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Having a voice and being heard : a scoping review of what current literature tells us is most important to the caregivers, children and social workers involved in kinship foster care

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ABSTRACT

This study was undertaken in order to determine what the existing literature tells us about how children, kinship caregivers and social workers perceive the quality of care provided to children placed in kinship foster homes, using a scoping review methodology. The studies that made up the sample had a range of research questions and purposes, but all discussed to some degree, the views of their study participants – children, kinship caregivers and/or social workers – regarding their understandings of what aspects of quality care were most important to child well-being in kinship foster homes.

Findings indicate that social workers tend to focus on child safety and permanency planning, while caregivers and children believe that less concrete elements such as the caregiver's ability to welcome and provide love to the child, the emotional support and care from social workers and the involvement of the child and caregiver in the planning process are just as essential to the provision of quality care as child safety, money and other resources. Findings further suggest that children benefit from feeling welcomed into the kinship home, that they need to feel loved by the caregiver, and that

all parties want to have their voices heard and needs supported as much as possible in the decision-making process. Based on the findings of this scoping review, this author posits that working to strengthen or improve the relational and support elements that kinship foster families deem most important to the provision of high quality care will contribute to more successful outcomes for the children in kinship care.

HAVING A VOICE AND BEING HEARD: A SCOPING REVIEW OF WHAT

CURRENT LITERATURE TELLS US IS MOST IMPORTANT TO THE

CAREGIVERS, CHILDREN AND SOCIAL WORKERS INVOLVED IN

KINSHIP FOSTER CARE

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Introduction

Think back to when you were a child and try to imagine who you would want to take care of you if your parents were not able to. Most likely, you are picturing someone that you knew – perhaps a relative or close family friend – and not a stranger. When Child Protective Services removes a child from the care of his or her parents due to issues of abuse, neglect or abandonment, a new plan of care must be implemented to ensure the child's safety and well-being. In Massachusetts, when a child is in need of an out-of-home placement, state child welfare agencies must first attempt to locate family or kin who could provide care to the child before placing the child in a state-run foster home (M.G.L. c. 119, sec. 23). The rationale behind this mandate is that children face less psychological trauma after removal from their parents' care when they are placed with familiar people, in what are referred to as *kinship foster homes*.

While informal kinship care arrangements have taken place for centuries and across cultures (Dolan, et al., 2009), it is only in recent history that formal kinship care arrangements, where the child's care by his or her relative is supervised by child protective services or a court system, have become common (Ehrle & Geen, 2002). Over the past three decades, placement in kinship foster homes has been on the rise. According to the Adoption and Foster Care Analysis and Reporting System, nearly one out of every four children involved with the United States foster care system was placed with a relative caregiver in 2009, rather than in a state-run foster home (USDHHS, 2010).

Although placement in kinship foster homes is now a popular and supported practice, child welfare workers prior to 1980 avoided placing children with kin, as the family/kin unit was viewed more as a contribution to the problem of abuse or neglect

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than as its potential solution (Smith, Rudolph & Swords, 2002). The 1978 federal Indian

Child Welfare Act was the first policy to state a preference for placing children removed

from the care of their parents with relatives. The 1980 federal Adoption and Child

Welfare Act introduced the idea of permanency planning (Smith, Rudolph & Swords,

2002), which remains relevant to the placement of child-welfare-involved children into

kinship foster homes. The Adoption and Safe Families Act (ASFA) was signed into law

by President Clinton in 1997 to promote the adoption of the increasing number of

children in the foster care system without an established permanent plan of care.

The requirement of permanency planning for children in foster homes added

pressure to the already overwhelmed child welfare system, which was experiencing a

decline in licensable foster homes and a rise in children needing placement (Smith,

Rudolph & Swords, 2002). While the ASFA established that parental rights could be

terminated once a child was in foster care for fifteen out of the previous twenty two

months, it also stipulates that this policy does not necessarily apply to children living

under the care of their relatives (USDHHS, 1997). In this sense, kinship foster care

placements help alleviate the burden of permanency planning and are less expensive to

maintain, theoretically freeing up resources for the inundated child welfare system. To

accommodate permanency planning requirement of the ASFA, some states have initiated

guardianship programs in place of adoption, and/or have instituted policies which

recognize kinship care as a permanency plan (Smith, 2003, p. 981).

While the child welfare system prioritizes the use of kinship foster homes over

placement in state-run foster homes, this presumptive valuing of kinship homes seems to

be contradicted by the actual hardships experienced by children and caregivers in kinship

foster homes, which have been documented in numerous studies (Cross & Day, 2008; Goodman, et al., 2004). Some have questioned whether the perceived benefit of living with familiar people in familiar settings really outweighs the hardships faced by kinship foster families.

The increasing use of kinship foster homes has led to the undertaking of many studies focused on how the children in these homes fare, compared to children placed in state-run foster homes. While a plethora of studies have sought to measure the value of kinship foster care by examining what the researchers have deemed to be indicators of child well-being or quality care of children in kinship foster homes, the perspectives of the people who live in and monitor kinship foster homes are often lost in the shuffle. In an attempt to give voice to those perspectives, this author is interested in articulating what children, caregivers and social workers would deem most essential to child well-being or the provision of quality care in kinship foster homes, in order to evaluate kinship foster homes from a person-in-environment perspective.

This research study seeks to answer the following question: What does the existing literature tell us about what children, kinship caregivers and social workers perceive to be most essential to quality care in kinship foster homes? The study focuses on children living in kinship foster homes under the auspices of the child welfare system. It synthesizes and analyzes the findings of empirical studies that have attempted to assess quality of life or of care provided to the children who live in kinship foster homes, at least in part by directly seeking the opinions of people who live in or monitor kinship foster homes. Gaining clarity on this matter will allow future research to better assess whether current social work practices effectively ensure quality care for the children in kinship

foster homes. The findings of this study will help inform social work practice and policy by encouraging social workers to hold paramount the perspectives of the clients – in this case kinship foster families – and to reflect upon and compare those perspectives to our own. Additionally, understanding what embodies quality care in kinship foster care is a necessary precursor to assessing how well quality care is actually being upheld in kinship foster homes. The following section will review some of the literature that has been written thus far in regard to children living in kinship foster homes.

Literature Review

This section will address some of the major themes found in the literature regarding kinship foster care in order to provide a framework for this study's query. Understanding the benefits and challenges unique to kinship foster care, as well as the indicators of child well-being used in previous studies, will help provide context to this study's exploration of what the perspectives of social workers, children, and kinship caregivers can tell us about the well-being of children living in kinship foster homes.

Benefits of Kinship Foster Care

The prevailing philosophy during the early years of the formal child welfare system was that children needed to be rescued from abuse and delinquency within the family, and child welfare workers tended to pathologize kinship networks as hindering the child's safety or well-being (Smith, Rudolph & Swords, 2002). As the number of licensed non-relative foster homes diminished, and the state was unable to meet the increasing need for out-of-home placement, kinship care began to be seen as a viable option. Kinship foster homes have been gaining popularity in recent decades in part due to the belief that placing a child with kin may help offset some of the psychic trauma that is felt by children when they are removed from their parent(s)' home. Such placements have been found to create long-term stability for the child, as the commitment to care for the child long-term is stronger among kin than non-kin foster parents (Shlonsky & Berrick, 2001). Additionally, children in kinship foster homes tend to experience fewer changes in placement than do children in traditional foster care (Grant, 2000).

The emotional benefits of maintaining children within the family unit rather than placing them in non-kinship foster homes have often been investigated. Kinship foster

homes allow children to live with and be cared for by people that they theoretically know and trust, and who can help support the child's connection to his or her family identity, culture and ethnicity (Bell and Garner, 1996). Kinship caregivers may also be able to facilitate contact between the child in care and siblings or other family members. For example, Green and Goodman (2010) found that kinship foster homes are associated with greater parental involvement than non-kinship foster homes, which they deem to be positive (based on previous studies by McWey & Mullis, 2004; Smith & Dannison, 2008; Dolbin-MacNab & Keiley, 2009; Testa, 2001).

In applying social capital theory (see appendix A) to her analysis, Kang (2007) theorized that placement in a kinship foster home, where the child would know the caregiver and have an established bond, allows the child a better opportunity to accrue social capital, which she defines as the aggregate of one's "social relationships, psychological bonds, solidarity, or feelings of closeness" (p. 576). This social capital can presumably be drawn upon as a resource in a kinship foster home, just as it would in any family. Alas, such a theory remains simply theoretical rather than actual until children in kinship foster homes are asked how the "social capital" they are assumed to accrue by living with kin affects their sense of well-being.

Challenges in Kinship Foster Homes

While placement in kinship foster homes is becoming more common and has arguable benefits, children living in such homes have been found to face unique socioeconomic and interpersonal challenges that can affect their development. Compared with other households, children living in kinship care homes are at a greater risk for living in poverty (Cox, 2007) and in crowded households with single caregivers who may

have lower levels of educational attainment and income (Ehrle and Geen, 2002).

Furthermore, Goodman, et al. (2004) found that women caring for their grandchildren under the auspices of the child welfare system tend to have fewer social resources, and more responsibility in terms of the number of children under their care. In addition, children in kinship homes may present more behavioral challenges to their caregiver than children in the general population, including high prevalence of attention deficit disorder, conduct disorder and depression (Grant, 2000).

Dolan, et al. (2009) determined that child-welfare-involved grandparent caregivers engaged in "significantly better parenting behaviors, overall than foster caregivers, regardless of the child's age and the caregiver's race/ethnicity, education" despite the fact that the authors also found that kinship caregivers practiced corporal punishment (spanking) and non-kinship parents did not (p. 789). Such a conclusion emphasizes the subjectivity involved in assessing a care environment, as another researcher may have examined the same findings and determined that the use of corporal punishment has such a negative effect on the well-being of the child in the home that it overshadows any benefits of the living arrangement. Asking the people directly involved in the kinship care home – the caregiver, child and social worker – about the impact of disciplinary styles on the well-being of the child in the home, would add meaning and context to the analysis in a way that an author's assertion cannot match.

The Impact on Intra-Familial Relationships

There are many complexities to consider regarding the intra-familial dynamics that may play into how the people who live in and monitor kinship homes discuss child well-being or quality of life. It makes sense that the way that a child feels toward other

members of his or her family has an impact on his or her feeling of being well cared for, or on his or her perception of overall well-being. Various studies, outlined in this section, have examined how intra-familial relationships impact the functioning of the whole family system, and help illuminate how such dynamics might influence the perception of child well-being in kinship foster homes.

Frequently, kin become foster parents in times of family crisis (Phillips & Bloom, 1998). The meaning ascribed to the role of each family member naturally changes when a child is placed in the home of his or her kin, and there is a potential for the child in a kinship foster home to feel that the role of his or her caregiver is in competition with the role of his or her birth parent(s) (Ziminski, 2007). Particularly when a grandparent is the kinship caregiver, the care arrangement has the potential to highlight the historical or current relational dynamics of the grandparent-parent dyad. For example, Bell and Garner (1996) mention that some grandparent caregivers feel they failed as parents because their grown children are unable to parent. Alternatively, Phillips and Bloom (2002) suggest that there may be some resentment on the part of the relative caregivers, who may not have planned to be in a parenting role at that point in their lives.

The demand on kinship caregivers is unique because he or she will not only likely have a bond with the child, but also with the parent of the child. Managing personal relationships with birthparents is an additional challenge that is not experienced by non-kinship foster parents. The involvement of a child welfare agency adds to this unique demand, as the agency may set limitations or impose external structure on the kinship caregiver-parent dyad, with the intention of safeguarding the well-being of the child(ren). Not unexpectedly, kinship caregivers are more likely to allow unsupervised access by an

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abusive parent than non-relative foster parents (Shlonsky & Berrick, 2001), which may negatively impact the child's well-being.

It has been argued that child resilience in kinship foster homes is related to a more positive relationship between the birth parent and caregiver, and to higher levels of social and family support within the kinship foster home (Johnson-Garner and Meyers, 2003). In some cases, it has been found that when it comes to determining visitation between children and their parents, it can be helpful for the grandparent caregiver in particular to have social services to fault for limiting contact; this presents the caregiver as the rescuer, rather than someone for the parent to resent (Ziminski, 2007; Greef, 2001 as cited in Green & Goodman, 2010). There is not yet consensus in the literature as to how parental presence or absence influences the well-being of children in kinship care.

A child's feelings about his or her birth parent have been found to affect the dynamic of the kinship foster home (Doblin-MacNab & Keiley, 2009), and may have an impact on the child's, caregiver's and/or social worker's perceptions of child well-being in kinship foster homes. Doblin-MacNab and Keiley (2009) found that children who experience serious problems with their birth parents tend to feel significant gratitude to their kinship caregivers, while Cross and Day (2008) indicate that such children are likely to remain loyal to their parents regardless of the situation that led them to live with their kin. Regardless, it seems that the dynamics of the child-parent dyad could influence how the child in particular views his or her experience in the kinship foster home environment. For example, Goodman, et al. (2004) determined that parental factors such as visitation and personal issues (e.g. substance abuse) directly relate to the prevalence of behavioral problems among the children in kinship foster homes.

Just as the level of parental involvement in kinship foster homes varies among kinship foster families, the inter-relational dynamics of the child, kin caregiver and biological parent "triad" also exist in myriad forms (Green & Goodman, 2010). Even when a parent no longer has any physical contact with the child (due, for example, to parental death, imprisonment or abandonment), that parent remains with the child psychologically, through what Boss 1999 referred to as 'ambiguous loss,' continuing to influence the child's experience of the world (Gibson, 2005) and, likely, his or her perception of well-being in the home.

Lack of Support & Monitoring in Kinship Homes

As is common throughout the United States, Massachusetts's child protection law gives high priority to placing children with kin. Section 23c of M.G.L. chapter 119 states:

> Whenever the department [of children and families] places a child in foster care, the department shall immediately commence a search to locate any relative of the child or other adult person who has played a significant positive role in that child's life in order to determine whether the child may appropriately be placed with that relative or person if, in the judgment of the department, that placement would be in the best interest of the child.

Another factor that may influence how children, caregivers and social workers perceive the well-being of children in kinship foster homes is how well the child's situation is monitored and supported by the state once he or she is placed. In situations where a kinship foster home is approved by a licensed placement agency, the Department of Children and Families (DCF) is only required to visit those homes "at least once a year" (M.G.L., c. 119, sec. 22). Additionally, because many kinship caregivers do not meet state requirements to be considered an official foster home, "the vast majority of

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kinship caregivers do not receive regular foster care reimbursements" (Smith, Rudolph & Swords, 2002), which may impact the quality of care they are able to provide.

Kinship caregivers sometimes take exception to the fact that relatives, often grandmothers, are expected to provide this service without adequate supports. African American children have historically been most likely to be in kinship foster care (Grant, 2000), and some African American kinship caregivers feel that the state takes advantage of the cultural expectation within the African American community that extended family will support the parents in caring for children (Murphy, et al, 2008). African American care-giving grandmothers in particular perceive that child welfare workers do not provide as much financial and other support as they should. Those grandmothers also believe that this is partly because the child welfare workers knew that the women were highly committed to caring for their grandchildren (Murphy, et al., 2008). And, in fact, child welfare caseworkers have reported a tendency to visit kinship foster homes less frequently than non-kinship foster care homes, though that analysis was not completed relevant to the race of the kinship family (Smith, Rudolph & Swords, 2002).

Indicators of Child Well-Being in Kinship Foster Homes

Some researchers have put forth arguments, based on their own reviews of the literature, about what domains should be assessed as indicators of quality kinship foster homes. Shlonsky and Berrick (2001) concluded that "child safety, support for education, development, and special needs, as well as the presence of a close stable caregiver, are essential to quality care" (p. 76). Other presumed indicators of child well-being in kinship foster homes have included the physical and mental health of the child (Altshuler, 1998) and caregiver (Grant, 2000; Harden, et al., 2004); the child's behavioral (Grant,

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2000; Goodman, et al., 2004) and school functioning (Grant, 2000; Altshuler, 1998; Farmer, 2009); the quality of the home environment (Dolan, et al., 2009; Ehrle & Geen, 2002); the presence of social and economic resources available to the kinship family (Harden, et al., 2004); the receipt of public support (Ehrle & Geen, 2002); and parenting behaviors or attitudes of the caregiver (Dolan, et al., 2009; Harden, et al., 2004) including caregiver commitment to the child (Farmer, 2009).

It is important to note that while some studies address common indicators of child well-being in kinship foster homes, even similarly named indicators of child well-being tend to be interpreted differently across studies. For example, several studies cite the child's environment as a key indicator of how children in kinship foster homes fare; what is meant by "environment," however, varies by study. Ehrle and Geen (2002) considered the child's environment to relate more to what the caregiver is able to offer the child in care in terms of elements such as resources and parenting style, while Dolan, et al. (2009) examined the physical environment of the child's home and neighborhood in their assessment of the same category.

Permanency of the placement is another potential indicator of child well-being, though Smith (2003) distinguishes legal permanency from a child's psychological sense of permanency, and clarifies that the former is not always a necessary precursor to the latter, for children whose parents' rights have been legally terminated (Smith, 2003). A child who is living with a relative may not be concerned about legal permanency if he or she feels psychologically secure in the home. There is an understanding that a child can benefit from a psychological understanding of permanence even without the sanction of the courts.

Implications for Current Research

While the literature helps to demonstrate the value and complexities of kinship foster care, the significance of these findings in determining how child well-being should be understood in the specific context of kinship foster care remains unclear. As such, the present study seeks to understand which indicators of child well-being would be identified by the people who are directly involved in kinship foster homes. This study supports the argument put forth by Cuddeback (2004) that there is a need for assessment tools to be developed specifically to examine child well-being in kinship foster homes, but suggests that the input of the people living in and monitoring such homes should help inform the development of such tools.

The following chapter describes the methodology used in this study to help determine what the perspectives of social workers, children, and kinship caregivers tell us about the well-being of children living in kinship foster homes.

Methodology

This chapter will clarify the purpose and design of this study, detail the process of conducting a scoping review, and explain the specific methodology and limitations of this scoping review. A detailed explanation of the research process will allow future researchers to replicate this study's design, and enhance reliability.

Research Purpose & Design

This scoping review synthesizes and analyzes the findings of empirical studies that discuss what children, kinship caregivers and social workers perceive to be essential to quality care in kinship foster homes. Given that "quality" cannot be considered precise or measurable elements, it is likely that people's understandings of its meaning will vary, depending perhaps on the person's expectations or experiences. This scoping review provides a summary and analysis of what the various people involved in kinship foster home arrangements consider most essential to providing high quality of care to children in kinship foster homes.

The purpose of this scoping review is to examine what the existing literature tells us about the provision of quality care in kinship foster homes from the perspectives of the people who live in and monitor these homes (social workers, kinship caregivers, and children). This review will assess areas around which there is consensus or division in the meaning of "quality" to those identified stakeholders. Such a study helps determine how well quality of life and care are being upheld for the children living in kinship foster homes, and allows an opportunity to assess whether current policies and practices

enhance or inhibit the care provided to children living with kin under the auspices of the child welfare system.

Preparation of a Scoping Review

A high quality scoping review involves locating all published and unpublished studies relevant to a given research topic in order to determine all sources of evidence available, and then synthesize and analyze the key, relevant concepts found therein (Arskey & O'Malley, 2005). The methodological framework for conducting a scoping review (or scoping study), developed in part by Arskey and O'Malley (2005), is based largely on the established framework for conducting systematic reviews. While systematic reviews are generally considered the most thorough type of literature review, scoping reviews have also gained popularity over recent years. Both involve a thorough review and analysis of the literature, during which the researcher is expected to employ the same level of rigor as would be required to conduct primary research. The depth and breadth of the review process is necessary to ensure that the evidence gathered throughout is reflective of the complete current state of knowledge regarding the research topic.

Despite many methodological similarities, scoping reviews differ from systematic reviews in that "the scoping study method is guided by a requirement to identify all relevant literature regardless of study design" of the identified studies, and allows for the researcher to modify search methods throughout the review process, whereas a systematic review involves a more linear and stringent process (Arskey & O'Malley, 2005, p. 22). Similarly, in conducting a scoping review, a researcher is not required to implement strict limitations on search terms or methods of identifying relevant studies prior to the review,

as might be expected in a systemic review (Arskey & O'Malley, 2005). Scoping reviews also differ from systematic reviews in that a scoping review does not include assessment of the quality of the included studies.

As is the case with this study, scoping reviews are particularly useful when one seeks to summarize and disseminate research findings by describing the findings and range of research in particular areas of study in more detail, "thereby providing a mechanism for summarizing and disseminating research findings to policy makers, practitioners and consumers who might otherwise lack time or resources to undertake such work themselves" (Antman, Lau, Kupeinick, Mosteller, & Chalmers, 1992 as cited in Arskey & O'Malley, 2005, p. 21). Scoping reviews are also called for when one seeks to examine the extent, range and nature of research activity; to determine the value of undertaking a full systematic review; or to identify research gaps in the existing literature, which "takes the process of dissemination one step further by drawing conclusions from existing literature regarding the overall state of research activity" (Arskey & O'Malley, 2005, p.21).

Given the trend toward evidence based practice, it is critical that health and social service practitioners are up to date with the current state of knowledge on numerous subjects pertinent to their fields. With an overwhelming number of studies relevant to the health and social science fields conducted each year, both scoping and systematic reviews grant practitioners an efficient format by which they can learn of new findings or interventions in their field without having to sift through all articles that may be relevant (Arskey & O'Malley, 2005; Green, 2005; Leff & Conley, 2006). Given that scoping reviews are expected to be transparent and replicable, all key terms used to retrieve

articles for this study, as well as the data bases from which they were retrieved, are

presented in this review. The present review incorporates standards from the procedures

outlined by Arskey and O'Malley (2005), though with some necessary modifications, as

described below under Study Limitations.

Study Selection

This author intends to gain a thorough sense of how the concept of quality in

kinship foster homes is constructed in experience and perception, by those who live in

and monitor them. Considered herein are only those studies published between 1997 and

2011, in which there is a discussion of quality kinship foster homes and/or child well-

being, from the perspectives of the stakeholders. This date range was selected in part to

enhance the feasibility of completing the review, and more importantly because the

Adoption and Safe Families Act signed into law in 1997 led to an increased emphasis on

the placement of children under state care into kinship foster homes, and a heightened

focus on kinship foster care in general. The studies included in this review involved

collection of primary empirical data; therefore all conceptual and theoretical formulations

are considered only in the literature review section of this report.

Though search methods can be refined throughout the process, defining search

parameters in advance is an important first step in completing a scoping review in order

to reduce the likelihood of missing relevant articles, while also ensuring that the search is

manageable in scope (Arskey & O'Malley, 2005). This author used the key terms *foster,*

and *kin** and *quality* in searching the Social Work Abstracts, PsycINFO,

PsycARTICLES, PsycBOOKS and Academic Search Premiere. An asterisk was placed

after the term "kin" as an effort to instruct the search databases to retrieve any articles

which contained the term "kin," including those in which the "kin" was part of a larger term or phrase, such as "kinship." From those databases, a total of 354 studies (see appendix B for sampling selection) were identified as being relevant to those key terms, and were subsequently reviewed by this author.

When searching Google Scholar with those same parameters, 4,220 results were located. Given the unfeasibility of searching through such a large sample, this author briefly reviewed the results list to help determine how the search parameters could be modified such that the sample would be a more manageable size for one researcher to complete independently. In doing so, this author observed that the search term "foster" often brought up articles that discussed fostering a quality in people, such as independence and that "quality of life" appeared to be a common phrase in articles regarding health care and end of life issues. In an attempt to correct for the numerous articles related to ageing or dying, and the long-term care of elderly relatives, this author refined the search criteria on Google Scholar to abide by those time and key term parameters, but to the exclusion of articles that were linked to the key terms "dying" or "patient" and further required that the search only produce articles that included either the term "child" or "home." As instructed by this author, the Google Scholar database searched for articles that would be relevant to the social sciences, arts and humanities categories. This resulted in a list of 1,650 studies that the search engine considered to be possibly relevant to the review.

It should be noted that it would have slimmed down the results significantly had this author been able to limit the search to articles that did not contain the word "death" or "health" in them as it would have eliminated many of the irrelevant articles that related

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to health and ageing; however, this author determined that such criteria limitations may have ignored relevant studies which included participants for whom "death" of a parent or caregiver may have resulted in that child's placement in kinship care, for example, or articles in which "health" was considered relevant to quality of care or quality of life. While Arskey and O'Malley (2005) recommend that authors of scoping reviews set search parameters that will produce lists of possibly relevant articles that are manageable in number, they also stress the importance of maintaining a wide enough approach to searching the literature to generate breadth of coverage and ensure that relevant articles are not overlooked.

To determine whether the studies identified in the search in fact met inclusion criteria, this author read the abstract and methodology sections of each study whose title seemed potentially relevant to the question under review: What does the existing literature tell us about what children, kinship caregivers and social workers perceive to be most essential to quality care in kinship foster homes? Studies were read in full after the abstract and methodology sections resolved that they did in fact meet the inclusion criteria of this review.

The review of the literature demonstrated that "quality of care" was discussed in numerous articles; however, studies were excluded from this review if they mentioned quality of life or quality of care without explaining how those terms were defined by the study participants (see Holtan et al., 2005). Articles that discussed the quality of life of the kinship caregivers were excluded unless they also discussed how quality of life relates to child well-being. Articles that had pre-determined indicators of quality care or quality of life were not included in this report (see Davidson-Arad, 2005).

Data Collection Procedures

Each article was read a minimum of four times and reviewed for any and all statements made by a kinship caregiver, child living in a kinship home, or social worker responsible for monitoring a kinship home, that could shed some light on what they feel is most pertinent to quality care or child well-being in kinship foster homes. To clarify, articles that discussed caregiver, child or social worker ratings of child well-being in kinship foster homes, but restricted the participants' perspectives by requiring participants to comment on pre-determined indicators of child well-being or quality care, forth by the study's researchers, were not included. For example, Altshuler (1998) used a caseworker rating of child well-being based on the workers' perceptions of the child's mental health, physical health and school functioning, but the caseworkers were not able to indicate how they came to their conclusion or whether they in fact would have thought those categories were most relevant to child well-being in kinship foster homes. As such, they were left to nominally rate the child's well-being using terms such as "good" or "poor."

Study Limitations

Given that this scoping review was carried out as a graduate level thesis, there are some limitations that this author has attempted to correct for as much as possible. As this review is an individual task, it does not adhere to the recommendation made by Arskey and O'Malley (2005) that authors of scoping reviews consult with stakeholders who could verify the findings of the review and provide further insight prior to disseminating the findings to the general public (Arskey & O'Malley, 2005). Finally, as this author is

fluent only in English, only studies presented in English will be included in this review, which may affect the findings.

Clarification of terminology

For the purposes of this paper, *child/children* will refer to children living under the care of a relative in the context of a kinship foster home, regardless of whether it is described in the context of the children's relationship to his or her parent or caregiver (e.g. aunt or grandmother). The definition of *kinship care* varies slightly by author, but generally refers to a living arrangement wherein a grandparent or other relative provides full-time care for a related child (Dolan, et al., 2009). There are distinctions between formal arrangements, when the kin is providing foster care under the supervision of child protective services or a court system (Green & Goodman, 2010), and informal arrangements when there is no legal recognition of the relative as a caregiver. For the purposes of this analysis, *kinship home* will refer only to formal kinship foster care arrangements.

Findings

This chapter will describe the sample that was used for the present study, discuss how the chosen methodology of a scoping review has impacted this study's sample, and outline the major themes that emerged from this scoping review. As a reminder, the intent of this review is to determine what the existing literature tells us about what children, kinship caregivers and social workers perceive to be most essential to providing quality care in kinship foster homes. The major findings addressed in this chapter will be organized based on the following themes: the quality of the relationship between the caregiver and child; the need for the child to experience a welcoming beginning at the kinship foster home; child safety; the receipt of support by caregivers; and children's voices being heard by their social workers.

Final Sample

This author felt that the unique methodology of a scoping review would best determine what the existing literature tells us about what children, kinship caregivers and social workers perceive to be most essential to providing quality care in kinship foster homes, as it is the only methodology of which this author was aware, that would be feasible for one person to carry out and still allow for a thorough review of the relevant literature to date. As well, such secondary data research and analysis can allow for a more comprehensive representation of the issues relevant to quality care in kinship foster homes, according to those involved in them, than could a single qualitative study carried out at the thesis level.

Using the scoping review methodology, this author searched the existing literature using the key words "quality," "kin*," and "foster," to access previous studies that have

examined or discussed quality care in kinship foster homes. The resulting list was then reduced to only include studies wherein the perspectives of people directly involved in kinship foster homes were collected, at least in part, through qualitative means. Omitted from this review were studies that somehow restricted the participants' responses, for example, by requiring them to rate pre-determined indicators of child well-being or quality care put forth by the study's researchers (e.g. Altshuler, 1998). Though such studies provide valuable information, they are not relevant to the present study which seeks to understand what can be learned about quality care based on the firsthand knowledge of the people directly involved in kinship foster homes.

Of the over two thousand articles that were retrieved from the databases employed to locate relevant studies, only eight studies ultimately met the previously described inclusion criteria. The children, caregivers and social workers whose perspectives were presented in those studies are considered the sample for the present review. This small sample size speaks to the dearth of literature that has sought to consider quality of care in kinship foster homes from the perspectives of the involved children, caregivers and/or social workers. The voices of 196 children from kinship foster homes, 196 caregivers and 30 social workers are represented in the sample. One of the studies (Wilson & Conroy, 1999) interviewed an additional 942 children who were living in either kinship or non-relative foster homes, comparing them to the experiences of children living in group care. Though the exact number of children representing kinship care was not mentioned in that study, Wilson and Conroy (1999) explained that there was not a statistically significant difference in perception reported by children in the kinship and non-kinship foster homes, therefore their opinions will be included in the present study.

Three of the studies presented qualitative findings, while the remaining five presented data from mixed qualitative and quantitative methods.

A Loving Relationship Between the Child and Caregiver

The majority of the studies that met the inclusion criteria of this scoping review highlighted how essential the caregiver's love for the child is to providing quality care in kinship foster homes. In Altshuler's (1999) exploration of the successful aspects of the kinship foster care, all of the children interviewed discussed being loved. Of the 100 children in kinship care interviewed in 1995 by Wilson and Conroy (1999), 94% said they were "always" loved. Similarly, in discussing the needs of children in care who have developmental disabilities, one caregiver remarked "I think the needs are the same [as children without developmental disabilities]. I mean, all kids need to be loved. All kids need to be accepted. All kids need to have friends and family" (Schormans, Coniega and Renwick, 2006, p. 524). Other caregivers described the need for caregivers to "provide children with love and moral and spiritual guidance" (Chipman, Wells and Johnson, 2002, p. 512).

As part of a loving relationship between the caregiver and child, Chapman, et al. (2004) highlighted the importance of children in kinship homes being able to talk with their caregivers about things that are important to them. Findings from that study indicate that children in kinship care are more likely than children in other out-of-home placements (foster or group care) to talk to their caregiver about dating (66%) and school (88%) (Chapman, Wall & Barth, 2004, p. 300). Overall, the present study's sample indicates that the quality of the interactions between the caregiver and child in a kinship

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foster home is relevant to the perceptions quality care from the perspectives of the children and caregivers.

Positive relationships and frequent contacts between the caregiver and child prior to the placement are related to more successful kinship care experiences (Chang & Liles, 2007). If the attachment between caregiver and child was already there, the likelihood of a stable placement will be higher. Children in the present study's sample talked about the improved self-esteem they experience from their caregivers' consistent involvement with them (Wilson & Conroy, 1999; Altshuler, 1999). Speaking about how her caregivers show that they have taken an interest in her by inviting her to join them in activities, one child commented that "they made me feel good about me" (Altshuler, 1999, p. 225).

Altshuler (1999) felt that discipline should be considered a "type of caring" (p. 223), and concluded that increased discipline is associated with well-being. One fifteen year old in Altshuler's (1999) study named Angela commented that there were "more rules and expectations in her grandparents' home than in her…mother's home," and discussed how that increased structure in combination with her desire to "try to keep [her grandparents] happy" encouraged her to make better choices with regard to her own behavior (p. 222). Realizing that the caregiver would be disappointed if the child makes bad choices or does not make an effort to do well at school, for example, was found to reinforce good behavior (Altshuler, 1999).

A Welcoming Beginning

Several studies discussed the significance of how the caregiver and child experience the initial placement of the child into the kinship foster home, suggesting that it may be relevant to the involved parties' perceptions of quality care. Placements in

kinship foster homes can be unplanned (Chipman, et al., 2002) and children tend to experience the removal from their parents' homes as a "breakdown in family functioning" (Altshuler, 1999, p. 220). Caseworkers and caregivers reported that there are times when children are placed with relatives prior to the completion of any assessment of their fitness as caregivers (Chipman, et al., 2002), and if the relative is subsequently determined unfit to act as a caregiver to the child, it can mean that the child will experience instability and may even have been exposed to unsafe conditions. To address this issue, one child suggested that "caseworkers should have a meeting with the entire family which the child is going to…It'd be like prenatal care I guess, but for the family" (Chipman, et al., 2002, p. 512).

Some caregivers reported that they did not have a choice about accepting the child for placement (Chipman, et al., 2002), which can bring up safety issues or add strain to a family. As one caregiver explained, "all of a sudden this DCFS worker calls me and tells me I've got to take these four kids. This lady is just like, 'I've got to go to a meeting and you've got to take these children home with you.' I'm sitting there in shock…She kept typing this paper up. She ushered me out of her office and put these kids in my car. I'm sitting there, like Lord, what happened? What am I going to do?" (Chipman, et al., 2002, p. 512). The readiness that a caregiver feels in taking on the responsibility of a related child may impact the quality of the care that child receives.

Chang and Liles (2007) noted a correlation between the level of ease with which the caregiver decided to accept responsibility to care for the child, and the ultimate success of the placement. Based on their findings, they suggest that "social workers should assess the caregivers' levels of attachment and/or the quality of the relationships

with the children who might be placed in their care before placement decisions are made"
(p. 520), and further suggest the importance of increasing the attachment between
children and their relative caregivers once a placement is made. It should be noted that,
despite the challenges of the initial placement, some children described having had fairly
positive experiences on the first night at their relative caregivers' homes, noting that they
felt "welcomed and wanted" (Altshuler, 1999, p. 220). Altshuler (1999) added that the
children's initial experiences of being placed tended to depend on their understanding of
why they were placed into care, though unfortunately she did not explain why or how this
is so.

     The caregiver's ability to adjust to his or her changing role in the family was
found to be relevant to the quality of care in kinship foster homes. Caregivers of resilient
children reported feeling that they had more control over their situations and were
therefore less stressed, whereas caregivers of non-resilient children felt they had never
had a choice about whether or not to take care of their related children (Johnson-Garner
& Meyers, 2003). The difference between a caregiver who feels overburdened or
resentful and one who has adjusted well to the new role as caregiver is clarified by
statements made by some of the caregivers in the sample. One caregiver of a "non-
resilient child" stated "I don't have a life. I live from day to day. I am being honest. I
don't have a life anymore. I am a provider and that's what I do. I provide" (Johnson-
Garner & Meyers, 2003, p. 260). In contrast, a caregiver of a "resilient child" explained
her self-perception as more than just a provider, saying "I am always the parent"
(Johnson-Garner & Meyers, 2003, p. 260).

Child Safety

Only three of the nine studies included in this scoping review's final sample (Chipman, Wells & Johnson, 2002; Dunn, Culhane & Taussig, 2010; Wilson & Conroy, 1999) explicitly named safety as an important aspect of care for children in kinship foster homes in. Children were most likely to mention that safety was important, typically in the context of talking about their new home environment (Dunn, et al., 2010) or regarding the type of neighborhood in which they believe children in kinship homes should live (Chipman, et al., 2002). Of the 100 children in kinship care interviewed in 1995 by Wilson and Conroy (1999), 92% stated their perception that they were "always" safe (p. 60). Caregivers spoke about the need for children to remain safe, clarifying that a good kinship caregiver is "able to protect the child from the parents and from negative dynamics in and around the family home such as criminal activity, child maltreatment, domestic violence and substance abuse" (Chipman, et al., 2002, p. 517). In their study, social workers reported believing that safety is essential to a child's well-being in a kinship foster home, and felt that background safety checks of the potential caregiver, including of the caregiver's child-rearing history, are important to ensuring a safe kinship foster home environment (Chipman, et al., 2002).

Support for the Caregiver

This scoping review revealed that the benefit of increased supports and resources for kinship caregivers was discussed in regard to three potential sources of support: social workers, finances, and extended family. Many caregivers noted a need for increased accessibility to child day care, support groups for caregivers, tutoring services for the children in care, counseling for the caregivers and children, and training for caregivers,

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though many indicated that they were not aware of services and resources that could actually be available to them. Some caregivers in the study by Chipman, et al. (2002) explained that they did not request services for fear that the children in their care would be removed from their homes, while another felt that her case worker's attitude expressed that "we really don't have time to listen to your problem" (p. 517).

Miscommunications and a lack of contact between social workers and caregivers appeared to be at the root of many of the problems discussed. Chang and Liles (2007) revealed a correlation between disrupted kinship care experiences, wherein the child was removed from the home and placed into a non-kinship home, with less frequent contact between the caregiver and social worker. Caregivers from disrupted kinship care homes were also more likely to report that their social workers had not discussed the child's service plans with them. It is important to note that nearly half of the disrupted group indicated that they would have wanted to receive some sort of foster parent training, indicating that increased support may have helped avoid placement in a non-kinship foster home (Chang & Liles, 2007).

In addition to increased contact and support from social workers, caregivers discussed the need for financial support matching the child's needs, in order for the caregivers to be able to afford connecting the children in their care with additional beneficial services, such as therapy (Schormans, et al., 2006). Overall, resilient children tended to reside in kinship foster homes with higher levels of emotional (comfort from extended family and friends, counseling); instrumental (financial assistance, child care, respite care, and other services); and informational (legal advice, resources and

knowledge of child welfare system, information about kinship care programs and procedures) support (Johnson-Garner & Meyers, 2003, p. 262).

Having a Say/Being Heard by Social Workers

Children in the sample expressed their need to have their voices heard by their social workers. One fourteen year old girl identified the fact that her caseworker and caregiver engaged in dialogue with her to discuss vital issues in her life as "crucial for her well-being" (Altshuler, 1999, p. 228). Children interviewed by Chipman, et al. (2002) similarly expressed "their need for involvement in planning and placement decisions" (p. 515). Unfortunately, based on the responses children provided to Wilson and Conroy's (1999) question "did you help your caseworker decide what was going to happen to you after you left your own family and were living somewhere else?" the authors realized that "although children know what they want and can respond reliably," their input is often not sought out during the permanency planning process (p. 63). Children know what they want, and they need their social workers to listen. Dunn, et al. (2010) noted that children that they interviewed "seemed to appreciate being interviewed about their experiences and seemed pleased that someone was interested in their opinions," pointing out that "this is an important lesson for researchers, child welfare workers, and caregivers, who may presume that it is better not to ask these kinds of emotionally-charged questions" (p. 1328).

Advice for Social Workers

While the children interviewed for Altshulter's (1999) study all reported liking their caseworkers and feeling that their actions contributed to their well-being, overall, caregivers and children in the present study's sample had plenty of advice for social

workers as to how the quality of care provided to children in kinship foster homes could improve.

Many caregivers (and caseworkers) expressed frustration in regard to the power imbalance between kinship caregivers and the child welfare system as a whole, with some caregivers stating that social workers should involve caregivers more fully in the case planning process (Chipman, et al., 2002). How social workers can be effective simply by listening and explaining to the caregivers was clear. One caregiver commented "when we have a good social worker…we've got it made." Other caregivers expressed the need for social workers to be emotionally present for the children in kinship care, stating that "it sets the child back …if the person isn't even interested in the child and is just there for the sake of making a living" (Schormans, et al., 2006, p. 526). The overall message was that support from social workers must be rooted in respect and caring for both the child and the caregiver. A 14-year-old, encouraged social workers to "show them that you care" by bringing the child to a safe home, being nurturing, and spending as much time as possible with the child. The child further explained that children who are removed from their parents' homes may be "scared to get affection cause they have never been shown affection" (Altshuler, 1999, p. 230).

Among other caseworker practices that contribute to the well-being of children in kinship foster homes, a boy mentioned that "caseworkers should be trying to do the best they can, work with kids to express their feelings, how they feel, and about their parents" (Altshuler, 1999, p. 230). Another child expressed his feeling that the priority of social workers should be to keep the child living with their parents, articulating the need to value families: "Help kids to stay with their parents. Try to help their parents get off the

drugs," and when children do need to be removed, they should be "put…with a good relative…take everybody out the foster homes, put 'em back with their family" (Altshuler, 1999, p. 231).

Not Mentioned as Often

The health of the caregiver, the characteristics of the child in care, and the child's academic success, were not often mentioned as important to the child's receipt of quality care in kinship homes*.* Just one of the studies (Chipman, et al., 2002) mentioned that the caregiver's health is important to the quality of care, and only insofar as it is "relative to the child's needs and capacity for self-care" (p. 517). Chang and Liles (2007), who looked at the perspectives of caregivers whose kinship care experiences were unsuccessful (the kinship foster care arrangement was terminated and the child was placed in a non-relative foster home), noted that caregivers were more likely to report that the children in their care were less healthy, tended to get into trouble more either at school or home, and were older (p. 520-521), but no other studies in the sample spoke to the characteristics of the child as being related to their perceptions of quality care in kinship foster homes.

Conclusion

After completing a thorough search of the print and electronic databases that were available to this author and potentially relevant to the question under review (what does the existing literature tell us about what children, kinship caregivers and social workers perceive to be most essential to quality care in kinship foster homes?), only eight articles were found to meet the inclusion criteria of this scoping review, by discussing the perspectives of the people directly involved in kinship foster homes regarding their

conceptions of quality care. This finding suggests a possible lack of connection between the experiences of those who are directly involved in the functioning of kinship foster homes and the direction of the recent research pertaining to assessments of quality in kinship care. This will be considered in greater detail in the discussion chapter to follow.

Overall, the findings indicate that the perspectives of children, caregivers and social workers involved in kinship foster homes elaborate upon some of the previously constructed indicators of quality care such as safety, the quality of the relationship between the caregiver and child, and the receipt of support by caregivers. The studies included in this scoping review also highlight the importance of some previously ignored elements of quality care such as the need for the child to experience a welcoming beginning when placed in a kinship foster home, and the importance of children feeling heard by their social workers. The children and caregivers in this review's sample provided insight into how social workers could improve child well-being in kinship foster homes, emphasizing the effect that a social worker's attitude and presence has on the experience of the kinship foster family. The impact of a "good social worker" – one who listens attentively and provides support in a respectful and caring way – was made clear by the participants of the included studies. Implications and deeper discussion of the findings as they relate to social work policy and practice will be found in the following chapter.

Discussion/Conclusion Chapter

Introduction

This chapter will discuss the findings of this scoping review and analyze the extent to which the current literature on kinship foster care has included the perspectives of the involved caregivers, children and social workers in discussions of "quality care" in kinship foster homes. This chapter will compare the perspectives shared by this review's sample regarding what is essential to quality care in kinship foster homes, with the ways that quality has typically been assessed in kinship foster homes by researchers and policy makers, as revealed by the initial review of the literature.

Similar to the Literature Review: Love, Safety and Support

Some indicators of quality care that have been suggested by previous researchers and are implied in current child protection laws and policies, such as the quality of the relationship between the caregiver and child, child safety, and the receipt of support by caregivers, were echoed in the findings of this scoping review. For example, the majority of the studies included in this review discussed how important it is for children in kinship care to feel loved by their caregivers. The fact that love was the most widely cited element of quality care in kinship foster homes may seem so obvious that one can be tempted to move on to more surprising findings; however, it is the opinion of this author that it warrants further thought. While the question of what love does for the children in kinship foster care was not specifically answered in this review, it is important for all of us working with children involved in the foster care system to reflect upon the power that love has had in our personal lives. What would anyone be if it were not for the love of a caregiver or friend? Children in this study's sample elaborated on how significant it is

when their caregivers show that they are interested in them and eager to be involved in their lives. The finding that love is so valuable to the children in this study's sample speaks to Kang's (2007) theory that children benefit from the social capital gained from their relationships with their caregivers and kinship families.

Though love was more often discussed, child safety was named as an important aspect of care for children in kinship foster homes in a few of the studies included in this review. Social workers discussed their own roles in ensuring child safety in kinship foster homes by conducting background checks prior to placement. Social workers also supported the caregivers' notion that the caregiver's ability to protect the child, particularly from abusive parents and "negative dynamics in and around the family home such as criminal activity, child maltreatment, domestic violence and substance abuse," is essential to child well-being (Chipman, et al., 2002, p. 517). The findings did not indicate how social workers perceive their own roles in maintaining child safety in kinship homes, beyond ensuring completion of a criminal background check, nor did it indicate how social workers might improve child safety in kinship homes.

Literature reviewed appears to emphasize that children in kinship foster homes tend to be at an increased risk of living in poverty and their caregivers tend to have limited social networks. Children and caregivers in this scoping review were clear that they need increased social and financial supports, which they cited as essential to the provision of quality care in kinship foster homes. Specifically, many caregivers noted a need for increased accessibility to day care, tutoring services and counseling for the children in care, and support groups, training and counseling for the caregivers. Caregivers discussed stumbling blocks to receiving such services, including being

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unaware or uninformed of services and resources available to them, and not requesting

services for fear that the children in their care would be removed from their homes or that

the social worker would be unwilling to help (Chipman, et al., 2002).

Overall, the findings of this scoping review reveal that the dynamic between the

caregiver and social worker impacts the quality of care provided to the children in kinship

homes. Johnson-Garner and Meyers (2003) found that children who were doing well in

the kinship home placement tended to reside in kinship foster homes wherein the

caregiver received higher levels of emotional, instrumental and informational support –

some of which would require the case management of the social worker. Similarly,

unsuccessful kinship home placements were found to be correlated with less frequent

contact between the caregiver and social worker (Chang & Liles, 2007). Enhanced

quality of dialogue and frequency of contact between social workers and caregivers

appear to be necessary in order to meet the demand for additional emotional, instrumental

and informational support that seem to be so integral to the provision of quality care to

children in kinship foster homes.

New Insights: A Welcoming Beginning and Feeling Heard

From the perspectives of the children and caregivers in this review's sample

emerged important new insights regarding what might be considered truly essential to

quality care or child well-being in kinship foster homes. For example, the child's initial

experience of being placed with kin, and the participation and control allotted to the child

throughout the placement, were commonly discussed as being of high importance to the

children and caregivers in this review. Unfortunately, these topics are rarely considered

in literature pertaining to assessments of quality care in kinship foster homes where the perspectives of those directly involved in kinship foster care are not specifically sought.

Kin often become foster parents in times of family crisis (Phillips & Bloom, 1998), and the children in one study included in this scoping review (Altshuler, 1999) confirm that they experience their removal from their parents' homes as a "breakdown in family functioning" (p. 220). The degree to which the child feels welcomed and wanted when first placed under the care of a relative, and the readiness that the caregiver feels in taking on the responsibility of the child, appear to correlate with the success of the kinship placement, and may impact the quality of the care that child receives. In other words, the findings suggest that the experience of the initial placement tends to carry over throughout the duration of the placement. When caregivers are overwhelmed and unable to provide a welcoming beginning to their relative children coming into their homes, the likelihood of a successful placement diminishes.

Given the importance of the child-caregiver dynamic from the beginning of the placement, striving to increase the attachment between a child and his or her relative is an important goal toward which social workers should put their effort as soon as that kinship placement is being considered. This finding is supported by the literature review which suggested that the dynamics of the child-caregiver dyad could influence how the child, in particular, views his or her experience in the kinship foster home environment. Similarly, the findings of this review also indicate that children and caregivers relate the quality of their interactions to the overall care experience in their kinship homes, suggesting that kinship families consider good communication to be an indicator of quality care. It is the assertion of this author that strengthening those elements identified by kinship foster

families themselves as most important to the provision of high quality care in their home, will improve their experiences and in so doing will improve the likelihood of success in their kinship foster homes.

It is also important to consider what is *not* as important to the children and caregivers in kinship homes, to avoid overemphasizing issues that may add strain to the home. For example, the need for legal permanency was not discussed by the children and caregivers in the home across those studies included in the sample. This finding helps support Smith's (2003) theory that legal permanency may be less important to children placed under the care of their relatives. And, although it is frequently cited in the literature as a challenge faced by kinship foster homes, none of the participants in this scoping review discussed the educational attainment level of the caregivers as a factor relevant to the quality of care the child receives. This author's suggestion to focus on issues of importance to the kinship family to promote a successful placement experience, is based on a notion common to therapeutic treatment planning that treatment goals must be set or agreed upon by the client in order for them to be successfully met.

Study Strengths

The choice to use the scoping review methodology was driven by a hypothesis that the perspectives of the families and social workers directly involved in kinship foster homes are rarely sought in regard to quality care. The scoping methodology allowed this author to examine a large number of studies in order to establish an understanding of how frequently the perspectives of people involved in kinship foster homes are being considered as factors within the study samples. The limited sample of only eight studies that were found to discuss the perspectives of the people directly involved in kinship

foster homes regarding their conceptions of quality care, serves as evidence that this author's hypothesis was unfortunately correct. This choice of methodology also allowed this author to analyze how those perspectives can contribute to our understanding of the needs and strengths of kinship foster homes, and contributed to this author's ability to form the conclusions stated in this chapter. For example, caregivers and children are saying that they want their voices to be heard, and yet the findings of this scoping review indicate that there are only a limited number of studies that have included their voices.

Study Limitations

Given that this scoping review was carried out as a graduate level thesis, there are some limitations for which this author has attempted to correct as much as possible. As this review is an individual task, it does not adhere to the recommendation made by Arskey and O'Malley (2005) that authors of scoping reviews consult with stakeholders who could verify the findings of the review and provide further insight prior to disseminating the findings to the general public. As well, give that this author is fluent only in English, only studies presented in English were included in this review, which may affect the findings. With such a small sample, there remains a question of whether the perspectives included in this review are in fact reflective of the majority of caregivers, children and social workers involved in kinship foster homes. This small sample was unavoidable as it was limited by the unfortunately small number of studies that have sought the perspectives of the people involved in kinship homes in regard to quality care.

The majority of the children whose voices were captured in this review's sample were over ten years of age. Authors of the studies in which children participated often cited their decision to only include in their samples, only children who are old enough to

have the "cognitive and communicative skills to reflect upon and describe their experiences" (Chipman, Wells & Johnson, 2002, p. 510). Therefore, the perspectives of younger children in kinship foster homes are only minimally included in this review's sample. As Berrick, Frasch & Fox (2000) note, "conducting research with foster children is a complex undertaking: obtaining access to foster children, receiving consent for research participation, finding appropriate measures, and adequately training interviewers make learning about the children's experience from their own perspective quite difficult" (in Chapman, et al., 2004, p. 294).

Implications for Social Work Practice and Policy

The findings of this review indicate that the attitude of the social worker who works with kinship families will play a large role in the functioning of those kinship foster homes. The children and caregivers in this review's sample provided insight into how social workers could improve child well-being in kinship foster homes, emphasizing the effect that a social worker's attitude and presence has on the experience of the kinship foster family. The children indicated that they wanted their social workers to seek their opinions in regard to permanency planning, and show that they care about them, through consistent involvement. Children know what they want, and they need their social workers to listen. The findings of this scoping review indicate that children are not being included by their social workers in major decision making processes, such as permanency planning, and that such inclusion would improve the child's experience in care. The overall message was that support from social workers must be rooted in respect and caring for both the child and the caregiver.

In order for involved social workers to respond to the stated need to increase emotional and instrumental supports to kinship foster families, the child welfare system would need to respond to the needs of the social workers as well. Any increase in support provided by the social worker will involve time and energy. Additional visits to the kinship home or more engaging (and potentially lengthier) discussion while there, completion of more referrals to community services and support groups, and showing a higher level of interest and care about the child in care would all apparently benefit the kinship family, but might take a toll on the social worker. Smaller caseloads for social workers working for the child welfare system would make it more feasible to address the needs of kinship foster families. In turn, child protection agencies might see an increase in qualified applicants if there were a sense that the work expectations would be reasonable and might allow for the development of the kinds of connections with clients that tend to be sustaining to people in the human services. In other words, being able to spend more time with the families on their caseloads and gaining a sense that they are helpful to the families with whom they work, may boost the morale of social workers in the child welfare field. Establishing proper supports for social workers would likely be paralleled in kinship foster families.

Children and caregivers called for increased support for the family unit of origin (referring to the biological parents involved in the child welfare system whose children are still under their care), as well as enhancing the bond between relatives and children if removal from the home is likely to occur. One child in particular discussed his wish for social workers to elicit the participation of all family members in the planning process when a child's removal from his or her parents' home and possible placement with a

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relative or kin are being considered (Altshuler, 1999). Chapman, et al. (2004) found that children in out-of-home care are generally satisfied in their current placements, and tend to hope to someday live with their biological parents again. This indicates that to serve youth in kinship foster homes well, practitioners and policy makers should concurrently focus on building strong relationships with caregivers while also promoting continued relationships with biological parents.

Many of the findings speak to the caregiver and children's wishes to be more included in decisions relative to the child's care and placement. As stated by Chipman, Wells and Johnson (2002), as long as child welfare continues to increasingly place the burden of child protection onto kinship caregivers, kinship families "must be included in the case planning process to gain consensus on the goals of placement and achieve the outcomes envisioned within required time frames" (p. 518). Standard practice regarding permanency planning in child welfare agencies should include a meeting with all members of the child's family who might be able to support the child in the event of an out-of-home placement, including potential kin caregivers. Soliciting the active involvement of family members addresses the need expressed by children and caregivers in this scoping review, to have their voices heard, and encourages a sense of agency and empowerment in the family unit.

Conclusion

The purpose of the present study was to determine what the existing literature tells us about how children, kinship caregivers and social workers perceive the quality of care provided to children placed in kinship foster homes, using a scoping review methodology. The studies that made up the sample had a range of research questions and

purposes, but all discussed to some degree, the views of their study participants –

children, kinship caregivers and/or social workers – regarding their understandings of

what aspects of quality care were most important to child well-being in kinship foster

homes. Studies that discussed caregiver, child or social worker ratings of child well-

being in kinship foster homes, but restricted the participants' comments to indicators of

child well-being or quality care, pre-determined by the researchers, were not included.

While social workers tend to focus on child safety and permanency planning, this

review found that caregivers and children believe that less concrete elements such as the

caregiver's ability to welcome and provide love to the child, the emotional support and

care from social workers and the involvement of the child and caregiver in the planning

process were just as essential to the provision of quality care as child safety, money and

other resources. As noted by (Chipman, Wells & Johnson, 2002), "these differences in

perspective are important reminders of the responsibilities that families see for

themselves, even when workers may not focus on accountability in these areas."

According to the perspectives elicited in this review's sample, social workers assigned to

work with kinship foster families are crucial to the child and caregiver's experiences and

perceptions of the care environment. This suggests that social workers have the potential

to largely and positively impact the perceptions of care by focusing on the values

presented by kinship families.

This study was not seeking to prove that kinship foster care is superior to non-

kinship foster care, but rather to determine what people involved in kinship foster care

believe works best to ensuring high quality care is provided to children. Greater

preventative measures for child abuse and increased proactive (rather than reactive)

interventions are likely important ingredients to a more successful child protection system overall. Through completion of this scoping review, this author hopes to have accurately captured the values most essential specifically to the success of kinship foster care from the perspectives of the children, caregivers and social workers involved.

It is hoped that social workers and policy makers involved with the child welfare system will bear in mind the common theme of wanting to feel valued that was expressed by the caregivers and children in this review: Children benefit from feeling welcomed into the kinship home, they need to feel loved by the caregiver, and all parties want to have their voices heard and needs supported as much as possible in the decision-making process. Based on the findings of this scoping review, this author posits that working to strengthen or improve the relational and support elements that kinship foster families deem most important to the provision of high quality care will contribute to more successful outcomes for the children in kinship care.

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Appendix A

SOCIAL CAPITAL THEORY

Social capital theory states that social capital – the aggregate of one's social relationships, psychological bonds, and other interpersonal connections and relationships – acts as a resource that individuals can use to gain advantages in life; social capital can only exist in the context of relationships (Kang, 2007).

Appendix B

COLLECTION PROCEDURES

A total of 201 results from PsycInfo and Social Work Abstracts, and 154 results from PsycArticles, PsycBooks and Academic Search Premiere. The other Google Scholar categories were listed as follows: biology, life sciences and environmental sciences; business, administration, finance and economics; chemistry and material science; engineering, computer science and mathematics; medicine, pharmacology and veterinary science; and physics, astronomy and planetary science. None of these categories appear to be relevant to my search criteria, therefore to avoid superfluous results, these categories were omitted.