy's unspoken life experience.

Summary of Interview Two

The concerns held by Julie and Dave prior to transition had not appeared to have been realised. Julie seemed enamoured with Amy and voiced her thought that she felt Amy was happy being with them. While Julie acknowledged that overall things were going well, she further identified that some of Amy's behaviour had become problematic as she had been exhibiting some oppositional behaviour, similar to that described in the literature (Glaser, 2002) Julie and Dave have been looking for ways to ameliorate this behaviour and had established family rules, and have put much time into trying to understand Amy's behaviour. A further area that seemed to be of some concern is Amy's self reliance and the fact she doesn't accept help. A further realisation was voiced by Julie, in relation to Amy's incongruence of affect, identified by the example of her ability to exhibit a happy demeanour, which was at odds with the tears that had been cried, after she had gone to bed.

Amy was very self contained during the second interview, if anything more so than in the first interview. She appeared more comfortable with factual questions, which left me thinking perhaps it was too difficult for Amy to dwell too closely on anything that was likely to connect her to her emotional experiences. It was perhaps her unspoken

communication that offered insight into her emotional experience, experienced by me as a feeling of disconnectedness.

Interview three

The final interview with Julie and Dave took place nine weeks after the second interview, at which time Amy had been with them for three months. During this time Julie and Dave had experienced some confusing aspects of Amy's behaviour that at times they had found difficult to understand and manage. They began the interview by identifying the differences in how each of their relationship with Amy has developed. Dave identified that for him "it's probably slower than Julie." He is philosophical about this and suggested it may be because Amy had a closer relationship with her birth father and referring to himself as the 'guardian father,' suggested "it's going to take a little bit longer [for Amy] to swap from knowing that father to a guardian father."

The final interview with Amy had taken place two weeks prior to the meeting with Julie and Dave, during which time Amy was again cautious in her responses using her familiar coping strategies. However, as the interview progressed she became more forth-giving with her inner thoughts.

Hopes (parents): Julie and Dave continued to voice their hopes that the experience of taking Amy into their lives would be a positive experience for all of them. They identified several aspects that have been working well or were beginning to develop. With regard to their individual personal relationships with Amy, they acknowledge there are differences in how Amy related to each of them but they understand a possible reason for this and do not see it as an obstacle. Dave identified that his relationship with Amy is developing at a different pace to that of her relationship with Julie, but suggested "you just notice little things, she'll sit close to you when you're watching T.V., it's happening at a slower pace."

Julie described her relationship with Amy as "really close, it's wonderful…, just in the last couple of days she's started being silly and calling me mum, but in a silly voice and I'm thinking is she starting to get used to the sound maybe?" Julie continued "like last night she said, "hey mum can I have a…, and then she went "mum, mumma, maaa, like that, and I thought "oh! maybe she's testing it out" and that's the second time she's done that."

They are hopeful Amy is feeling settled with them and not missing her 'old' life, as identified by Julie "on the odd occasion when she's remembered something about her dad I've said "do miss your dad," she's said "not at all" then that's it, end of conversation."

Julie voiced their hope that Amy can make friends, and turned her thoughts to Amy's start at school "the first couple of weeks she played by herself and then she came home all excited, saying "I've got friends"…, then she got invited to a birthday… she was so excited." Apparently Amy had also maintained a friendship with Julie's niece Jenna which seemed important to Julie, as she identified "they play so well together, they're really good buddies and she fits in well when we go over there." They were also hopeful that Amy was beginning to respond to them as parents and heed their instructions, they discussed a recent family outing to which Julie commented to Dave, "she was good, she was good that night," to which Dave concurred. They were also very pleased that they had received a positive response from the parents of the child whose birthday party Amy attended, as Julie noted "they said she has been very polite… that she was really good."

Julie identified her belief that overall Amy was happy "she's happy, she loves school and she's always happy when she comes home from school." Despite Julie's earlier identified hope that Amy will make friends, she moderated this by suggesting it was not a cause for concern "I think she doesn't mind playing by herself, she's probably always done it, but it's no big deal."

In response to thinking about what they are enjoying most about having Amy with them, Julie seems enamoured with Amy and identified "I just enjoy her personality, she's just a

breath of fresh air that comes through the door, I can't wait for her to get home, you know, you're sort of looking at the clock and at 3 o'clock I think one more hour, so yeah I really enjoy her, I really enjoy her being here. She just livens up the house she's lovely, a lot of fun."

While Dave was less effusive in his response, he did convey just as much optimism as Julie, as he commented "there is no way I would want to turn back the hand of time, one, two, three hundred percent, it's certainly made a family for all of us, for her and for us." He further identified "it's good to help a little child that's had a bad start, a very tragic start, it's gorgeous to have that privilege, it is, and she's a lovely girl." In response to the difficult aspects they had encountered he maintained "those troubles fade away very quickly" and concluded "you can't buy that sort of pleasure, you just don't buy that… we're just enjoying it."

Hopes (child): Amy in her now familiar way was less vocal in identifying her hopes for this relationship. She was however able to indicate she thought she would "be staying" with Julie and Dave. In response to the reason for this she ventured "because I like them." With regard to how she thought Julie and Dave might be feeling she indicated "good." When asked what she thought they thought about her, unlike the last time we met when she wasn't able to identify anything, this time she tentatively suggested "um, maybe they like me."

Anxieties (parents): Despite their obvious pleasure in having Amy in their lives, Julie and Dave both focussed quite a lot during this interview on Amy's 'testing' behaviour and how as a couple they had handled it. Julie identified "she's still pushing the boundaries, which I think is normal, but [we] are having our discussions, 'how do we cope, how do we handle it' we both have different ways of handling it," as Julie mentioned this she looked over to Dave and laughed.

Julie conceded that bed-time continued to be problematic and described what happened the previous night and suggested this was a typical example. She suggested that Amy had

no intention of going to bed "she wasn't going to bed and that was that, it was No! No! No! and it became a big palaver." They discussed their different thoughts about how to manage the situation and acknowledged that at times it is by trial and error.

Later on in the interview the issue of bed-time, and defiant behaviour re-emerged as Julie and Dave discussed ways of handling Amy's uncooperative behaviour, to which Julie conceded "I think she's better when I'm not here" and directed her next comment to Dave "don't you think?" Julie elaborated and identified she was recently out for the evening and "I rang at quarter past eight and she was in bed…, she's never in bed at a quarter past eight when I'm there [spoken with a laugh] and I'm thinking is it when I'm there that she plays up? I don't know."

Julie identified her biggest anxiety is how they will manage the teenage years and predicted "I still have this fear, I think the teenage years will be our biggest challenge, it probably is with every parent, but I imagine the teenage years are going to be really difficult because of the past…"

Anxieties (child): Unlike the previous interviews, this meeting with Amy seemed to reveal some deep-seated anxieties.

Although Amy wasn't able to talk directly about 'her' anxieties, she was able to identify what she would tell 'other children' about what it's like coming into a new family. In response to this question Amy identified "it's kinda sad" going on to elaborate "'cause you've got to know them." It seemed evident she was talking about leaving her previous caregivers with whom she had been with for almost a year. She responded to my reflection that when this happened a few times maybe some children might think it's going to happen every time, by commenting "yeah, maybe."

Amy was asked what other things she would tell other kids and responded "that you wouldn't want it to happen." In response to telling children why you wouldn't want it to happen, Amy indicated "'cause it's sad." When asked what she would tell children about

going to live with people you've only just met, Amy was able to acknowledge "scary" and when it was suggested that this might be because "you don't know those people and what they're like and what sorts of things they do," Amy responded with "I like Julie and Dave now." I wondered out loud if "there was a time in the beginning when you were a bit unsure if you'd like them?" Amy responded "yeah."

Amy was able to identify her faith in her social worker by indicating that if she didn't like her new parents she could tell [her social worker], however, when asked what her social worker would do if this was the case Amy acknowledged "I don't know."

When Amy was pressed for her further insight as to what it would be good for other children to know, she called an end to this dialogue with her response "I don't know, I'm not really thinking about that." Perhaps reflecting this was as much as she could manage in terms of identifying possible anxieties for children who found themselves in the situation Amy herself is in.

In addition to Amy's verbal contribution, her non-verbal communication has been taken into account in an attempt to understand any unspoken anxiety. An aspect of Amy's symbolic play that may provide some insight into her anxiety about being in her new family is her 'dress up' play. She picked an outfit and asked "shall I try it on?" The outfit she chose was slightly too small for her and which was identified as "see I knew I wouldn't fit it." It was interesting she used the phrase "I wouldn't fit it" rather that "it doesn't fit me" perhaps this reflected symbolically her unconscious anxiety of not fitting into this family in a similar way she hasn't 'fit' into other families. Amy's anxiety increased as I tried to help her fasten the outfit, and she responded, in relation to the outfit, and more to her self than me "I'll try not to break it." The fasteners on the outfit popped open and Amy responded "oh, well it doesn't matter." She reiterated "I don't really look good, 'cause I don't fit it," then removed the outfit.

Amy had been quite active and interactive during this interview but also seemed restless and unsettled as she moved from one activity to another. I commented that she couldn't

decide what to do, to which she replied "mmm, considering it's the last day, it's like I've spent the whole day looking for stuff." I found this comment particularly interesting as, of all the children interviewed, Amy seemed the least involved in the process, but here she was clearly letting me know she was aware this was our last time together. In addition, out of the blue, after our dialogue during which I clarified her thoughts about what children needed to know, she asked "so when am I going to see you again?" She then asked "do you like saying goodbye to people?" Again I found this direction of dialogue interesting and wondered if our last time together was evoking in Amy her previous experiences of endings and loss of relationships.

Coping (parents): While Dave acknowledged his relationship with Amy is 'still developing' whereas Julie and Amy appear to have a closer relationship, he managed this discrepancy by referring to it as the male / female experience "it's probably slower than with Julie but that's a typical guy thing and obviously Julie's been spending a lot more time with her because she's had time off work…, but that'll come in time and you can't, you don't rush that, you can't force it..." He suggested this is how he expected it would be, particularly in light of the fact Amy had been close to her birth father, he thoughtfully considered "she's got to have time to relinquish that father a little bit… *before she can accept her*… new guardian father." In response to Amy's ongoing attachment to her father and whether she talked about him, Dave acknowledged "in the beginning, which was expected, but not now she doesn't come up with, "I wish I could see my dad," she doesn't even talk about him. Julie concurred "she hasn't mentioned him in ages [and] on the odd occasion when she's remembered something about her dad, I've said "do you miss your dad" and she's said "not at all" and that's it end of conversation." They appear to understand this as a sign that Amy had been able to disconnect from her attachment to her father, which perhaps is a way they can cope with any residue distress that Amy may be experiencing at the loss of her birth parents.

In order to cope with their anxiety in regard to Amy's poor social skills, like other parents in this study, Julie and Dave try to understand what might be behind the behaviour. When discussing Amy's apparent lack of understanding of other people's feelings Julie linked

this to the disruption to Amy's development and identified that "she was removed when she was about four years, so that's when all her problems started, that's when she would have started swapping homes" Julie conceded that at times Amy's behaviour resembled that of a four year old.

Despite some obvious difficulties, Julie concluded any discussion about parenting difficulties by holding onto the positives of having a child. It almost seemed she was not going to allow anything to spoil her 'longed for dream'. She frequently minimised difficulties with comments similar to the following example "I think that's been the worst, her cooperation, otherwise she's wonderful, I mean she's lovely you know." Dave is able to pick up on Julie's enthusiasm and minimisation "yeah, I mean that behaviour thing with bed, what kid doesn't do that?"

Dave reframed Amy's oppositional behaviour "we've got to channel that determination into greater things, it's a great asset, you watch her trying to play sport or build something, nothing will faze her…, yeah it's a great trait in life."

The way they manage the anxiety related to the inevitable teenage years, Julie suggested, albeit with little conviction "all we can do is just set a really good firm grounding for the next four years…, and just hope that everything is okay." Dave again brought in the alternative view "not every teenager goes through a horrible testing time for parents." With this, Julie seemed able to regain her positive stance "no, and we won't know till we get there."

Attention is draw to the difference in culture and whether anything had come up for them that they felt unsure about or had found difficult. Julie stated it had not caused any concern for either them or Amy, and indicated "we asked her if she wanted to learn [her native language] and she said "no"," Julie conceded however, that "at times she'll sometimes dance [native to her culture] and I asked if she wanted to have classes, she said, "no" so I don't think it's a problem." She further identified that she doesn't anticipate any difficulties for the future with regard to cultural differences.

Coping (child): Throughout the final interview Amy offered several examples of how she is coping with her new experience. It would appear she has used these ways before and has become quite adept at managing situations that cause potential anxiety. These strategies, while helpful in preventing anxiety, may also suppress thoughts and feelings that could emerge later in life.

In addition to her verbal responses Amy continued to display the non-verbal coping mechanisms she had used throughout the interview process, primarily using distraction when she didn't want to answer a question, or perhaps think about what had been asked, and like her new parents she minimised her distress, at times using laughter to distract from the underlying anxiety.

When she indicated she thought she would be staying with Julie and Dave this was bolstered by a laugh, as she explained the reason for this was because she liked them. Amy's known history has identified that she has 'liked' other people she has lived with but this had not resulted in her continuing to live with them.

When asked if she'd had any worries since the last interview about being with Julie and Dave she denied this, however, information provided by Julie and Dave suggested there had been some difficulties in establishing patterns of relating both within the family and externally. When pressed as to who she would go to if she was worried about something she thought for a moment and then said, again bolstered by a slight laugh "mmm, the teacher," when further pressed as to who she would go to at home, she indicated she would go to Julie and that she found Julie easy to talk to. She did however go on to re-assert "I don't worry about anything."

When discussing her response to moving from one caregiver to another, Amy identified that she had been happy to leave one of her care-giving arrangements because she had not liked that person. She then went on to discuss another situation and identified "but I was sad about leaving [a particular person]." In response to my clarification that she had mentioned there can be both happy and sad feelings associated with changing families,

and what would she say to other children about what you do about the sad feeling, she replied with a laugh "get over it." When asked whether she thought she would see [the identified person] again it seemed clear she thought this was out of her hands as she replied "I don't know, maybe if I'm lucky."

Amy managed her anxiety about it being 'scary' going to live with people you'd only just met, by avoiding answering this directly, and instead maintained "I like Julie and Dave now." In response to the question about what she could have done if she hadn't liked them, although she was able to identify she could have told her social worker, she was less clear about what could be achieved by that, and appeared to manage this potentially anxiety provoking thought by asserting "but I like Julie and Dave." In order to manage any concern about what Julie and Dave may think about Amy, she suggested "maybe they like me." This response appeared to be an attempt to hold the hope that 'this time the placement may work out and these people will like me enough to keep me in their family.'

Summary of Interview Three

Despite some behavioural difficulties and areas of concern, Julie and Dave remained steadfast in their assertion that they have no regrets in becoming permanent placement parents to Amy. Julie continued to voice her delight in having Amy in the family and her thought that Amy was beginning to feel a little more secure, noticed by her practicing the sound of "mum, mumma, maaa." Dave acknowledged that while his relationship was taking a little longer to develop, he was able to give examples of the progress and was philosophical about the time-frame. The couple acknowledged they were still developing their parenting skills but were feeling more confident. There appeared to be a continuation of the minimisation in relation to some of Amy's testing behaviour which when talked about was often lightened by the use of laughter. The biggest worry identified by Julie was in relation to Amy's teenage years and what they may be faced with. Dave was able to moderate Julie's anxiety in relation to this with his pragmatic approach and the fact they have got time before having to face this chapter of their lives.

During this final interview Amy was more open in her dialogue, giving insight into some of her hopes and anxieties. There appeared to be some hope that this placement would last as she voiced her thoughts that maybe Julie and Dave liked her. There was, however, a sense of underlying anxiety about not 'fitting' into the family, which may be compounded by a sense of discontinuation of identity (Schofield, 2002). Amy also identified in this interview that in all probability her journey to date hadn't been without its psychological difficulties, evident as she identified what she would tell other children about the experience.

Chapter Nine: Discussion

Introduction

The following chapter discusses the findings of this study, implications that emerged from the study and areas for further research. The purpose of this study was to understand the emotional and psychological experiences of children and parents as they transitioned into a permanent placement living arrangement. Of interest was the impact of this process on how the participants viewed their emotional experience at three different points in the transition process.

In order to capture this experience a case study methodology was used, with the data interpreted through a psychoanalytic lens. The focus was on the hopes and anxieties for each participant during this experience and the strategies they employed to manage their anxieties.

Each case study was analysed as a separate entity and then a comparative analysis of three cases was undertaken to identify themes, similarities and differences as they presented across the case studies. Moderating and mediating factors that may have contributed to each family group have also been identified. I begin with my reflection of the major findings of each individual case study.

Reflection of major themes of each study

Case one: (Peter, Mary and Gemma)

A major theme to emerge in this case study was the attempt at a recreation of the families that had been previously lost by both the child and parents. Participants seemed to carry initial anxieties about whether the experience would ever be realised, or whether there would be yet another experience of loss and rejection for both the child and parents. It was not unexpected that Gemma would carry some anxieties about previous loss

experiences into her new family, and the literature acknowledges this as a common experience influencing transitions into placements (Schofield & Beek, 2005; Steinhauer, 1991). More surprising in this study was the fact that Gemma's prior loss experiences were echoed in the experiences of her placement parents. While this may be an anomaly relating to this particular case, it is possible that it is precisely these kinds of loss experiences that may lead adults to offer themselves as foster parents. The implications of this are significant in so far as the difficulties around loss are likely to be amplified for both parties in the relationship, and the parents may be less able to deal with the child's losses in the face of their own losses. In the initial phase of the transition the previous loss experiences of the participants seem to result in fears that their acceptability to one another prefaced perhaps an underlying fear of rejection.

How the participant's have adapted and coped over time: It would appear it had not been an easy journey for any of the participants in this case study. However, they had adapted in a number of ways, particularly the parents. The primary way Peter and Mary seemed able to cope was by keeping in mind their motivation to provide emotional stability for a child in need of a permanent home. In order to understand and manage Gemma's difficult and at times confusing behaviour, they were able to keep in mind the 'traumatised child' underneath the demanding, attention seeking pre-teen. They used their own life experiences to inform them how best to manage Gemma's behaviour and how to support her emerging questions about her own history and identification with her birth family. They also called on social work assistance to help them support their parenting of Gemma.

Gemma appeared to have less healthy adaptive strategies and psychological resources that she could call on to help her navigate the journey of adapting to a new family, despite this having been her experience for most of life. It is reasonable to assume that her prior experiences may have resulted in an 'internal working model' (Bowlby, 1969) of relationships being tenuous and unlikely to last.

It appeared Gemma relied on the psychological defence of 'denial' to manage the reality of her experience of multiple placements, multiple caregivers and consequent multiple losses. In order to support this denial she attempted to make herself special and acceptable by seeking external validation that she is lovable and wanted. In order to comfort herself she asserted her wish that relationships within her new family were good, and glossed over difficulties. Her attempt to seek validation of this kind extended beyond the family as she professed her popularity at school, which may be an example of indiscriminate attachment patterns in which she appeared unable to differentiate between relative strangers and people that have been known for a long time (Brisch, 2002).

Gemma's way of coping seemed to be very much in line with some of the literature reviewed in this study with regard to traumatised children forming new family relationships. It appeared she struggled to trust that this placement would be different from her other experiences, and her way of managing this anxiety at times was consistent with common strategies adopted by traumatised children (Howe, 2003)

Peter and Mary realised they needed to work as a team in order to help Gemma develop more socially acceptable ways of relating, and healthier strategies for managing difficult situations. It appeared that when family values and expectations where made clear, this provided a framework by which to develop an understandable paradigm from which to operate. By the time of the final interview, Gemma and her new parents where still navigating this paradigm. It had, however, seemed to offer a structure that provided a level of containment for their anxieties and enabled them to hold on to the hope for the relationship.

Case two: (Simon, Chris and Trent)

The overall theme to emerge for the parents in this case study was whether or not they would be acceptable as parents, to both the statutory agency and to the child being placed with them. Simon and Chris seemed reasonably confident in their parenting capabilities, frequently referring to their professional experience as a benchmark from which they

could be guided. Their anxiety regarding whether their sexual orientation would be a barrier to them being accepted as permanent placement parents and a potential problem for the child being placed with them, was made overt. In some ways this was understandable, as even though a number of same sex couples parent, foster, and provide permanent placement care for children, historically same sex couples have generally felt discriminated against in society (Canny, 2000). The significance of this aspect is important to consider as it had the potential to undermine the parents' sense of competence in caring for a traumatised child. This anomaly was further highlighted in this particular case by the child's overt assertion that a hope he held for his new family was that he would have a mum and brothers and sisters. It is possible, however, that any unusual feature within a prospective placement family may be over-emphasised as a potential barrier to acceptance.

The desire to fill the void felt by some people at not being able to become parents may be a primary reason for seeking permanent placement. Perhaps for Simon and Chris, they did not feel they had as many options open to them as others to fill this void. This then would make their anxiety at not being accepted as permanent placement parents even more understandable.

Although the idea of having two dads appeared to be an initial cause of confusion for Trent, as demonstrated symbolically in his play and overtly by his verbal expression of his hope in relation to his new family constellation, it did not appear to be the cause of any ongoing anxiety. Trent's hope for a mother and siblings was perhaps rather a typical childhood fantasy of the 'idealised' family. It could also be that his need for stability of care outweighed the need for how this was structured and provided.

A further theme of hope that emerged in this case study was the relational dynamics between the child and new caregivers and whether a secure attachment relationship could to be established. Chris, in particular, appeared to have a strong desire for a father-son relationship, and as such tended to minimise any experience that indicated an obstacle to

this. Examples of Trent indiscriminate attachment patterns which matched the criteria of 'undifferentiated attachment behaviour' (Brisch, 2000) were consistently minimised.

Important themes that emerged for Trent were his sense of powerlessness about the situation he found himself in and the ultimate wish of wanting to be settled and cared for. Literature suggests this is likely to be the experience of most children who have been removed from their birth family and placed in subsequent care families (Fahlberg, 1991; Schofield, 2002). For Trent the sense of powerlessness seemed to be compounded by the realisation of the loss of his mother, who despite difficulties and inconsistency of care, had been his primary attachment figure, and with whom he had been having regular contact prior to the transition. The loss of a primary attachment figure is common to all children coming into care and it is acknowledged throughout literature that despite the quality of the attachment relationship, the loss is still felt deeply by the child (Bowlby, 1969; Steinhauer, 1991). Furthermore it will influence their ability to form new attachment relationships (Brisch, 2000; Howe, 2005).

How the participants have adapted and coped over time: The journey for Simon, Chris and Trent seemed in some ways to have been relatively easy and was often referred to as such.

The main resource for Simon and Chris was their experience and understanding of children and their ability to incorporate creative solutions to help them manage both their own, and Trent's anxiety. When faced with unexpected aspects of Trent's behaviour they were able to restore their hope for the relationship by looking at the positives of the situation rather than dwell on the difficulties. In addition, they balanced each others' emotional and psychological experiences. This was noticed by Chris's optimism and tendency to minimise potential difficulties, which was balanced by Simon's caution. It would appear this balance brought a realistic compromise of expectations.

Trent found ways to gain reassurance that this placement, unlike his other placements, would last. His naïve questioning gained the reassurance he was seeking. Chris and

Simon introduced future events wherever possible, such as an upcoming holiday and by discussing situations in terms of being a family. This in turn may begin to promote the sense of family membership which has been suggested as important for children in long-term foster care (Schofield & Beek, 2005)

Given Trent's obvious enduring connection to his mother, his developing relationship with Chris and Simon could, however, result in Trent being faced with the dilemma identified by Steinhauer (1991) of having to come to grips with having two sets of parents who he cares about, resulting in feelings of guilt. This had not been able to be determined within the time-frame of this study.

Case three: (Julie, Dave and Amy)

One of the major themes in this case study was the delight and excitement of the parents, of finally having the opportunity to bring a child into their lives. In some ways it almost seemed as if Amy was a precious gift that they had almost given up hope of ever receiving. Despite their initial thoughts of having a baby, they re-evaluated their thinking and determined an older child would better suit their lifestyle. In some ways this had enabled them, in particular Julie, to hold the resolve that nothing will spoil her dream of the longed-for family. This adjustment could be a dilemma other potential permanent placement parents may be faced with, which if not made, may ultimately impact in a negative way on their relationship with the child.

The themes for Amy were centred around loss, not belonging, and lack of trust in others, which has been identified in literature as common for children in foster care (Triseliotis, 2004). This may have been compounded for Amy by her previous care arrangement, whereby she had been with the family for almost twelve months, and which may have resulted in the unspoken hope that the placement would be ongoing. Even though she may have clearly been told the placement was a temporary measure, this logic may have been lost on a seven year old. The removal from this placement, together with the

previous cumulative losses experienced by Amy seemed to have strengthened her somewhat socially unhelpful coping strategies.

Amy used several strategies to manage her new situation. Most obviously, she resorted to what could be described as the psychological defence of isolation (McWilliams, 1994) in order to prevent people from getting too close to her. This could have been Amy's way of avoiding further potential rejection or avoiding the need to explain her current situation which has been identified as being a problem for some children in foster care (Triseliotis, 2004). Amy is of different culture to her caregivers, and while on the surface this may not have been regarded as a problem, it may be the cause of underlying anxiety for Amy, as to whether this is a family she can 'fit' in to. Julie and Dave have been sensitive to the differences in culture, but they may have been assessing the implications of this from an adult perspective.

Amy has also learned to be self-reliant and does not easily ask for help, or perhaps trust that people would be willing or able to provide help. Her coping strategies provided an illustration of commonly referred to behaviours exhibited by traumatised children (Gerhardt, 2004; Glaser, 2002; Hartt & Waller, 2002). By employing, what has been identified as the defence of reaction-formation, whereby a negative position is converted into a positive position, or vice versa (McWilliams, 1994), Amy appeared to have mastered the art of putting on a happy face despite her tears at night that are less able to be controlled.

How the participants have adapted and coped over time: Julie and Dave appeared to have found ways to adapt to their new family situation initially by developing their parenting skills. Like most new parents, this has been done by a mixture of trial and error and by gleaning ideas from other parents. However, this has afforded them a growing sense of confidence. They appeared to be able to reduce their anxiety by a combination of minimising the severity of a difficulty, which was frequently accompanied by laughter, particularly by Julie, or by positing a pragmatic approach usually taken by Dave. They were also able to rely on each other for support and confirmation of their developing

parenting skills. Despite their struggles at times, Julie and Dave continued to be optimistic about the future.

Throughout this study Amy continued to cope with potentially anxiety provoking situations in the ways already identified. Her outward demeanour was characteristic of a happy, confident child who was in control of the situation she found herself in. However, my experience when I was with Amy was of being kept at arms length and of feeling incredibly lonely, which I wondered whether matched Amy's psychological experience.

Although Amy continued to rely on her well developed coping skills she had begun to exhibit oppositional behaviour. If this testing behaviour can be understood and managed by her parents, it may help her to start to develop trust that she will not be rejected, no matter how 'unlikeable' she becomes. This may then start to help to deepen her sense of 'felt security' (Steele, 2003).

Themes across the cases

Several similar themes emerged across the cases which will be identified and discussed further. These themes will be separated out into themes relevant to the parents and those relevant to the children.

Parents: It became evident that the initial theme for the parents in this study was two-fold. They all indicated they wished to provide a home for the child, that matched the findings identified by Rhodes and colleagues (2006) as the second most identified reason for fostering. It also seemed they were entering the experience to fill a gap in their own lives.

For Mary and Dave, it seemed this might provide a way to assuage the grief they had experienced due to the cumulative losses encountered prior to their decision to apply to become permanent placement parents. Simon and Chris wished to find a way to complete their family. Similarly, Julie and Dave saw this as an opportunity of bringing a child into

their lives. It did however, emerge that each of the parent groups felt some level of anxiety about whether they would be suitable permanent placement parents, both to the Department and/or to the child being placed with them.

Overall, the parents in this study felt that they would have benefited from having additional qualitative information about the child's history prior to meeting the child. This fits with Brigg's (2003) assertion that parents may benefit from additional background information to provide them with a fuller picture of the child before the initial meeting, and subsequently help them determine whether they felt they would be able to provide the necessary care for the child. It has to be considered, however, that given the motivations and keenness for a child of the parent participants in this study, whether *first time parents* would be able to objectively assess, and make an informed decision, as to whether or not they would be able to care for the child they had been 'chosen' for, or whether this would more likely be a hindsight evaluation.

Each of the parents in this study, however, were able to keep in mind the history of the child placed with them, including the brief information they had about what lead to the child being removed from their family of origin and of the child's multiple placements prior to transitioning into the family. This seemed particularly important for the parents to hold on to their resolve to ensure the continuation of the placement and which may suggest the validity of the above assertion by Briggs (2003).

A further theme which appeared to provoke anxiety for the parents was in relation to the application process. In particular, the time between their initial approach to become permanent placement parents, and being informed their application had been successful, which was longer than they had expected. The time delay caused two of the couples to think they may not be accepted as permanent placement parents.

The parents compared this with the time-frame of the child transitioning into the family, which they felt was very quick and consequently, left little time to prepare themselves psychologically or emotionally for the arrival of the child. The time between being

informed a child was being placed with them and the child moving into the family, for the families in this study was between two – three weeks.

Two sets of parents felt they had a good initial connection with the PPU, whereas one couple had a different experience. All three couples acknowledged that after the child had been placed with them they had very good initial support from their social worker, and only had to ask for additional help or for what they needed and it would be provided for them. However, they also indicated that support was provided only when asked for and not something that was initiated by the social worker. This left some parents with an initial reluctance to ask for help, feeling embarrassed, guilty, and/or not 'good enough' to provide the necessary care they had professed they would be able to provide. This mirrors the experience of many of the families I have come in contact with seeking therapeutic assistance. The structure does, however, fit with the philosophy of permanent placement, which is to provide a child with the opportunity to be part of a new family constellation, outside of ongoing statutory intervention. But perhaps the parents' experiences highlighted concerns voiced by other permanent placement parents, identified in Ward's (2004) review, which indicated that the withdrawal of statutory involvement may result in some parents delaying taking up additional guardianship.

By the second interview all participants were struggling to establish themselves as a family unit, with all of the parents feeling less confident in their parenting task. Individual struggles had emerged as the participants attempted to find ways to understand each other. This appeared to result in tensions between the children and parents. Gemma's swift mood changes and attention seeking behaviour caused Mary and Peter to wonder if they could continue with the placement and whether it would have been better to take a younger child. Trent experienced the realisation of the loss of his mother and Simon and Chris were faced with finding ways to help him manage his grief. Trent's indiscriminate attachment behaviour had also emerged and was of some concern, especially for Simon. Amy's grief, associated with the loss of her previous caregiver emerged, as did her anti-social and defiant behaviour that was a cause of concern for Julie and Dave.

By the third interview there appeared to be a regaining of equilibrium, with the parents feeling more in control of the situation. This in turn seemed to have a beneficial effect on the children who had 'pushed' the limits to one degree or another, but which had not resulted in them being rejected by the parents.

The feedback meeting with the parents indicated the realisation by some of them that they had not fully understood the extent of the effects of trauma, and felt that while this was included in the training programme, it was presented at a superficial level and did not provide them with any practical ideas as to how to manage a child's disruptive or confusing behaviour.

Children: Overall, it was the sense of powerlessness of the children that came across in each of the case studies, which probably matched the reality of their situation. Gemma had been hoping this experience would afford her the opportunity to find a place where she could be settled and develop friendships. With regard to what had happened in her life, she felt it was the social worker's decision that she had been removed from her birth mother, and the social worker's decision as to whether she would see her birth mother again. Consequently her acting out behaviour appeared to be the only way by which she could convey her confusion and distress. This appeared to fit with the findings of Howe & Fearnley (2003).

Trent didn't know why he was in the predicament he was in and seemed genuinely perplexed as to why the decision had been made for him to move into a new family. Similarly, Amy didn't have any real sense of why she would be moving and indicated she didn't know very much about the people she was moving in with.

All of the children in this study had experienced cumulative loses and repeated failures, which was likely to have impacted on how they view themselves, and their capacity to establish a secure relationship with their new caregivers (Schofield et al., 2000; Steinhauer, 1991).

On the surface, all the children in this study exhibited an apparent lack of emotion. However, there was a contradiction noted here as there were times when each child's anxiety manifested in various ways, such as the controlling, manipulative or seductive behaviours identified as common by Howe & Fearnley (2003). However, the parents reported that at times, each of the children had been obviously distressed and although in the main they were able to hide their distress, there were times it became overwhelming and unable to be managed alone. This was observed by Trent crying and curling up into a ball, and by Gemma's swift mood changes, and questions about why her previous caregivers hadn't kept her. Although Amy was very good at hiding her emotions, even she was not able to do this at night, and on one occasion wasn't able to hold back the tears in front of Julie and Dave.

The theme of birth families and contact with their birth family was present for two of the children. Trent had talked about his mother with Chris and Simon, and it appeared evident that he had a strong connection to her, and the loss of contact with her seemed to be very difficult for him to manage. Gemma had talked about her 'biological mother' and her brothers, and had begun to question Mary about her mother and birth family. Amy was less overt about her connection, or possible ongoing connection, with her birth family. However, during the final feedback meeting with Julie and Dave they identified that, at Amy's request, contact had been made with her father with a view to establishing some form of ongoing contact.

At the commencement of the placement's the children all appeared to be focussed on the 'here and now' of their situation rather than looking too far into the future, however, by the third interview at least two of the children were looking toward the future and the permanency of their placement. This was particularly so for Trent, who by his naïve questions was attempting to gain reassurance of his place in the family. Gemma and Amy were less sure, although Gemma did indicate she would be staying with this family forever and Amy thought she would be staying because maybe her caregivers liked her.

All the children appeared to exhibit features of insecure attachment patterns (Brisch, 2000). They lacked age appropriate social skills and frequently exhibited immature behaviour and lack of discernment in their interactions with others. This fits with assertions identified in literature which suggest that children with unmet attachment needs are constantly in survival mode and have little interest in others, except to be used. They have a poor understanding of emotions which in turn reduces their capacity for empathy and they do not find it easy to engage with others (Cairns, 2002).

Implications

There were several aspects that emerged from this study that may benefit from intervention by the statutory agency charged with the implementation of the permanent placement of children. These ideas may help assist both the parents and children entering permanent placement.

Preparation: The time between people applying to be considered as permanent placement parents and being informed they had been accepted was problematic for some parents in this study and caused a lot of anxiety. Lack of contact during this waiting period may result in people either withdrawing from the process or feeling insecure when they are accepted. As a result of this felt insecurity, if they decided to continue and a child was placed with them, they may feel unable to easily ask for assistance if and when it became necessary.

Although it may be difficult to guarantee that a child will be placed with particular prospective parents, parents may find it helpful and less anxiety provoking to be informed that they had at least met the required standard to be considered for a child, even if a suitable child was not available at that particular time.

Once it had been decided a child would be placed with a particular couple, the time-frame between being informed, and the time of transition, did not seem to provide sufficient preparation time, either practically or psychologically, for either the parents or the

children. The parents in this study felt the process was too rushed and furthermore, that it may have resulted in difficulties for the child.

A longer time-frame may provide an opportunity for the child to say goodbye in a meaningful way to their current caregivers, and enable them to acknowledge and grieve the loss of this relationship (Steinhauer, 1991). The child may need therapeutic assistance to help them through this process. In addition, a longer lead up to the actual time of transition would provide the opportunity for the child to get to know their permanent parents in a gradual way and enable them to start to anticipate, and look forward to moving in with their new family. Perhaps photographs and letters could be provided as an introductory measure.

Some parents felt it would be helpful to have a clearer picture of the child's history prior to the child transitioning into the family. They felt this may have provided them with information about potential situations that might evoke fear or anxiety for the child, of which they could be mindful of, and prepare for.

Understanding of the effects of trauma: Some of the parents in this study felt they needed a deeper understanding of the possible consequences of developmental disruptions, including the effects of maltreatment and the significance of loss and grief on a child's psychological and emotional development. They felt this needed to be given greater emphasis in the preparation training programme. They also felt it would be helpful for the training programme to include some ideas as to how to manage the associated behaviours.

However, from my observations, it was only after the child had transitioned into the family that it became apparent that the parents would have benefited from more in-depth understanding of the effects of trauma, and support to help them manage the associated behaviours. Furthermore, it became evident that it was the idiosyncratic aspects of each individual family group and their particular circumstances that needed to be taken into account, including their own associated thoughts and emotions.

While it may be important for parents to be provided with basic information about what they may expect when a child transitions into their family, it is not until situations arise that are relevant to their particular circumstances that they will be able to fully make use of the information, as they have no contextual experience to apply the information to. Moreover, at the commencement of the recruitment process, parents may be emotionally closed to receiving the full extent of the potential difficulties they may face with a child who brings with them a history of maltreatment and loss.

Results of this study suggest it may be useful to provide ongoing training for parents in relation to parenting children who are recovering from the effects of abuse and trauma, and that the timing of providing this information is revised. That in addition to the basic information provided in the initial training programme, parents may benefit from a follow-up training programme one to two months after the transition of the child into the family, at which time parents are more likely to be able to make better use of the information. Furthermore, individual sessions for each set of parents may be very helpful for them to discuss their own particular circumstances and gain ideas that will support them, which in turn is likely to support the child.

Social work: Although the philosophy of permanent placement is to provide the child with the opportunity to live in a secure family environment and form new attachment relationships, results of this study suggest that at least in the beginning phase of the formation of the family, ongoing social work is necessary for the parents. During the time-frame of this research, each of the families in this study called on assistance from the child's social worker.

Ongoing active social work may be needed to support the families beyond the transition period. Social work involvement needs to be provided in such a way that the families don't think they are in some way lacking, but rather that it is recognised that caring for traumatised children is particularly demanding.

Therapeutic assistance: Each of the sets of parents in this study had requested therapeutic assistance for the child placed with them. The parents, however, were also affected by the circumstances that lead to the request for therapeutic assistance, and as such may also benefit from therapeutic assistance. Not only to assist them in understanding the child, but to address issues that get evoked for them by caring for the child, which may be related to unresolved issues in their own history. Without attending to this, they may be unaware of similar issues impacting on the child. The provision of therapeutic assistance needs to be offered in such a way that it is expected that all parents caring for traumatised children are likely to benefit from therapeutic assistance.

In the case of the children, as earlier identified, they may benefit from receiving therapeutic assistance prior to moving into their new family, to help them through the transition phase of leaving their previous family (Lanyado, 2003), particularly if they had been with that family for a significant length of time. For most children, recovery from childhood trauma and neglect is a lifelong process (Lanyado, 2003) and as such they are likely to require either long-term, or ongoing, intermittent therapy, as they move into different developmental phases. Provision needs to be made for this.

Contact with birth families: The children in this study all had, to a greater or lesser degree, thoughts about their birth family, which seemed to indicate some form of ongoing connection would be in their best interest. It is recognised this would need to be deemed in the best interest of the child, in terms of their physical and emotional safety. This concurs with the already established philosophy that children should be able to have an ongoing relationship with their families of origin. However, this study further suggests this would need to be carefully balanced with the need to provide the opportunity for the child and permanent placement parents to form as secure a relationship as possible. Therefore contact with the birth family needs to be managed in such a way that it does not interfere with the developing relationship between the child and their permanent placement parents.

A multi-systemic approach: There appears to be a growing interest expressed in the literature reviewed in this study (e.g., Briggs, 2003) that due to the nature of the children being placed in long-term foster care and permanent placement, that a team or multi-disciplinary approach may be helpful to ensure the success of providing ongoing care for traumatised children (Briggs, 2003). There is evidence from this study that supports that position.

Further research

This study identified several areas that would benefit from further research. Follow up research of the participants would be extremely helpful to determine whether the children are able, over time, to develop a secure attachment with their permanent placement parents, as is the expectation under section 13 of the Children, Young Persons, and Their Families Act 1898. This research provided a snapshot of the experience of permanent placement for a small cross-section of participants and at the conclusion of the study it was not able to be definitive about this important aspect of the Act. To conduct such research would require a longitudinal study to determine this outcome. As part of a longitudinal study, ideas as to what might help or hinder the development of a secure attachment would be a valuable integral aspect of the research.

In a similar vein, an area that would benefit from further research in New Zealand would be along the lines of research conducted by Schofield and Beek (2005) identifying what factors support the continuance of a placement and what factors lead to the breakdown of a placement.

It would also be helpful to understand the ongoing emotional and psychological impact for children and young people who have had multiple breakdowns of placements. The current literature appears to focus on the accepted global research into the effects of trauma and attachment disruption when assessing the likely outcomes for children, it does not, however, provide a first hand account from the people affected.

Further research into the motivation of parents applying to provide a permanent placement for a child would also be beneficial. There is a dearth of literature in relation to parents' motivation. The information provided, and referred to, in this study was gathered in 1991. This information may prove valuable to determine potential blocks to the parents being able to meet the child's needs and withstand the child's, at times confusing and concerning behaviour.

Finally, I suggest research into the feasibility of setting up a multi-systemic approach to support permanent placement is undertaken. As identified, there is interest overseas in adopting a multi-systemic approach (Burnell & Brigg, 1995), and while on the surface this may seem costly and financially unviable, the cost of each placement breakdown not only results in a financial burden, but results in compounded emotional and psychological damage to children who have fought, in whatever way they can, to survive the effects of adversity and maltreatment.

Conclusion

The present study sought to explore the psychological and emotional experiences of children and permanent placement parents as they transitioned into a permanent placement living arrangement. The study concluded that each of the children and parents were profoundly affected by the experience on different levels, both emotionally and psychologically. The participants in this study moved from the hopeful anticipation that the experience would provide them with a longed-for family, to disillusionment as they struggled to find ways to understand one another and to deal with their own feelings of inadequacy. The participants all exhibited underlying anxieties in relation to the experience that needed to be managed in some way. In order to cope with their anxieties each of the participants employed different strategies to help them manage the experience. The strategies employed by the children were frequently unhelpful and served to alienate them from their caregivers.

The study further concluded that if families are left to manage on their own there is a danger the placement will break down. It is therefore suggested that ongoing social work and therapeutic assistance is made available to the families during the transition phase of forming a new family constellation, and beyond this time if necessary.

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Appendix A

The Children, Young Persons and Their Families Act (1989)

Sections pertinent to the present thesis

1 Title

This Act is the Children, Young Persons, and Their Families Act 1989.

2 Commencement

This Act shall come into force on the 1st day of November 1989.

Part 2

Care and protection of children and young persons

13 Principles

Subject to sections 5 and 6 of this Act, any Court which, or person who, exercises any powers conferred by or under this Part or Part 3 [or Part 3A] or sections 341 to 350 of this Act shall be guided by the following principles:

3 Purpose of this Act

(a)   The principle that children and young persons must be protected from harm, their rights upheld, and their welfare promoted:

(b)   The principle that the primary role in caring for and protecting a child or young person lies with the child's or young person's family, whanau, hapu, iwi, and family group, and that accordingly—

   (i)   A child's or young person's family, whanau, hapu, iwi, and family group should be supported, assisted, and protected as much as possible; and

   (ii)   Intervention into family life should be the minimum necessary to ensure a child's or young person's safety and protection:

(c)   The principle that it is desirable that a child or young person live in association with his or her family, whanau, hapu, iwi, and family group, and that his or her education, training, or employment be allowed to continue without interruption or disturbance:

(d)   Where a child or young person is considered to be in need of care or protection, the principle that, wherever practicable, the necessary assistance and support should be provided to enable the child or young person to be cared for and protected within his or her own family, whanau, hapu, iwi, and family group:

(e)   The principle that a child or young person should be removed from his or her family, whanau, hapu, iwi, and family group only if there is a serious risk of harm to the child or young person:

(f)   Where a child or young person is removed from his or her family, whanau, hapu, iwi, and family group, the principles that,—

(i)   Wherever practicable, the child or young person
       should be returned to, and protected from harm
       within, that family, whanau, hapu, iwi, and family
       group; and

(ii)   Where the child or young person cannot immediately
       be returned to, and protected from harm within, his
       or her family, whanau, hapu, iwi, and family group,
       until the child or young person can be so returned
       and protected he or she should, wherever
       practicable, live in an appropriate family-like
       setting—

    (A) That, where appropriate, is in the same locality as
        that in which the child or young person was living;
        and

    (B) In which the child's or young person's links with
        his or her family, whanau, hapu, iwi, and family
        group are maintained and strengthened; and

(iii) Where the child or young person cannot be returned
       to, and protected from harm within, his or her
       family, whanau, hapu, iwi, and family group, the
       child or young person should live in a new family
       group, or (in the case of a young person) in an
       appropriate family-like setting, in which he or she
       can develop a sense of belonging, and in which his
       or her sense of continuity and his or her personal
       and cultural identity are maintained:

(g) Where a child or young person cannot remain with, or be
    returned to, his or her family, whanau, hapu, iwi, and
    family group, the principle that, in determining the
    person in whose care the child or young person should be
    placed, priority should, where practicable, be given to a
    person—

    (i)   Who is a member of the child's or young person's
           hapu or iwi (with preference being given to hapu
           members), or, if that is not possible, who has the
           same tribal, racial, ethnic, or cultural background
           as the child or young person; and

    (ii)   Who lives in the same locality as the child or
           young person:

(h) Where a child or young person cannot remain with, or be
    returned to, his or her family, whanau, hapu, iwi, and
    family group, the principle that the child or young
    person should be given an opportunity to develop a
    significant psychological attachment to the person in
    whose care the child or young person is placed:

(i) Where a child is considered to be in need of care or
    protection on the ground specified in section 14(1)(e) of
    this Act, the principle set out in section 208(g) of this
    Act.

Compare: 1974 No 72 s 4

14 Definition of child or young person in need of care or protection

   (1)   A child or young person is in need of care or protection
       within the meaning of this Part of this Act if—

       (a)   The child or young person is being, or is likely to be,
            harmed (whether physically or emotionally or sexually),
            ill-treated, abused, or seriously deprived; or

       (b)   The child's or young person's development or physical or
            mental or emotional wellbeing is being, or is likely to
            be, impaired or neglected, and that impairment or neglect
            is, or is likely to be, serious and avoidable; or

       (c)   Serious differences exist between the child or young
            person and the parents or guardians or other persons
            having the care of the child or young person to such an
            extent that the physical or mental or emotional wellbeing
            of the child or young person is being seriously impaired;
            or

       (d)   The child or young person has behaved, or is behaving, in
            a manner that—

           (i)   Is, or is likely to be, harmful to the physical or
                  mental or emotional wellbeing of the child or young
                  person or to others; and

           (ii)   The child's or young person's parents or guardians,
                  or the persons having the care of the child or
                  young person, are unable or unwilling to control;
                  or

       (e)   In the case of a child of or over the age of 10 years and
            under 14 years, the child has committed an offence or
            offences the number, nature, or magnitude of which is
            such as to give serious concern for the wellbeing of the
            child; or

       (f)   The parents or guardians or other persons having the care
            of the child or young person are unwilling or unable to
            care for the child or young person; or

       (g)   The parents or guardians or other persons having the care
            of the child or young person have abandoned the child or
            young person; or

       (h)   Serious differences exist between a parent, guardian, or
            other person having the care of the child or young person
            and any other parent, guardian, or other person having
            the care of the child or young person to such an extent
            that the physical or mental or emotional wellbeing of the
            child or young person is being seriously impaired; or

       (i)   The ability of the child or young person to form a
            significant psychological attachment to the person or
            persons having the care of the child or young person is
            being, or is likely to be, seriously impaired because of
            the number of occasions on which the child or young
            person has been in the care or charge of a person (not
            being a person specified in subsection (2) of this

section) for the purposes of maintaining the child or young person apart from the child's or young person's parents or guardians.

(2) The persons referred to in subsection (1)(i) of this section are as follows:

(a) Any person who has custody of the child or young person pursuant to the order of any Court, whether or not that Court is a Court within the meaning of this Act:

(b) Any person who has the child or young person in that person's care—

(i) Pursuant to an agreement under section 139 or section 140 or section 141 or section 142 of this Act; or

(ii) For the purpose of adoption, and the requirements of section 6 of the Adoption Act 1955 are being complied with:

[(c)any person who is caring for the child or young person in—

(i) any residential accommodation provided for children or young persons attending a registered school within the meaning of the Education Act 1989:

(ii) a hospital care institution within the meaning of section 58(4) of the Health and Disability Services (Safety) Act 2001.]

Compare: 1974 No 72 s 27(2); 1977 No 126 s 7(1)

Appendix B

The Care of Children Act (2004)

Sections pertinent to the present thesis

1 Title

This Act is the Care of Children Act 2004.

2 Commencement

This Act comes into force on 1 July 2005.

Part 1
Preliminary provisions

3 Purpose of this Act

  (1) The purpose of this Act is to---

    (a)   promote children's welfare and best interests, and
          facilitate their development, by helping to ensure that
          appropriate arrangements are in place for their
          guardianship and care; and

    (b)   recognise certain rights of children.

  (2) To that end, this Act---

    (a)   defines and regulates---

      (i)   parents' duties, powers, rights, and
              responsibilities as guardians of their children:

      (ii)   parents' powers to appoint guardians:

      (iii)   Courts' powers in relation to the guardianship and
              care of children:

    (b)   acknowledges the role that other family members may have
          in the care of children:

    (c)   respects children's views and, in certain cases,
          recognises their consents (or refusals to consent) to
          medical procedures:

    (d)   encourages agreed arrangements for, and provides for the
          resolution of disputes about, the care of children:

    (e)   makes provision for enforcing orders internationally:

    (f)   implements in New Zealand law the Hague Convention on the
          Civil Aspects of International Child Abduction:

    (g)   reforms and replaces the Guardianship Act 1968 (including
          the Guardianship Amendment Act 1991).

4 Child's welfare and best interests to be paramount

  (1) The welfare and best interests of the child must be the first
       and paramount consideration---

    (a)   in the administration and application of this Act, for
          example, in proceedings under this Act; and

> (b)   in any other proceedings involving the guardianship of,
>   or the role of providing day-to-day care for, or contact
>   with, a child.

(2)   The welfare and best interests of the particular child in his
       or her particular circumstances must be considered.

(3)   A parent's conduct may be considered only to the extent (if
       any) that it is relevant to the child's welfare and best
       interests.

(4)   For the purposes of this section, and regardless of a child's
       age, it must not be presumed that placing the child in the
       day-to-day care of a particular person will, because of that
       person's sex, best serve the welfare and best interests of
       the child.

(5)   In determining what best serves the child's welfare and best
       interests, a Court or a person must take into account---

       (a)   the principle that decisions affecting the child should
              be made and implemented within a time frame that is
              appropriate to the child's sense of time; and

       (b)   any of the principles specified in section 5 that are
              relevant to the welfare and best interests of the
              particular child in his or her particular circumstances.

(6)   Subsection (5) does not limit section 6 (child's views) or
       prevent the Court or person from taking into account other
       matters relevant to the child's welfare and best interests.

(7)   This section does not limit section 83 or subpart 4 of Part
       2.

Compare: 1968 No 63 s 23(1), (1A), (3); 1989 No 24 s 6

5 Principles relevant to child's welfare and best interests

The principles referred to in section 4(5)(b) are as follows:

       (a)   the child's parents and guardians should have the primary
              responsibility, and should be encouraged to agree to
              their own arrangements, for the child's care,
              development, and upbringing:

       (b)   there should be continuity in arrangements for the
              child's care, development, and upbringing, and the
              child's relationships with his or her family, family
              group, whanau, hapu, or iwi, should be stable and ongoing
              (in particular, the child should have continuing
              relationships with both of his or her parents):

       (c)   the child's care, development, and upbringing should be
              facilitated by ongoing consultation and co-operation
              among and between the child's parents and guardians and
              all persons exercising the role of providing day-to-day
              care for, or entitled to have contact with, the child:

(d)   relationships between the child and members of his or her
        family, family group, whanau, hapu, or iwi should be
        preserved and strengthened, and those members should be
        encouraged to participate in the child's care,
        development, and upbringing:

(e)   the child's safety must be protected and, in particular,
        he or she must be protected from all forms of violence
        (whether by members of his or her family, family group,
        whanau, hapu, or iwi, or by other persons):

(f)   the child's identity (including, without limitation, his
        or her culture, language, and religious denomination and
        practice) should be preserved and strengthened.

Part 2
                    Guardianship and care of children

Subpart 1---Guardianship: Responsibility for children, and decisions
about children

                            Guardianship

15 Guardianship defined

For the purposes of this Act, guardianship of a child means having
(and therefore a guardian of the child has), in relation to the
child,---

(a)   all duties, powers, rights, and responsibilities that a
        parent of the child has in relation to the upbringing of
        the child:

(b)   every duty, power, right, and responsibility that is
        vested in the guardian of a child by any enactment:

(c)   every duty, power, right, and responsibility that,
        immediately before the commencement, on 1 January 1970,
        of the Guardianship Act 1968, was vested in a sole
        guardian of a child by an enactment or rule of law.

Compare: 1968 No 63 s 3; Family Law Act 1975 (Australia) s 61B

48 Parenting orders

(1)   On an application made to it for the purpose by an eligible
       person, the Court may make a parenting order determining the
       time or times when specified persons have the role of
       providing day-to-day care for, or may have contact with, the
       child.

(2)   A parenting order determining that a person has the role of
       providing day-to-day care for the child may specify that the
       person has that role---

       (a)   at all times or at specified times; and

       (b)   either alone or jointly with 1 or more other persons.

(3)   A parenting order determining that a person may have contact
      with the child may specify any of the following:

      (a)   the nature of that contact (for example, whether it is
            direct (that is, face to face) contact or some form of
            indirect contact (for example, contact by way of letters,
            telephone calls, or email)):

      (b)   the duration and timing of that contact:

      (c)   any arrangements that are necessary or desirable to
            facilitate that contact.

(4)   A parenting order may be a final order or it may be an
      interim order that has effect until a specified date or event
      or until the Court orders otherwise.

(5)   A parenting order may also be subject to any other terms or
      conditions (including, without limitation, a condition
      requiring a party to enter into a bond) the Court determines.

(6)   This section is subject to sections 50 to 52 and 60.

Compare: 1968 No 63 ss 11, 15, 16

Appendix C

Participant Information Sheet (Children)

Participant Information Sheet (Child)

21st January 2005

Invitation
My name is Carol Shinkfield and I work with children and parents and families. A lot of the children and parents I work with have formed a new family together or are thinking about forming a new family together. I am interested in talking to both the children and parents about how they think this will be before they form a new family and then again after they have formed their new family.

I understand that this is something that you are about to do and I would like to invite you to be part of this study.

A few questions you might like to know the answers to before you make your decision.

Why am I doing this study?
I'm interested in what it might be like for people thinking about joining a new family. I'm interested in the thoughts and feelings people have about what might happen, and then whether things turned out to be how they imagined they would or whether things were different.

When I have found out this information I will be writing a book explaining what I have learned about how it is for some people when they form a new family.

How are people chosen for this study?
If you are between the ages of 7 years – 12 years and are going to be moving in to a new family situation and you have got some thoughts about that, you would be a good person for this study.

What happens in the study?
We will meet at a place that is comfortable and has things there that you can do if you chose to, like painting or drawing. I will have some questions to ask you, but you can decide whether you answer them or not. When we meet it will just be you and me together but I would like to video or tape our meetings to help me remember everything we talk about. We will meet three times, the first time a few weeks before you move in with your new family. The second time, when you have been living together for about a month, and the third time when you have been living together for two months.

When I meet with the people who are going to be your parents I will meet them three times as well, but I will be meeting with them separately and we won't be talking about the things you and I have talked about.

What if you don't want to talk about some things?
It will be your decision to talk about the things you feel comfortable about and not to talk about the things you don't want to talk about. One thing you might be worried about is that if you talk about something, or I talk about something, it might bring back some memories about when things weren't so happy for you and you could get upset. If this happens I will make sure you will have someone to help you with these feelings.

Why do I need to know about these things?
I think that if I can find out the sorts of things children think about, what they hope will happen and what they may be worried about when they join a new family, this could help people who organise new families to know what it is like for children, and what would help them. It might also help other children and parents who are thinking about doing what you are doing.

Will people know that I am in a study?
There will be some people who know you are in the study, these will be your new parents and your social worker. The reason for this is that your parents will also be part of this study and I will need to check with your social worker so that he or she can check it out with you first.

It is important though, that other than these people, no-one else knows you are in the study if you don't want them to. This means that when I write my study, I will not put your name in it, and I will not tell other people what you have said and done. The videos that we make will not be seen by anybody else other than me and my supervisor. My supervisor is a person who is going to help me to write my book.

How can I join the study?
If you want to be part of the study you can let your social worker know and he or she will ring me.

Will I tell you what I found out in the study?
When I've finished the study, I would like to meet with all the people who were in it and tell you what I found out. I'm also thinking it might be a good idea to make a booklet to let other people know some of the things children think about when they are going to join a new family and I'd like to show that to you first.

Participant Concerns
Any concerns regarding the nature of this project should be notified in the first instance to the Project Supervisor.

Concerns regarding the conduct of the research should be notified to the Executive Secretary, AUTEC, Madeline Banda, madeline.banda@aut.ac.nz , 917 9999 ext 8044.

Researcher Contact Details: Carol Shinkfield, carol.shinkfield@aut.ac.nz , 917 9999 ext 7219

Project Supervisor Contact Details: Dr. Kerry Gibson, kerry.gibson@aut.ac.nz , 917 9999 ext 7223
Approved by the Auckland University of Technology Ethics Committee on 18th May 2005
AUTEC Reference number 05/27

Appendix D

Participant Information Sheet (Parents)

Participant Information Sheet (Parent)

21st January 2005

Invitation
My name is Carol Shinkfield and in my profession of Clinical Child Psychotherapist I work with children, parents and families. Many of the children and parents I work with are in a Permanent Placement living arrangement.

I am interested in talking to both the children and parents about their thoughts, hopes and expectations before and after they form a new family unit.

I understand that this is something that you are about to do and I would like to invite you to be part of this study.

The study will be written up as a Thesis for my Masters of Philosophy.

The follow questions and answers may help you decide whether you wish to be involved in the study. Please do not hesitate to contact me if you have further questions.

What is the purpose of the study?
I'm interested in gaining an understanding of what it is like for parents and children transitioning into a family. I'm interested in your thoughts and feelings about what might happen, and whether the arrangement turned out to be how you imagined it would. It is my hope that this study will inform the theory of parent / child relationships, social work practice and statutory policy. It is also envisaged that this study may be a pilot study to a longitudinal study.

How are people chosen and asked to be part of this study?
People in the process of entering into a Permanent Placement living arrangement, will be approached by their social worker to ascertain if they would be interested in being part of this study. The decision to be involved in this study will be completely your decision.

It may be important to add here that I am not employed by the department of Social Welfare. Neither will your decision to be part of this study or your decision to decline to be involved in the study will influence your acceptance as Permanent Placement Parents.

I will limit the age of the children involved in the study to between the ages of 7 – 12 years. It is generally accepted that children between these ages have the cognitive ability to understand what is being asked of them and the capacity to give their assent to being involved.

What happens in the study?
I will arrange to meet separately with children and parents prior to the arrangement becoming formalised, in order to get an understanding of how each person anticipates the experience will be for them. The meeting is to provide the opportunity to interview the participants. I would like to record the interviews in order to faithfully reflect the information offered. In the case of the children I would also like to video the meetings. The video footage will not be shared with anyone other than my thesis supervisor. There will be a further two meetings after the transition period to discuss how

things are going. My meetings with parents will be in their home or a place designated by the parents. My meeting with the children will be in a place neutral to them. This environment will be 'child friendly' and suitable for all ages of children. A possible location could be the AUT Child Psychotherapy Clinic.

What are the discomforts and risks?
Due to the nature of the topic, it is possible that some feelings and memories may be evoked for either the child or parent. If this should happen, provision will be made for supportive therapeutic intervention to be made available if required.

What are the benefits?
I believe the benefits of this research will inform those responsible for facilitating the Permanent Placement process. In particular the psychological and emotional adjustments required by the people directly involved in the process. In addition, aspects may come to light that will inform policy as to what supports or hinders the practice of Permanent Placement.

A further idea I have had is the possibility of putting together a brochure for the future assistance of people entering into a permanent placement living arrangement.

How will my privacy be protected?
Privacy will be protected by confidentiality and anonymity. In writing up my findings pseudonyms will be used and no identifying information will be recorded. Contact details will be kept in a locked filing cabinet.

What are the costs of participating in the study?
There will be no financial costs to you if you chose to be involved in the study. There will be the cost of your time, which will be approximately six hours overall. If you have travel costs, these will be reimbursed.

Will the results of the research be made available to the participants?
When I have completed the study, I will arrange to meet separately with all the participants to discuss the findings. I am also thinking about creating a booklet, containing the most common findings of my research, for the future assistance of people in similar situations.

Opportunity to consider invitation
Thank you for reading this information sheet and considering being part of this study. If you decide you would like to be involved in this study, or have questions that may help your decision, please do not hesitate to contact me on ph 917 9999 ext 7219.

Participant Concerns
Any concerns regarding the nature of this project should be notified in the first instance to the Project Supervisor.

Concerns regarding the conduct of the research should be notified to the Executive Secretary, AUTEC, Madeline Banda, madeline.banda@aut.ac.nz , 917 9999 ext 8044.
Researcher Contact Details: Carol Shinkfield, carol.shinkfield@aut.ac.nz , 917 9999 ext 7219
Project Supervisor Contact Details: Dr. Kerry Gibson, kerry.gibson@aut.ac.nz , 917 9999 ext 7223
Approved by the Auckland University of Technology Ethics Committee on 18th May 2005
AUTEC Reference number 05/27

Appendix E

Participant Information Sheet (Agency)

Participant Information Sheet (Agency)

21st January 2005

Invitation
My name is Carol Shinkfield and I am currently enrolled in a Masters of Philosophy at Auckland University of Technology. I am also a trained and experienced Clinical Child Psychotherapist. For my Thesis I would like to focus on the psychological and emotional adjustments both children and prospective parents face as they enter into a Permanent Placement Living arrangement.

In my work as a Child Psychotherapist I have come into contact with several families adjusting to these arrangements and I am interested in talking to both the children and parents about their thoughts, hopes and expectations before, and after they form a new family unit.

As the statutory agency charged with responsibility for the Permanent Placement of children, I would like to invite you to be involved in this study. I anticipate that your role will be central to ensuring the families approached will be suitable for such a study.

The following questions and answers may help you decide whether you wish to be involved in the study. Please do not hesitate to contact if you have further questions.

What is the purpose of the study?
I'm interested in gaining an understanding of what it is like for parents and children transitioning into a family. I'm interested in their thoughts and feelings about what might happen, and whether the arrangement turned out to be how they anticipated. It is my hope that this study will inform the theory of parent / child relationships, social work practice and statutory policy. It is also envisaged that this study may be a pilot study to a longitudinal study.

How are people chosen and asked to be part of this study?
People in the process of entering into a Permanent Placement living arrangement, will be approached by their social worker to ascertain if they would be interested in being part of this study. The agency would exercise discretion in their decision to approach potential participants.

The decision to be involved in this study will be entirely left to the children and parents. It should be made known to the potential participants that I am not employed by the department of Social Welfare. It should also be made known that their decision to be part on this study or their decision to decline to be involved in the study will not influence their acceptance as Permanent Placement parents / children.

I will limit the age of the children involved in the study to between the ages of 7 – 12 years. It is generally accepted that children between these ages have the cognitive ability to understand what is being asked of them and the capacity to give their assent to being involved.

What happens in the study?
I will arrange to meet separately with the children and parents, prior to the arrangement becoming formalised, in order to get an understanding of how each person anticipates the

experience will be for them. The meeting is to provide the opportunity to interview the participants. I would like to record

the interviews in order to faithfully reflect the information offered. In the case of the children I would like to video the meetings, this footage will not be shared with anyone other than my thesis supervisor. There will be a further two meetings after the transition period to discuss how things are going. My meetings with parents will be in their home or a place designated by the parent. My meetings with the children will be in a place neutral to them. This environment will be 'child friendly' and suitable for all ages of children. A possible location could be the AUT Child Psychotherapy Clinic.

What are the discomforts and risks?
Due to the nature of the topic, it is possible that some feelings and memories may be evoked for either the child or parent. If this should happen, provision will be made for supportive therapeutic intervention to be made available if required.

What are the benefits?
I believe the benefits of this research will inform those responsible for facilitating the Permanent Placement process. In particular the psychological and emotional adjustments required by the people directly involved in the process. In addition, aspects may come to light that will inform policy as to what supports or hinders the practice of Permanent Placement.

A further idea I have is the possibility of putting together a brochure for the future assistance of people entering into a permanent placement living arrangement.

How will my privacy be protected?
Privacy will be protected by confidentiality and anonymity. In writing up my findings pseudonyms will be used and no identifying information will be recorded. Contact details will be kept in a locked filing cabinet.

What are the costs of participating in the study?
Where any financial costs are incurred by any participant, for example travel costs, these will be reimbursed. The statutory agency will not be responsible for the reimbursement of these costs.

There will be the cost of participants' time, which will be approximately 4 ½ hrs. for parents, made up of three 1 ½ hr meetings, and 3 ¾ hrs. + travelling time for children, made up of three 1 ¼ hrs. meetings + travel time.

I would be requesting that a social worker accompanies the child for their first meeting with me. Here again, travel costs will be reimbursed.

Will the results of the research be made available to the participants?
When I have completed the study, I will arrange to meet separately with all the participants to discuss the findings. In the case of the agency, this could be in the form of a talk / lecture to discuss the results and findings of the study.

Opportunity to consider invitation
Thank you for reading this information sheet and considering being part of this study. If you decide you would like to be involved in this study, or have questions that may help your decision, please do not hesitate to contact me on ph 917 9999 ext 7219.

Participant Concerns
Any concerns regarding the nature of this project should be notified in the first instance to the Project Supervisor.

Concerns regarding the conduct of the research should be notified to the Executive Secretary, AUTEC, Madeline Banda, madeline.banda@aut.ac.nz , 917 9999 ext 8044.

Researcher Contact Details: Carol Shinkfield, carol.shinkfield@aut.ac.nz , 917 9999 ext 7219

Project Supervisor Contact Details: Dr. Kerry Gibson, kerry.gibson@aut.ac.nz , 917 9999 ext 7223
Approved by the Auckland University of Technology Ethics Committee on 18th May 2005
AUTEC Reference number 05/27

Appendix F

Consent and Assent Forms

Consent to Participation in Research

This form is to be completed in conjunction with, and after reference to, the AUTEC Guidelines (Revised January 2003).

Title of Project: An exploration of the experience of children and prospective parents as they transition into a permanent placement arrangement: An interpretive collective case study.

Project Supervisor: Kerry Gibson

Researcher: Carol Shinkfield

- I have read and understood the information provided about this research project (Information Sheet dated 21st January 2005)

- I have had an opportunity to ask questions and to have them answered.

- I understand that the interviews will be audio taped and transcribed by the researcher.

- I understand that in the case of the children, meetings may also be video taped and transcribed by the researcher.

- I understand consent will be sought for the child to participate in each stage of the research process.

- I understand that I may withdraw myself, or any information that I have provided for this project, at any time prior to completion of data collection, without being disadvantaged in any way.

- If I withdraw, I understand that all relevant tapes and transcripts, or parts thereof, will be destroyed.

- I agree to take part in this research.

Participant signature: ....…………………..

Participant name: …………………………………………………………….

Participant Contact Details (if appropriate):

………………………………………………………………………………..

………………………………………………………………………………..

………………………………………………………………………………..

Date:

Approved by the Auckland University of Technology Ethics Committee on 18th May 2005

Note: The Participant should retain a copy of this form.

Assent to Participation in Research

**This form is to be completed in conjunction with, and after reference to, the
AUTEC Guidelines (Revised January 2003).**

Title of Project: An exploration of the experience of children and prospective parents as they transition into a permanent placement arrangement: An interpretive collective case study.

Project Supervisor: Kerry Gibson

Researcher: Carol Shinkfield

- I have talked to someone, and have been able to ask questions about being a part of this research.

- I have read the questions and answers the researcher thought I might want to know about on the Information Sheet given to me.

- I understand that this research project is about children and parents forming a new family and that the researcher wants to know more about what this might be like for both the children and the grown-ups.

- I understand that when I meet with the person doing the research, she will either videotape or audiotape our meetings so that she can remember what we talked about when we met. She also wants to remember the other things I did like painting or drawing or making things.

- She will then write down what we talked about, and she might also write about the other things I did like painting or drawing or making things

- I understand that it is OK for me to say at any time I don't want to carry on meeting and talking about what it is like being in a new family. I also understand that if I decide not to carry on with the research I can say that I don't want anything I have talked about so far to be used by the researcher.

- If I decide I don't want to carry on meeting to talk about what it is like forming a new family, I understand that all the things we have talked about, and the tapes that have been made, will be destroyed.

- I would like to be part of this research.

Participant signature: ....…………………..

Participant name: …………………………………………………………….

Participant Contact Details (if appropriate):

…………………………………………………………………………………..

…………………………………………………………………………………..

…………………………………………………………………………………..

Date:

Approved by the Auckland University of Technology Ethics Committee on 18th May 2005

Note: The Participant should retain a copy of this form.

Appendix G

Interview Schedule (Parents)

Participant Interview Questions (Adult)

These questions are a guide only and will be asked in a conversational way. They may be modified or not be used at all as the data collection process develops.

Title of Project: An exploration of the experience of children and prospective parents as they transition into a permanent placement arrangement: An interpretive collective case study.

Project Supervisor: Kerry Gibson

Researcher: Carol Shinkfield

Interview prior to the transition of the child into the family:

- I wonder if we could start by you telling me a little bit about the process involved for you in reaching the decision to become permanent placement parent/s?

- I'm wondering what your thoughts and expectations are about how it will be when (child) comes to live with you?

- How are you hoping it will be?

- What are you looking forward to?

- What, if any, are the things you're worried about?

- What are your thoughts about how (child) might be feeling about coming to live with you?

Participant Interview Questions (Adult)

These questions are a guide only and will be asked in a conversational way. They may be modified or not be used at all as the data collection process develops.

Title of Project: An exploration of the experience of children and prospective parents as they transition into a permanent placement arrangement: An interpretive collective case study.

Project Supervisor: Kerry Gibson

Researcher: Carol Shinkfield

First interview after the transition of the child into the family:

- How has the experience been so far, has it been how you hoped and expected it to be?

- What are the things you enjoy most about having (child) with you?

- How does (child) let you know what s/he needs, is it easy to know what s/he wants or needs?

- Did the things, if any, that you were worried about, eventuate?

- What, if anything, has been worrying or confusing, or has caused you concern?

- What things, if any, have been more difficult than you imagined?

- How do you think (child) is feeling about being in his/her new family?

- How do you think (child) is managing to adjust to his/ her new environment, home / school etc.

Participant Interview Questions (Adults)

These questions are a guide only and will be asked in a conversational way. They may be modified or not be used at all as the data collection process develops.

Title of Project: An exploration of the experience of children and prospective parents as they transition into a permanent placement arrangement: An interpretive collective case study.

Project Supervisor: Kerry Gibson

Researcher: Carol Shinkfield

Second interview after the transition of the child into the family:

- Are things progressing in the way you imagined?

- How do you think your (each parent) relationship with (child) has developed?

- Is it developing in the way you had imagined?

- What things, if any, have become more difficult or are causing concern?

- What seems to make things more difficult?

- What helps when things are difficult or are causing concern?

- Do you think there is anything else that could help at these times?

- Do you think there are times when (child) is struggling and / or finding things difficult in adjusting to being in a new family, and are you aware of those times?

- How does (child) manage the difficult times?

- Is (child) able to come to you for help / soothing when s/he is distressed?

- Is (child) open in his communication with you?

- Is (child) able to talk to you about what is going on the inside for them?

- Does (child) ever talk about his / her life before s/he came to live with you?

- If so, what sort of effect does this have on you?

- For most parents, having a new child in the family, means a time of adjustment both in their relationship and their lifestyle. I'm wondering if you have found this, and if so, how you have managed it?

Appendix H

Interview Schedule (Children)

Participant Interview Questions (Child)

These questions are a guide only and will be asked in a conversational way. They may be modified or not be used at all as the data collection process develops. In addition, or as an alternative to their verbal responses, the child may choose to express their thoughts in a non-verbal way such as art, this will be offered to the child if they appear uncomfortable in answering a question verbally.

Title of Project: An exploration of the experience of children and prospective parents as they transition into a permanent placement arrangement: An interpretive collective case study.

Project Supervisor: Kerry Gibson

Researcher: Carol Shinkfield

Interview prior to the transition of the child into the family:

- I wonder if we could start by you telling me a little bit about how found out you were going to go to be moving into a new family?

- Why do think this decision was made?

- Do you think it is a good decision?

- What do you think it will be like moving in with (parents)?

- What do you think will be the best thing about going to live with (parents)?

- What are you most looking forward to?

- What do you think (parents) are feeling about you coming to live with them?

- Do you think there could be any things that might turn out to be a bit difficult moving in with (parents)?

- You might also have some feelings about moving in with (parents) for instance there might be things you are feeling a bit worried or scared about? I wonder if you can tell me about those feelings?

- How long do you think you will be living with (parents)?

- What do you think (birth parents) think about you going to live with (permanent placement parents)?

Participant Interview Questions (Child)

These questions are a guide only and will be asked in a conversational way. They may be modified or not be used at all as the data collection process develops. In addition, or as an alternative to their verbal responses, the child may choose to express their thoughts in a non-verbal way such as art, this will be offered to the child if they appear uncomfortable in answering a question verbally.

Title of Project:	An exploration of the experience of children and prospective parents as they transition into a permanent placement arrangement: An interpretive collective case study.
Project Supervisor:	Kerry Gibson
Researcher:	Carol Shinkfield

First interview after the transition of the child into the family:

- How have things been so far, has it been how you expected and hoped it would be?

- Sometimes it can take a bit of getting used to starting a new family together, I'm wondering it has been like that for you? If so in what ways?

- What are the things you enjoy most about living with (parents)?

- (IF APPROPRIATE) I know you had a few worries about what it would be like moving in with (parents), have you still got those worries or any other worries?

- When you have times that you do feel a bit worried or sad about something, is there anyone you can talk to about those things? Does that help?

- (IF APPROPRIATE) How are things going at your new school (settling in, making friends etc.)?

- How do you think (parents) are feeling about how things are going?

- I'm wondering if you ever think about how it was before you came to live with (parents) and if you do, can you tell me about this? (e.g. when it happens, how often it happens, and what do you do when you get these thoughts?)

Participant Interview Questions (Child)

These questions are a guide only and will be asked in a conversational way. The may be modified or not be used at all as the data collection process develops. In addition, or as an alternative to their verbal responses, the child may choose to express their thoughts in a non-verbal way such as art, this will be offered to the child if they appear uncomfortable in answering a question verbally.

Title of Project: An exploration of the experience of children and prospective parents as they transition into a permanent placement arrangement: An interpretive collective case study.

Project Supervisor: Kerry Gibson

Researcher: Carol Shinkfield

Second interview after the transition of the child into the family:

- How are things going in this new family of yours?

- How are things going with (each parent)?

- Who helps when you are having a bit of a problem, or if something is bothering you?

- Do you find it easy, or not so easy, to talk to (parents) when you have got a problem?

- What other things do you do that help when you have got a problem?

- Do you think there is anything else that could help at these times?

- How do you think (parents) like being a new family?

- What are the sorts of things that are different being in this family than being in your other family?

- Are there things that are more difficult than you thought they would be, if so what?

- Have you had (or do you still have) thoughts about what it was like before you came to live with (parents)?

- Can you talk to (parents) about these thoughts?

- (IFAPPROPRIATE) What do you think they feel, or would feel if they knew you had these thoughts?