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# Can Stability in Out-of-Home Care Be Improved? An Analysis of Unplanned and Planned Placement Changes in Foster Care

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This article presents the findings of a study of unplanned and planned placement changes in foster care programs designed for restoration or time-limited assessment for long-term care. In this study, the causes of placement changes in the program are analysed to assess whether stability could be improved. The study was undertaken by examining computer records of placement changes over a 6-year period, in five Temporary Family Care (TFC) programs. Once these changes were identified, social workers were asked to describe the circumstances of the placement change for each named child. These were then categorised into two groups: unplanned and planned placement changes. Unplanned changes are those that were not anticipated at initial entry to care, nor during scheduled case reviews. The frequency of unplanned changes was 2% of all placements; within this group of unplanned changes no child had more than two unplanned moves and only 0.6% of children had two unplanned changes. Planned placement changes were those changes considered as part of routine case decision-making according to the requirements of the 'Looking After Children' (LAC) system. These changes occurred in 4.5% of all planned placements. Some children experienced both planned and unplanned changes. The changes were then categorised according to the reasons for change. Some placement changes appeared unavoidable. This finding leads to questions about whether instability can ever be entirely eliminated. The TFC programs appear to have a lower rate of breakdown than that reported in the literature; however, variations in study design make comparisons difficult.

■ **Keywords:** stability, instability, restoration, placement breakdown, specialised fostering

Instability of foster care placements has become an important factor considered in literature on the poor outcomes for children and young people in out-of-home care (Christiansen, Havik, & Anderssen, 2010; Jackson & Thomas, 1999). Placement changes have been described as causing children emotional trauma, decreasing a child's capacity for forming appropriate attachments to others, exacerbating emotional and behavioural disorders and leading to difficulty forming positive relationships. Placement changes have also been described as increasing foster care costs and carer distress (Pecora, 2010). Research has shown that instability in care is correlated with inconsistent healthcare, lower self-esteem, poor social integration and an impaired sense of identity (Ward, 2006).

This article describes the findings of a study of placement changes in foster care that was undertaken to enable permanency planning, that is, either restoration (to birth family), or time-limited assessment prior to long-term care. Placement stability during decision-making was a critical aspect of the design of these programs as a further strategy to ensure permanency for children. These programs are known as Temporary Family Care (TFC) and have been operating in New South Wales and the Australian Capital Territory for over 30 years. Programs ensure pro-active case management and there is a commitment to children and carers that placements will not be allowed to 'drift' over an unnecessary length of time. Three-months postplacement assistance is offered to families to ensure that reunification (the outcome of 90% of placements) is supported. The TFC programs uses the

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'Looking After Children' system (LAC) to ensure standardised quality of initial care planning and scheduled review meetings. When using LAC, workers are obliged to hold special planning meetings if the child's circumstances change. Further details of the program in relation to maintaining stability are explored below.

This study aims to assess whether the programs have successfully reduced the numbers of placement changes and, importantly, to understand the nature of ongoing placement changes to see where further improvements can be made.

## Background

Frequent placement changes appear to be a feature of care systems internationally (Ward, 2006). Comparing studies is difficult because of variations in time frames used by researchers, the differences in populations of children participating and the type of program studied. In the United States, research indicates a high level of placement change across the country. In one study, children averaged 3.2 placements when their median length of stay in foster care was 15.3 months. In California, 77% of foster children had three or more placements (during their entire time in foster care) (Pecora, 2010). One feature identified was that the majority of placement changes occurred in the first 6 months of placement (James, 2010). In the United Kingdom, Triseliotis and colleagues (2002) studied placement changes in children experiencing between 2 and 5 years of care and determined that 43% of placements break down (Christiansen et al., 2010). In Canada:

> Empirical studies have revealed a high level of placement instability in foster care. During a median time of 2.5 years in care, 22% of children (A = 4,288) had three or more placements (Pardeck, 1984); after 2 years in care, 56% ($N$ = 170) had three or more placements (Mill et al., 1986); during a median time of 4 years in care, 48% ($N$ = 73) had three or more placements (Kufeldt, Armstrong, & Dorosh, 1989; Palmer, 1996, p. 591)

In Australia placement changes are also common. The seminal work on wards' experience in care in New South Wales by Cashmore and Paxman (1996) revealed that:

> 'Only six of the 91 young people leaving care had only one placement, fourteen had two, but over three quarters had three of more placements and more than one in four (28.6%) had at least ten placements' (p. 27).

In the South Australian Foster Care study of 235 children:

> Analysis of placement moves revealed a very considerable level of placement instability during the first 4 months in care, with almost 40% of the sample moving at least once during that period … A striking feature of the placement data was the number of children who remained unstable in the foster care system a full 2 years after referral. Specifically, 50 children (20% of the remaining sample) still had not settled into stable placement … (Barber & Delfabbro, 2003, p. 163)

In a more recent South Australian study, almost 80% of children (in a study comparison group) had experienced seven or more placements when they had been in care for an average of 10.5 years (Delfabbro, Jeffreys, Wilson, & Borgas, 2009). In Victoria, children and young people experienced an average of 3.4 foster placement changes over a 5-year period and 23% had five or more placements (Victorian Government, 2003 ).

Placement change is generally seen as contributing to poor outcomes for children and carers; however, the significance of stability of placements as a measure of program outcomes has been contested. Some commentators claim that stability is only used as a proxy measure because it is easier to assess than changes in a child's development (Christiansen et al., 2010). Other commentators express concern about using stability of placement as a measure as it overlooks other major sources of continuity in a child's life, such as school, extended family relationships and friendships. Critics also point to the way 'stability' is accepted as a goal, even though it may be best for children to move placements (Jackson & Thomas, 1999). In this view, some changes will be seen by workers to be in a child's best interest, such as being united with siblings, or to better assess the child's needs, or because a relative has been identified to care for the child after the initial placement (Wulczyn, 2010). Wulczyn (2010) calls for greater research attention to the timing of moves, the mediating effects of child development and the cumulative impact of moves that a child experiences. These commentators indicate the need for a greater understanding of stability in a child's life.

The causes of placement change are usually explained in terms of characteristics of the child, their parents or carer and there is typically little emphasis on organisation of services or workers' characteristics (Oosterman, Schuengel, Wim Slot, Bullens, & Doreleijers, 2007; Palmer, 1996). More recent studies, however, have begun to explore the reasons for change. For example, in James' (2010) study of 771 children aged 2 years and older, there appeared to be distinct categories of reasons. The vast majority of reasons were related to 'policy', such as moving siblings together or moving children to kin care. Twenty per cent of placement changes could be directly related to a child's behaviour problems and a relatively small percentage of placement disruptions were related to problems with foster families or the biological family. Ward (2006) identified reasons for 700 children leaving out-of-home care placements (including residential care) in the first 12 months of placement. Her analysis shows that placement changes could be classified thus: 44% planned transitions, 5% instigated by child, 16% instigated by carer, 14% for foster care relief, 12% for other reasons including the death of a carer and closure of a res-



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idential unit (the remaining data was missing). While these two studies utilised different categories to assess the reasons for placement change, both indicate that the bulk of changes were planned and only a minority related to characteristics of the carers or child.

In reviewing the literature no research could be identified that explores the impact on children and young people of placement changes due to different causes, nor to levels of preparation for the change.

The study described below aims to provide Australian data on the causes of placement changes. Unlike the studies on incidence of breakdown described above, this study does not attempt to follow a child's entire period in care, neither does it look at 'point in time' assessment of the numbers of placements children have experienced. The study has not assessed the number of placements experienced by each child; for example, stability rates for the children who moved to long-term placements are not known. The study is unique in that it is based on a program with a strong commitment to preventing changes in placement. It is also a study of the causes of placement change in the Australian context.

## The Study

This study analysed records of 1,759 placements over a 6-year period (financial years 2004/5–2009/10) from five TFC programs run by Barnardos Australia. The reasons for placement change were categorised into planned or unplanned changes and the reasons for each change analysed.

### The Study Site

Temporary Family Care (TFC) programs are for children aged from birth to 12 years of age. They were established in 1977 to provided intensive casework support to families in order to enable the speedy restoration of children to their parents. Where restoration was not viable, time-limited planning was undertaken to move the children into a separate, long-term fostering and adoption program or to kin carers. The programs were located in rural and urban areas: on the South Coast, South East Sydney, Auburn and Penrith in Western Sydney and also in the Australian Capital Territory. TFC programs were generally located within Children's Family Centres, where family support and childcare were used to prevent unnecessary placements, and support the postplacement period. These programs also offered planned periodic respite care; however, these children are not included in this study.

The TFC programs were designed specifically for time-limited resolution of children's situations as well as continuity of placement. Although there was little research on the causes of instability of placements when the TFCs were developed, a number of factors were built into the program based on practitioner experience of what would reduce placement breakdown. Programs were developed in local communities to keep children's placements close to their schools and to friendship and family networks. Carers were especially recruited to provide time-limited care and were trained in the importance of maintaining continuity. Casework staff were given adequate time to work intensively with carers and birth families. Carers were paid above government basic reimbursement rates to provide ongoing incentive to care. Siblings were kept together, as this increased children's chance of feeling settled (any sibling separation required social work supervisor's approval). Only one child or sibling group was placed with a carer at any one time. This acknowledged the impact on placement of numbers of sibling groups on instability. This has subsequently been shown in a Californian study in which risk of placement change increased by 5%, 12%, 20%, 28% and 36% when there were 1, 2, 3, 4, and 5 children respectively in the home (Chamberlain & Lewis, 2010). Studies show that the greatest danger, when subsequent children or sibling groups are placed, is for children who are already in placement (Ingley & Earley, 2008).

Length of stay in care varies for children in Temporary Family Care Programs. Although no analysis of length of placement for this whole study group has been undertaken, a separate study involving a random selection of 168 of these children has analysed their length of stay. The length of stay was: for 19% of the children up to 4 weeks, 23% for 1–2 months, 21% for 3–6 months, 24% for 7–12 months, and 4% of children were in care in care for 12 months or longer. Information was unknown for 9% of the children (Fernandez, 2010).

## Method

This study was undertaken by senior managers from the agency. They examined computer records of all placements for the 6 years to identify any change of carers. The records used were taken from 'Looking After Children Electronic System' (LACES). These records had a high level of accuracy as they were used in many aspects of the agency's work: carers were paid by drawing on records of placement dates, workers were supervised according to data and official statistics developed for the funding body. In addition, quality of data was checked by independent file audits conducted annually by the NSW Office of Children's Guardian. These multiple applications helped to ensure that the data was regularly checked by a number of different authorities.

The researchers asked workers, who knew the history of the placements, to describe the circumstances of the placement changes. These explanations were then coded into planned and unplanned changes and categorised by the reasons for the change. Workers were then asked to check the coding.

Definition of placements and type of change were considered carefully. A placement was counted as a new



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placement if there was a gap of more than 2 months between successive entries to care; this was consistent with the 'counting rules' of the Australian Institute of Health and Welfare (Australian Institute of Health and Welfare [AIHW], 2009). Restoration to parents or to kinship carers was not considered to be a placement change. Unplanned changes were defined as those unanticipated in routine care planning and involved nonroutine LAC review of arrangement meetings. Typically, workers considered that there was not adequate time to prepare the child for the placement change and there was usually less than a week before the decision was made as to when the child moved. The definition of a planned change was any change in placement that workers anticipated at initial entry to care or during routine case review. For example, a change was deemed to be planned when the child was placed in an emergency with one carer and placed the next day with another carer, or where there were planned changes to move siblings back together. In the 'Looking After Children' system these decisions would be recorded in initial placement plans and generally in routine 'Reviews of Arrangements' meetings. Typically, these were placement changes in which the child was expecting to move or was prepared with more than a week's notice.

## Findings

Of the 1,759 placements examined there were 35 unplanned (2%) and 80 planned placement changes (4.5%); some children experienced both planned and unplanned changes. Placements ranged from a few nights to more than 12 months. Although average length of stay was not calculated for the placements, statistical work undertaken on a sample of 168 of the children indicates that 45% of the children were likely to be in care for between 8 and 52 weeks and 4% for more than 1 year (see Table 1).

In interpreting these findings, it should be noted that the numbers of children moving placements cannot be equated to numbers of placement changes. There are several reasons for this. First, placements may have involved sibling groups (Barnardos counts this as one placement). Second, some children had more than one placement breakdown. Third, children may have had many placements over the 6-year period (for example, a number of children had repeated placements as their parent battled mental illness or substance abuse and needed episodic hospitalisation).

A further issue when comparing these findings with other studies is that children in this study who moved into long-term care will have experienced another change of placement. Reunifications were also counted as placement changes in some other studies (e.g., by Barber & Delfabbro, 2003) but this study did not consider them to be such.

There did not seem to be noticeable differences between the five individual TFC programs studied in relation to placement breakdowns.

### Unplanned Placement Changes

During the 6-year period there were 35 unplanned moves of placements. The reasons are described in Table 2.

The children involved in unplanned placement changes were studied from the perspective of gender, age and length of time in placement to see if there were any discernable patterns. (Note that children who experienced multiple changes were counted again each time they experienced a change.) Twenty-five placement changes involved male children and 19 were female children (44 in total). Children's ages ranged from 2 months to 13 years; there were placement changes involving nine babies, fifteen children aged 1 to 4 years old, twelve aged 5 to 8 years old and eight were 9 to 13 years old (see Table 3). Length of time in care ranged from a few nights to over a year in care. Membership of a sibling group or the sibling group size did not appear to be correlated with placement breakdown. None of these characteristics of the children seemed related to patterns in breakdowns and this is understandable given the reasons for the changes described above.

**TABLE 1**

Placements, Unplanned and Planned Placement Changes by Centre During the Study Period

| Program | Placements | Planned placement change | Unplanned Placement change |
|---|---|---|---|
| Centre A | 653 | 24 | 4- |
| Centre B | 355 | 19 | 5 |
| Centre C | 181 | 6 | 4 |
| Centre D | 203 | 14 | 10 |
| Centre E | 367 | 17 | 12 |
| Total | 1759 | 80 | 35 |

**TABLE 2**

Reasons for Unplanned Placement Changes

| Reason for unplanned placement change | Placement numbers |
|---|---|
| Unavoidable life events for carer with very short notice (for example, accident, family crisis) | 11 |
| Allegation of abuse (reportable to NSW Ombudsman) or breach of code of conduct that urgently required a placement change for the safety of the child | 3 |
| Carer not coping with children's needs and child needed immediate removal (worker assessment) | 4 |
| Immediate inability to manage child's behaviour (carer assessment) | 3 |
| Carer unable to support the special needs of child (e.g., hospitalisation of child requiring intensive visiting regimes or sibling group) | 2 |
| Unknown: No information was able to be traced on the 'unknown' cases for unplanned breakdown due to inadequate recording on the file and workers involved no longer being available. | 12 |
| Total | 35 |



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**TABLE 3**

Unplanned Placement Changes by Centre, Number of Single Children and Number of Sibling Groups

| Program | Numbers of children in sibling groups in placements which changed | Single child in placements which changed | Total number of children in placements which changed |
|---|---|---|---|
| Centre A | 0 | 3 | 3 |
| Centre B | 4 | 2 | 6 |
| Centre C | 2 | 2 | 4 |
| Centre C | 4 | 6 | 10 |
| Centre D | 14 | 7 | 21 |
| Totals: | 9 groups totalling 24 children in placements | 20 single children in placements | 44 children in placements |

Note: Children may have been counted more than once if they experienced multiple unplanned breakdowns.

***Case study of unplanned placement moves.*** Two and 3-year-old siblings came into care referred by the statutory authority. The children were placed together with carers. However, 84 days into the placement a decision was made that the carers were failing to adequately meet the needs of the children (only two placements were in this category in the study). The children moved to second carers. The children remained with these second carers until permanent orders were made.

### Planned Placement Changes

The majority of placement changes (80 in all) were planned. The reasons are described in the Table 4.

***Case study of planned and unplanned changes.*** A small number of unfortunate children experienced both planned and unplanned changes. This was often in situations in which care went on for unusually long periods. It should be noted that, whenever possible, carers the children knew were used on second or subsequent placements.

A 10-year-old boy, 8-year-old girl, and 2-year-old constituted a sibling group of three children who came into TFC from the statutory child welfare department. The children were placed with crisis carers and this was a stable placement for all three children for almost 1 year (awaiting court orders). The carer's elderly father became unwell and the carer had to withdraw from fostering in an unplanned change. The three children then moved together to carers known to them as their weekend, planned periodic carer. The children stayed 3 months with these second carers and then had a planned move because the children's stay in out-of-home care was extended beyond the 3-month period originally thought needed for restoration home (this second set of carers was not available to extend the length of the placements). The children required another planned placement as the statutory department appealed the court decision not to restore the children to the father of one of the children. The children's original carers then become available again and two of the children moved back into their care. The three children were ultimately restored from these placements to kin (not counted as a placement change).

**TABLE 4**

Reasons for Planned Placement Changes

| Reason for planned placement changes | Placement numbers |
|---|---|
| Moves to be with siblings | 4* |
| Carer contract changed (this included when the child's stay in care was extended and was not possible for carers to continue or carer moved out of area). | 18 |
| ACT Legislation required that child could not spend holidays in another state | 4 |
| Child needs change | 2 |
| Shared care between two carers (child moved for holiday/break of carer) This is recorded as a move back and forth and has been counted only once. | 13 |
| Back to known carer/school/closer parents | 15 |
| Pragmatic (for example, a shift from immediate placement made during an emergency or weekend, to a placement designed for the remaining period in care) | 3 |
| Unavoidable life events (includes carer becoming ill) but this change could be considered at a routine care planning meeting | 9 |
| Carers experiencing difficulties managing (worker's decision) and this was considered at a routine care planning meeting | 9 |
| Unknown | 3 |
| Total | 80 |

Note: *Two young brothers came into crisis care and were placed together. While they were in care another sibling was born and this baby was removed at birth and placed with a different carer. The older children moved to join their younger sibling as their carer was unable to take a newborn.

## Discussion

This study has examined placement changes over 6 years in a foster care program designed for stability of placement. The study shows a rate of 2% unplanned and 4.5% planned placement changes, a total of 6.5% of placements changed. (This figure does not reflect the number of children affected as some children experienced both planned and unplanned changes, and whole sibling groups were affected at times.) The reasons for change did not appear to relate to the characteristics of the children, such as gender, age, size of sibling group or length of time in care. Changes were more likely to be related to unexpected life events affecting carer households or casework decision-making.

It is difficult to compare these placement changes with international placement stability figures because each study varies according to time frames (for example, over 5 years, 10 years or 18 months), different types of care (permanent, short-term or mixed) and age group of children (adolescents, young children). Most importantly, some of the studies 'tracked' children's experience or undertook 'point of time' studies, whereas this study examined placement changes in one type of program conducted by a single agency.



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Nevertheless, the rate of breakdowns for the five programs within Barnardos appears low in comparison with trends identified in other studies. This is particularly so as most placement changes in the research literature were identified as occurring early in placements (for example, in the South Australian analysis at 4 months [Barber & Delfabbro, 2003] or in James' [2010] study). This study is best compared with shorter term care as the TFC programs had a high percentage of placements under 12 months. This finding also suggests that program design of the TFCs may have an impact on placement changes (i.e., better designed programs need less modification).

Placement changes were shown to have multiple causes. Approximately one-fifth (18%) of placement changes were caused by unanticipated life events, which improved policy, care planning and assessment may not have affected. This was the case in 11 unplanned and 9 planned placements (20 in total). These changes were caused by factors including car accidents, illness in carers and their immediate families and, in some cases, relationship breakdown within the foster family. Other placement changes seemed similarly difficult to avoid. Three unplanned placement changes occurred because of serious, unanticipated allegations against the carers and, in these cases, the placement was changed immediately to protect the child from harm (not all these allegations were ultimately substantiated).

The bulk of placement changes (44%) were planned and based on casework decision-making to enhance the welfare of the child or sibling group. Fifty placements changed for the following reasons: the wish to return children to the company of their siblings (18), swaps between 'shared' carer arrangements (13), moves back to known carers or situations (15) and 4 were the result of legislative arrangements in the Australian Capital Territory (ACT) that meant children could not move out of state when carers went on holidays.

Children's behaviour accounted for only three unplanned placement changes, an additional two placement changes were unplanned because of special needs of the child and, in the planned changes, four related to children's needs changing. These findings are consistent with James' (2010) and Ward's (2006) studies, in which the child's behaviour was not seen as a significant factor in the number of placement changes.

A minority of placements disrupted because the carer was not coping; this involved four unplanned and nine planned changes. Given that over 1,700 placements were involved in this study, this is seen as a minor cause of changes. Although any change for this reason is not desirable, training of carers and support staff may not ultimately be able to produce greater stability.

It is important to note that no child in this program had more than two unplanned moves. Combining planned and unplanned moves, only one child had multiple moves in a situation of ongoing violence of the birth family towards carers, six placements had two moves and two placements experienced three moves. This figure appears to contrast with the literature cited above.

Characteristics of the children did not appear instrumental in determining the stability of the placement. Age and gender were not seen as relevant. Sibling numbers did appear to be implicated, but there were 35 unplanned placement changes involving 44 children: 26 were children in sibling groups and 18 were lone children in placements, although it is notable that two sibling groups contained four or more children. Rates of unplanned placement varied between five TFC programs within Barnardos.

In interpreting this study it must be acknowledged that TFC is of a particular model of foster care. One limitation in understanding the reasons for placement change is that there were a number of placement changes where the causes were unknown: 12 unplanned and 3 planned placements. The study does not consider the reunifications that occurred; however, a separate study by Elizabeth Fernandez (to be published in 2011) will explore this matter further.

Despite these limitations, this study has some significant policy implications. First, program design should be considered as a means of reducing placement changes. Second, certain placement changes may be inevitable or desirable for the longer term interests of the child and program design should therefore consider other sources of continuity for the child. The TFC programs were based in local areas that allowed school and friendship networks to be maintained even if a child moved.

## Conclusion

This article contributes to the emerging debate over how to measure stability and its meaning for children's welfare (Wulczyn, 2010). The study shows that some changes in placement appear to be outside the influence of policy and appear 'unavoidable', while others seem directly attributable to policy or legislation (e.g., the ACT legislation). In addition, many planned changes were undertaken for what workers and families believed to be for the benefit of the children. The TFC program appears to give higher stability rates than literature suggests is the norm.

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