LET ME THRIVE

A Research Study on Foster Care in Malta

Commissioner for Children, Malta
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Daniela DeBono
Marian Muscat Azzopardi

Office of the Commissioner for Children
Malta, 2016
The Office of the Commissioner for Children was set up in terms of the Commissioner for Children Act of 2003, to promote the welfare of children and the compliance with the UN Convention on the rights of the child, as ratified by Malta on the 26th of January 1990, and such other international treaties, conventions or agreements relating to children as are or may be ratified or otherwise acceded to by Malta.

The use of the term ‘Commissioner’ implies that there is a specific person who is working for children, and who is safeguarding their best interests. Rather than simply acting on adult assumptions regarding the needs of children, the Commissioner must promote children’s rights by being informed directly of the experience of children themselves.

The establishment of this entity was a significant step in the recognition of the rights of the child on a national level, and focuses on the protection of children, the promotion of children’s rights, the provision of necessary services for children, and the participation of children. The office acts as a focal point which monitors the current social and cultural situation in relation to children in the Maltese Islands, such that it can contribute substantially in the co-ordination that needs to take place across all sectors in order to have family-friendly policies that are also child oriented.
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MESSAGE FROM THE COMMISSIONER

While the rights of children are all equally important, they should not be thought of as discrete elements of the wellbeing of the child but as interconnected nodes in a system or gestalt of fundamental needs.

In this system, the child’s right to continuously receive care that is loving, protective and enabling for the child occupies a central position insofar as the realisation of this right is a natural prerequisite to the fullest enjoyment of other rights, such as the right to an education and even the right to health.

It is this consideration that has inspired the Office of the Commissioner for Children to consistently devote its energy and resources to exploring the situation of children in out-of-home care, whether under a care order, court order or on a voluntary basis, that is of children whose fundamental need for care cannot be met by their birth families all the time.

To this end, the Office commissioned scientific research to ascertain which forms of out-of-home care worked best for children. The results of this research by Abela et al, published in 2013, left little doubt as to the fact that foster care, qua a family-based model of alternative care, is conducive to the holistic wellbeing of children.

This overall research finding vindicated the reform of the out-of-home care sector that had taken place a few years back, with the introduction of a formal service of child fostering within the national child social work setup. At the same time, this finding begged the question: how can the potential of foster care address the needs of children deprived of their family environment?

The Office of the Commissioner for Children sought to shed light on this key question by commissioning another study, which is published on the following pages. This research, by DeBono and Muscat Azzopardi, delves deep into what makes children thrive or suffer in foster care and what can enable more children to thrive better in fostering. In so doing, the study throws light on the intrinsic complexities of foster care and the formidable challenges that need to be overcome for fostering to work in the best interests of the child.

In keeping with its mandate to give a voice to children, the Office of the Commissioner for Children has built the rationale of its research endeavours around the notion of probing into not so much the system of out-of-home care as the children who are or have been in the system.

This child-centred epistemology shines forth very lucidly from the depths of this qualitative study, whose findings and even recommendations have their source in the interviews which the researchers conducted with a number of children who were or had been in foster care. The personal experience of children in foster care is also at the heart of the interviews with birth parents, foster carers and other adult stakeholders.

This in itself sends out a very clear message which possibly sums up the aims and conclusions of this research, namely that children alone should be at the centre of the foster care system, which should revolve around the needs of the children being fostered.

I would like to applaud the vision and efforts of my predecessors, Sonia Camilleri, who commissioned
a study on children with very challenging behaviour, which dealt with out-of-home care issues, Carmen Zammit, who commissioned the first study on children in out-of-home care and Helen D’Amato, who published the same study and commissioned the present study. As the current Commissioner for Children, I am resolved to continue exploring the situation and supporting the needs of all children in out-of-home care.

A sincere note of thanks and appreciation is due to the protagonists of this project, namely the children and adults whose personal experiences of foster care make up the essence of the research, as well as Dr Daniela DeBono and Dr Marian Muscat Azzopardi, whose ability and sensitivity in eliciting these experiences constitute the strong backbone of the study.

Finally but significantly, I would like to thank those children who did not accept to participate in this research study. Their silence speaks volumes, revealing that beneath the surface, in some cases, there may be an abyss of pain and suffering felt by children in their experience of the out-of-home care service. May we listen attentively to these children’s silence and respond to it by multiplying our efforts to enable all children to receive loving, protective and enabling care throughout their childhood and beyond.

[Signature]
PREFACE

Child fostering is not an easy field to research. As expected from a field that deals with the care and development of children, it is highly charged. We met people who were contributing to this field with unlimited generosity. They were keen to participate in research that could contribute towards the development of policy that could have a positive impact on the lives of children, their families, their foster carers and all who work in the sector.

This research was commissioned by the Commissioner for Children. At the Office of the Commissioner for Children, we would like to thank in particular Ms Pauline Miceli, Commissioner for Children, Helen D’Amato, out-going Commissioner and Suzanne Garcia Imbernon, as well as Glen Gauci for further administrative support.

Access was particularly problematic and there were many organisations and individuals who helped with this. We are grateful for their support. They include the Foundation for Social Welfare Services; Appogg: the Foster Care Association; the Malta Union of Teachers; UNHCR Malta; JRS Malta; the Ministry for the Family and Social Solidarity; and the University of Malta. We thank them for their contribution in different stages of this research project.

We would also like to thank all those who shared their experiences, thoughts and ideas with us, during interviews and in informal settings. They helped us to understand the different contexts and processes. This book would not have been possible without the support and contribution of these people: foster carers, social workers, birth families, policy makers and academics. They provided us with invaluable insights into our research field. Our commitment to anonymity precludes us from mentioning them by name.

Finally, our heartfelt thanks go to the children and young people who shared their stories of being fostered within the local care system. Without their sincerity and generosity, this study would not have been possible. They trusted us with their stories and their ideas and we hope that in this book we have managed to capture what they wanted us to convey.

Daniela DeBono & Marian Muscat Azzopardi Malta, 2016
AUTHORS BIOGRAPHIES:

Dr Daniela DeBono Ph.D. is a Senior Lecturer at Malmo University, Sweden in International Migration and Ethnic Relations. She is currently based at the European University Institute on a three year Marie Curie (COFAS) Research Fellowship. She has degrees in Human Rights, Anthropology and Sociology. She has lectured at the University of Sussex, from where she also obtained her doctorate, the University of Connecticut in London and the University of Malta. She has also worked at the Commissioner for Children’s Office, where she was responsible for coordinating research and policy projects, at the National Commission Persons with Disability and Caritas Malta. Her work has been published in international peer-reviewed journals, as book chapters and open-access publications.

Dr Marian Muscat Azzopardi Ph.D. is a Visiting Lecturer at the University of Malta in Social Policy and Social Work. She has degrees in Human Rights, Children’s Rights and Social Policy, and has academic experience both in Malta and abroad. She has worked at the Department for Social Welfare Standards where she was responsible for the development of the 2009 Out-of-Home Child Care Standards, has chaired the working group that formulated a ten year plan for the sector and developed draft occupational standards for frontline caregivers. For nine years she was a member of the Council for Children, which is a consultative body of the Commissioner for Children. She has publications on different aspects of children’s rights in local and international publications.
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<th><strong>GLOSSARY</strong></th>
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<td><strong>Aftercare</strong></td>
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<td><strong>Birth parents</strong></td>
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<td><strong>Board of Appeal</strong></td>
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<td><strong>Central Authority</strong></td>
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<td><strong>Child</strong></td>
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<td><strong>Child Protection (Out of Home Care) Bill 2014</strong></td>
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<td><strong>Child’s social worker</strong></td>
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<td><strong>Children and Young Persons (Care Orders) Act</strong></td>
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<td><strong>Committee on the Rights of the Child (Committee)</strong></td>
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Cross-border foster care  

(i) a foster care placement provided by a Maltese foster carer to a child who is not a Maltese citizen but resides in Malta.  
(ii) a foster care placement provided by a Maltese foster carer to a child who is a Maltese citizen but resides abroad.  
(iii) a foster care placement provided by a foster carer who is not Maltese (and whose approval by a foreign authority is recognised by the central authority through an accredited agency) and who is looking after a child who is not Maltese but resides in Malta;  
(iv) a foster care placement provided by a foster carer who is not Maltese and is looking after a child who is Maltese but resides abroad. (AppoGG 2012)

<table>
<thead>
<tr>
<th>European Court of Human Rights (ECtHR)</th>
<th>a supranational or international court that rules on individual or State applications alleging violations of the civil and political rights set out in the European Convention on Human Rights.</th>
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<tr>
<td>Foster Care Act</td>
<td>enacted in 2007 to regulate child fostering in Malta.</td>
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<td>Foster Care Agreement</td>
<td>the agreement entered into, in accordance with article 24 of the Foster Care Act.</td>
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<td>Foster Care placement</td>
<td>a planned arrangement for a determinate period by which a child is placed in the continuous care of a foster carer, and through which the child is brought up in a family environment according to his/her best interests.</td>
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<tr>
<td>Foster Care Team</td>
<td>the team composed of social workers that supervise and support foster carers. (AppoGG 2012)</td>
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<tr>
<td>Foster Carer/s</td>
<td>one or more persons approved by the Fostering Board to foster a child.</td>
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<td>Fostering Board</td>
<td>the board established by virtue of Article 3 of the Foster Care Act.</td>
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<td>UN Guidelines for the Alternative Care of Children (Guidelines)</td>
<td>adopted by UN General Assembly in 2009 to enhance the implementation of the UNCRC and relevant provisions of other international instruments regarding the protection and wellbeing of children who are deprived of parental care or who are at risk of being so.</td>
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<tr>
<td>Looked-After Children (LAC) Service</td>
<td>the Looked-After Children Service shares responsibility with families in need of support, particularly when their children are in need of being looked after, that is, when their children are in care. (AppoGG website)</td>
</tr>
<tr>
<td>Migrant children</td>
<td>persons/children who do not hold Maltese citizenship.</td>
</tr>
<tr>
<td>Out-of-home child care</td>
<td>a placement of a child in care; this can include foster care, residential care or any other placement as determined by the authorities in order to promote that child’s wellbeing.</td>
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<tr>
<td>Service Area Leader</td>
<td>the team leader of a unit providing a service within AppoGG. (AppoGG 2012)</td>
</tr>
<tr>
<td>Supervising social worker – (Foster Carers’ Social Worker)</td>
<td>the assigned professional who has casework responsibility for the foster care placement. Their role is to liaise with, and support the foster carer/s. This social worker is also responsible for supervising and reviewing the care provided by the approved, licensed foster carer/s. (AppoGG 2012)</td>
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EXECUTIVE SUMMARY

Children in foster care in Malta are owed a service which retains their best interests at its core. This is an obligation of the State as enshrined in the United Nations Convention on the Rights of the Child (UNCRC) and in local legislation. Foster care is an essential component of out-of-home care, a service provided to children at times when their birth parents are not able to look after them. The length of the period that a child spends in care varies according to the circumstances of each individual. This book collects detailed experiences of stakeholders in the field of foster care and their ideas for improvement of the service. It gives priority to the contribution of children who have experience of foster care.

The findings show that stakeholders have specific concerns about the current foster care system. There are three main overarching concerns. First, in the past few years a worrying situation has developed whereby there is a decreasing supply of foster carers. This decrease does not match the demand for foster care.

Second, the welfare system was not set within a comprehensive legislative framework and therefore some of the core needs of children living in care are not being adequately met. And third, the system is not sufficiently resourced to allow for a realistic workload for key professionals, such as social workers of the children in care. Based on this study, the authors call for a review of the foster care service in Malta. The conclusions of this study together with the Commissioner’s recommendations chart areas of concern and gaps in the current system which need to be addressed.

The responses of the children and young persons were varied and indicated that some fostered children thrived and were happy. They were also optimistic about achieving their aspirations within the safety of a caring and supportive family. However, there were others who wished for more support in a system they felt was difficult to navigate and did not sufficiently empower their participation in decision-making. Some experiences highlighted disquieting areas of concern. They were marked with the pain of shattered hopes of belonging to a loving family. Some expressed remorse for bouts of emotionally charged ‘meaningful’ behaviour they felt had gone unsupported and had contributed to the breakdown of their foster care placement.

This study adopted a children’s rights approach, using the United Nations Convention on the Rights of the Child and the Guidelines, as well as the principles surrounding the best interests of the child and the participation of the child. The UNCRC provides that “States Parties undertake to ensure the child such protection and care as is necessary for his or her wellbeing…” (Art 3 § 2). To this end, the UNCRC further lays down that States Parties ‘shall take all appropriate legislative and administrative measures’ (Art 3 § 2). In the case of fostered children, falling as they do under the additional protection afforded for the ‘child temporarily or permanently deprived of his or her family environment, or in whose own best interests cannot be allowed to remain in that environment’, they are further ‘entitled to special protection and assistance provided by the State’ (Art 20 § 1). In providing the ‘appropriate legislative and administrative measures’, this special status further implies that the State has a duty to support the fostered child, the birth family, the foster family, social workers and agencies in the field.

Using a mixed qualitative methodology of in-depth interviews and participant observation enabled the generation of ‘deep knowledge’, rather than a series of empirical data. The study sought in
particular the voice of the child, but also included a vast range of stakeholder groups. Apart from informal conversations and participant observation, this book is based on 20 interviews with children and young people with experience of fostering, and 42 interviews with stakeholder groups including, among others, foster carers, social workers, birth parents and professionals. The following is a summarised list of key areas of concern:

**Timely support and monitoring of the birth family**

This study shows that birth families need timely support and regular monitoring, both of which are currently inadequate. Indeed, a crucial shortcoming is the statutory lack of the appointment of a social worker for the birth family at the time of commencement of the taking of the child into care. Without timely intervention problems tend to escalate and the needs of the child become more difficult to address.

Monitoring and supporting the birth family is considered to be an essential element in permanency planning which is essential to the short-term and long-term wellbeing of the child. In line with the Guidelines, options to reintegrate children with their birth families should be a “key part of a care review process” (p. 15). The guidelines also stress that national policy should “ensure that the decision to reunify a child with his/her family leads to a planned and gradual process during which the family is provided with relevant support” (ibid.).

**Children’s contact visits with birth families**

Contact visits with the birth parents are a source of serious concern and the contact system needs to be reconceptualised. The service should primarily aim to provide the quality family time as required by the child.

Professional monitoring of contact visits is necessary because, during these visits, the quality of the contact, the impact it has on the child and the parenting style of the birth families should fall under careful scrutiny. These elements are among the crucial indicators of what should be included in the care plan of the child. They help to determine the suitability or otherwise of keeping a child in care. They also indicate what support needs to be provided to the birth families, to the child and the foster carer in order to address their complex needs. Such support will require more financial and human resources than are at present available. Thus provision should be made for adequately-trained, professional, full-time supervisors and include the provision of a family-friendly venue for contact visits.

**Ongoing support of foster carers**

Foster carers require more ongoing support than is currently being provided. The data indicates that there is room for improvement in this regard. Foster carers also require more official appreciation and recognition of their 24/7 child care during the key decision-making processes such as those before the Advisory Board.
Foster carers’ contribution towards the formulation of the child’s care plan needs to be given more weight. Again, it is to be noted that the UN Committee in 2013 had called upon Malta to “further strengthen its national system for foster care and ensure the provision of adequate funding and support for foster families” (2013, 46c).

**Increasing the resources of welfare agencies**

More resources are required for the foster care system. Key professionals pointed to the overload of work with which the social welfare agencies needed to cope. The UN Committee had pointed out that more needs to be done in this area including “(to) increase the number of social workers to ensure that the individual needs of each child can be effectively addressed” (2013, 46b). Indeed the Committee expects Malta to “provide all the necessary human, technical and financial resources required for improving the situation of children in alternative care placements” (2013, 5e). Such improvement postulates a better functioning welfare agency.

There is also a clear need for a crisis intervention centre and round-the-clock support to assist the foster carers in critical moments. It is to be noted that until recently, in the event of placement breakdown, the alternative to foster care sometimes included the highly unsatisfactory solution of placing children in adult shelters.

Aftercare is another area of concern. When fostered children turn 18, even though they have reached the legal age of adulthood, they still require out-of-home care services in the form of aftercare. More resources need to be allocated for aftercare to facilitate transition to independent living.

**Respecting the voice of the child**

The voice of the child should be heard and respected during the whole process. This is a cornerstone of the UNCRC, and is one of the basic principles that guide judicial decisions of the European Court of Human Rights. The respect to the child’s voice also contributes to the protection of the child’s best interests. For the child’s voice to be respected, they have to have avenues through which they can express their views meaningfully.

Some fostered children complained that their real needs were not taken into consideration in some important decisions affecting their lives. This was partly based on the current legal framework, on a concern that the child’s social workers were not so easily available and on the difficulty of navigating the present decision-making mechanisms that included the Advisory Board. To some children, this meant that decisions were taken by persons and in circumstances that did not adequately take their real and actual interests into account.

In this context it is to be highlighted that there is a need for a more effective procedure in which the child participates more meaningfully when important decisions related to the child are being taken. Such decisions could be, for instance, for an authorisation for a child to go abroad on holiday.
Establishing judicial review

The system of regular review of whether the child should remain in care should not be an administrative one, but a judicial one. This is not a new proposal. The European Court of Human Rights has criticised the system of regular review for falling outside the scrutiny of the domestic courts in examinations such as whether the placement in care remained in the child’s best interests.

The best interests of the child

There is the need for a fuller statutory conceptualisation of what adhering to this principle, to which it is frequently referred, implies in practice. Without such a statutory conceptualisation, the principle is susceptible to varying interpretations by various organs. The principle places an obligation on decision-makers to take into account at all times and in a consistent manner how a decision will impact a child’s life and that the child’s best interests will be a prime consideration when taking such decisions.

Non-discrimination: migrant children and children in trouble with the law

Anecdotal evidence of informal fostering of non-Maltese immigrant children raises serious concerns. Informal fostering which is unregulated means that these children, which the Maltese State is also responsible for, do not enjoy the protection afforded by the State to Maltese children in identical positions.

Another form of discrimination exists with regard to children in trouble with the law who can, unlike other children, be deprived of their liberty as a result of the judicial process. The UN Committee on this issue had recommended that Malta “introduce(s) alternatives to deprivation of liberty and diversion possibilities, to avoid the prejudicial effects of deprivation of liberty.” It was therefore suggested that it would be good to introduce specialised foster care for children in trouble with the law.

Behaviour management in foster care

Behaviour management in foster care should not include smacking and/or any forms of verbal abuse. Under Maltese Law, all forms of corporal punishment are prohibited, as clearly stated in the Criminal Code and punishable by law. More resources are required to provide support for foster carers when they have to deal with circumstances where children might exhibit challenging behaviour.

Reduction of social stigma

Addressing the social stigma attached to children in care, including fostered children, is a continuous struggle that needs to be sustained. This was a common concern that arose during this study. Social stigma is sometimes perpetuated by the lack of knowledge or adequate sensitivity
from adults, including professionals. This adds unnecessary suffering and pain to fostered children. More critically, the effects of social stigma can counter the positive effects of other forms of care, protection and inclusion.

Finally, it is important to point out that the deficiencies outlined in this study are not insurmountable. The tools for an effective review of the system can be found in this study, together with the Commissioner’s recommendations, the Second Periodic Report of the Committee on the Rights of the Child, the UNCRC, and the Guidelines.
CHAPTER 1: INTRODUCING THE STUDY

1.1 Rationale

Fostering in Malta has a long informal history and a relatively short legal and institutional one. The major reform and institutional changes took place in 2007 when the Foster Care Act was enacted. This Act introduced key changes among which were the legal recognition of the status of foster carers, the role of the accredited agency with a dual emphasis on the protection of children and foster carers, and the foster carers right of access to information about the child.

Currently the only official accredited fostering services in Malta fall under Aġenzija Appoġġ. As part of its statutory obligations, Aġenzija Appoġġ issued policy and procedure manuals dealing specifically with foster care. These manuals are in compliance with the requirements of Article 18 of the Foster Care Act, which puts an obligation on an accredited agency to develop, update and execute written policies, procedures and manuals, which are subject to approval by the Central Authority. In them Aġenzija Appoġġ states its mission that it seeks to provide a quality experience for children in foster care placements and to create opportunities for children to thrive and grow with the support of community resources and qualified staff. The stated goal is to ensure that each child is placed in a safe and nurturing family who “will seek out a child’s needs and fulfil them” and “to facilitate the reunification of children with their natural families.”

Malta is signatory to the United Nations Convention on the Rights of the Child (UNCRC) and therefore has an obligation to ensure that out-of-home care for children is of an adequate standard and respects the basic dignity of the children. The Commissioner for Children is entrusted with monitoring compliance with the UN Convention. More importantly, the Commissioner is responsible for ensuring that children’s rights, especially for the most vulnerable, are respected and mainstreamed in services.

Looking at the figures between 2011 and 2014, the slow and steady increase of children in out-of-home care, was countered by a slow and steady decrease of foster carers. This is a particularly worrying trend.

Furthermore, these official figures omit ‘unofficial’ fostering that may be going on. In particular, this practice appears to be a commonplace alternative for vulnerable immigrant parents who are unable to take care of their children for some periods of time. No study has been conducted in this area and knowledge up to now is rather fragmented and anecdotal.

This study generates qualitative knowledge about the fostering ‘system’ in Malta, with a focus on the children’s experiences. Fieldwork was conducted over a nine-month period between 2014 and 2015. This study is done in partial fulfilment of the monitoring and assessing responsibilities of the


child fostering services as per Article 11(i) of the Commissioner for Children Act, 2004. A broad understanding of the system is adopted to include entities other than Appoğg, such as the different social work fostering services and related professional services that address the particular needs of foster children, foster carers and birth parents with respect to fostering. It also looks at the relevant legal, procedural, structural and administrative structures.

The main research question is:

What factors in the system contribute to meet the holistic needs of the fostered child in line with the principles enshrined in the UNCRC?

The sub questions are:

What factors are hindering successful fostering placements in Malta? In what ways can the service/s be improved?

This study contributes to local and international discussions on how to improve out-of-home care services. Key recent local studies that are relevant to child fostering and out-of-home care include Abela, Dimech, Farrugia and Role (2005), Galea Seychell (2011), Aldgate, Blewitt and Rose (2008), Abela, Abdilla, Abela, Camilleri, Mercieca and Mercieca (2012) and Muscat Azzoaprdi (2006).

1.2 Theoretical Framework: A Children’s Rights-Based Approach to Research

Broadly speaking, the theoretical framing of this research project is informed by children’s rights and the UNCRC that the Commissioner for Children of Malta is mandated to put forward. This theoretical stance is a reflection of the shift in paradigm from one that merely conceptualised children as in need of protection to one that viewed children as subjects of rights. Children’s needs today remain a powerful rhetorical tool for constructing versions of childhood, but the shift from children’s needs towards children’s rights can be seen as primarily reflecting an endeavour to understand the children’s point of view. This project is located in this school of thought and attempts to implement a children’s rights-based approach to research. The children’s rights-based approach to fostering adopted in this report is informed by the following: the UNCRC, the United Nations Guidelines to the Alternative Care of Children, the best interests of the child principle, and the participation of the child principle.

The Centre for Children’s Rights at Queen’s University Belfast builds the children’s rights-based approach to research on an application of the United Nations definition of a ‘human-rights-based approach’ to research with children. The approach, which ultimately furthers the realisation of children’s rights, has implications for all stages of the research process:

- research aims should be informed by the UNCRC standards;
- research process should comply with the UNCRC standards;

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• research outcomes should build the capacity of children as rights-holders to claim their rights and build the capacity of duty-bearers to fulfil their obligations.⁴

Researchers such as Dorothy Faulkner, Pia Christensen and Allison James have attempted to develop approaches that will allow children to participate in research (Christensen and James, 2008) and as a means whereby which they can have a voice (Bell, 2011; Muscat Azzopardi, 2009).

*The United Nations Convention on the Rights of the Child (UNCRC)*

The UNCRC is a legally-binding international treaty which lays out the civil, political, economic, social and cultural rights of children. It was adopted by the UN in 1989 and ratified by Malta in 1990. It is based on the acknowledgement that children have basic fundamental rights. States are required to meet the basic needs of children and help them reach their full potential.

The monitoring body of this Convention is the Committee on the Rights of the Child. States must submit regular reports to the Committee on how the rights are being implemented. When the Committee examines the periodic reports, it draws up its concluding observations that include its concerns and recommendations to the State Party. The recommendations address factors that are impeding the implementation of the Convention. Malta’s second periodic report was presented in 2010. After considering the Report, the Committee adopted its concluding observations 2013. The Committee’s recommendations in these concluding observations include some that deal with fostering.⁵

*The United Nations Guidelines to the Alternative Care of Children*

The duty of the State to provide alternative care to children who require it is laid out in Article 20 of the UNCRC that states that:

1. A child temporarily or permanently deprived of his or her family environment, or in whose own best interests cannot be allowed to remain in that environment, shall be entitled to special protection and assistance provided by the State.

2. States Parties shall, in accordance with their national laws, ensure alternative care for such a child.

3. Such care could include, inter alia, foster placement, kafalah of Islamic law, adoption or if necessary placement in suitable institutions for the care


of children. When considering solutions, due regard shall be paid to the desirability of continuity in a child’s upbringing and to the child’s ethnic, religious, cultural and linguistic background.

In order to ensure that this Article is implemented as intended, the United Nations has developed Guidelines for the Alternative Care of Children that were approved by the UN General Assembly in 2009. The Guidelines are a non-binding instrument. However, States Parties are expected to draw on these guidelines when formulating legislative, policy and programming initiatives regarding the prevention and the provision of alternative care for children. In order to ensure that the Guidelines are implemented as intended, an explanatory report Moving Forward was also published in 2012 to facilitate the interpretation of the intended meaning of the Guidelines. The Guidelines’ two basic principles of alternative care for children are the following:

- that such care is genuinely needed (the ‘necessity principle’), and
- that, when this is so, care is provided in an appropriate way.

The Guidelines specify that acting on the ‘necessity principle’ first involves ‘preventing situations and conditions that can lead to alternative care’ (p. 22). It also involves the establishment of ‘a robust gatekeeping mechanism’ to the admission of children into care and that the ‘placement must be regularly reviewed’ (p. 22). Respecting the suitability principle means that the alternative care of the child ‘must be provided in an appropriate way’ and that ‘all care settings must meet general minimum standards’ and be matched to the individual child concerned (p. 22).

**Taking account of the ‘best interests of the child’**

The Guidelines note the central importance of the ‘best interests of the child’ principle. This principle should be taken into account as ‘a primary consideration’ when decisions affecting the child are made by ‘public or private social welfare institutions, courts of law, administrative authorities or legislative bodies’ (UNCRC article 3.1). However, they state that ‘much confusion surrounds the meaning and implications of this concept in the context of promoting and protecting children’s rights’ (p. 24). They emphasise that “misinterpreting the aims and scope of the ‘best interests principle’ can lead in practice to highly inappropriate and harmful responses to children who are or are at risk of being without parental care” (p.24).

The Guidelines outline three interdependent requirements that emerge from UNCRC Article 3.1:

1. Whenever the entities mentioned above are involved, they must determine the best interests of the child. This means making a decision on the basis of all information requested and/or made available. This responsibility for determining best interests is particularly important where there is a conflict of opinion or where there is no primary caregiver.

2. In coming to a decision that affects the child, these entities should also take account of the rights and legitimate interests of any other party (eg parents, other individuals, bodies or the State itself) as well as other pertinent factors. Thus, although priority to the child’s best
interests is seen as the guiding rule in practice, decision-makers are not actually bound to follow this in every instance. Requirement 2 should be balanced with requirements 1 and 3 and should not be interpreted outside the context of these three UNCRC requirements.

3. When a ‘best interests’ decision has to be made between various appropriate and viable options for a child, it should in principle favour the solution considered to be the most positive for the child – immediately and in the longer term. At the same time, any final decision should be thoroughly compliant with all the other rights of the child (p. 24).

The Guidelines also state that in the context of the alternative care of children, best interest determination (BID) “should be grounded in an assessment undertaken by qualified professionals and should cover at least the following issues:

1. The child’s own freely expressed opinions and wishes (on the basis of the fullest possible information), taking into account the child’s maturity and ability to evaluate the possible consequences of each option presented.

2. The situation, attitudes, capacities, opinions and wishes of the child’s family members (parents, siblings, adult relatives, close ‘others’), and the nature of their emotional relationship with the child.

3. The level of stability and security provided by the child’s day-to-day living environment (whether with parents, in kinship or other informal care, or in a formal care setting):
   a) Currently (immediate risk assessment)
   b) Previously in that same environment (overall risk assessment)
   c) Potentially in that same environment (eg with any necessary support and/or supervision)
   d) Potentially in any of the other care settings that could be considered.

4. Where relevant, the likely effects of separation and the potential for family reintegration.

5. The child’s special developmental needs:
   a) related to a physical or mental disability
   b) related to other particular characteristics or circumstances.

6. Other issues as appropriate. For example:
   a) The child’s ethnic, religious, cultural and/or linguistic background, so that efforts can be made, as far as possible, to ensure continuity in upbringing and, in principle, maintenance of links with the child’s community
   b) Preparation for transition to independent living.

7. A review of the suitability of each possible care option for meeting the child’s needs, in light of all the above considerations” (p. 25).

Additionally, the Guidelines specify that after considering other relevant factors the competent bodies should explain to the child the reasons why they have come to a decision regarding BID.
The reason for their decision should be explained to the child, especially if it does not correspond to the opinion s/he expressed. They also state that a BID assessment should also be carried out each time a placement comes up for review. Furthermore, in emergency situations that require immediate protective action, the full BID process should be launched ‘as soon as practicable after the initial emergency response – ideally with an agreed protocol for doing so’ (p. 25).

Participation (voice) of the child

The UNCRC also provides the right to all children capable of forming their views, to express those views freely and to be heard in all matters affecting them (Article 5 and 12). Where States assume their responsibilities under the UNCRC to inform children of their rights, children’s participation in decision-making becomes part of the system. However, as stated in the Guidelines:

Too often, children are placed in alternative care without fully understanding why, or without being given a chance to express their opinions. This clearly contravenes UNCRC Article 12, which gives children the ‘right to be heard’ in all judicial or administrative procedures affecting their lives. In many cases, children who are arbitrarily or inappropriately placed in care subsequently make their views known in various ‘non-verbal’ ways, such as withdrawal, refusal to cooperate, absconding or otherwise disrupting the placement. This means that their overall experience of alternative care will be resolutely negative and may have serious repercussions for their present and for their future. (p. 26)

The Guidelines stipulate the need to consult with every child in all decision-making related to the out-of-home care. They also point out that ‘an appointed child representative’ and/or ‘the views of those on whom the child has come to rely, helps ensure that decisions about an alternative care placement correspond as far as possible to the child’s own expectations’ (p. 26). They also specify that national policy should embed children’s rights to participate in legislation and policy.

With regards to the support required for the participation of children in alternative care procedures and processes the following are stipulated:

- Ensure legislation and national policies on child protection and alternative care include a commitment to children’s participation and are underpinned by a child rights approach;
- Require children’s views to be sought for decisions regarding their placement, the development of care assessments, plans and reviews. This should include seeking children’s views on services which can support children and their families and carers;
- Provide children with information so that they can make informed choices and can fully participate in decision-making processes. This should include access to child friendly versions of their rights and free legal representation of lawyers trained in care matters where appropriate;
- Preserve information on children’s background and origins so that children, or others with children’s permission, can research their origins;
• Ensure that the child’s family, or other significant people that a child trusts, are also consulted on decisions;
• Require that children have access to a trusted adult where they want support and to talk to someone confidentially;
• Make provisions so that a child can be heard directly through a representative or body where a child is very young or is unable to express an opinion verbally or through other means of communication;
• Ensure that children’s views are taken into account in decisions on contact with, and during visits to, their families. (p. 27)

1.3 Research methodology: A child-centred qualitative approach

The aim of this research was to obtain in-depth knowledge about two related issues: factors that contribute to meet the holistic needs of the fostered child and factors that may contribute to foster care placement breakdowns in Malta. The research methodology best suited to answer the research question is a mix of qualitative methods, specifically in-depth interviews, participant observation and immersion in the field.

These qualitative methods are more appropriate to research projects that seek to obtain the comprehensiveness of perspective that is being sought in this study (Rubin, Babbie, 2010). Contextual statistics are presented with the sole aim of giving a picture of the current situation. The collection of relevant legislation and policies was essential in order to understand the structural aspects of the system.

In line with the theoretical framework of this study, the research methodology centres around protecting and empowering the child. This means that at every stage of the process, including the research process (initial planning, approval, choice of participants, data collection, analysis, data retention, evaluation etc) the interests of the child will remain paramount. The children’s rights approach means that the study is also based on the belief that children are competent research participants (Anderson, 2005). The implications of this will be explained further below.

**Mapping the field**

The first stage consisted of mapping or constructing the field. The apparent boundaries of the fostering system were those set by the only accredited agency, Aġenzija Appoġġ, offering fostering services in the country. This included the children being fostered, foster carers, social workers involved in the different departments and various other professionals. After some initial groundwork however it became apparent that the boundaries needed to be stretched to include other decision-making bodies located outside the accredited agency. These included the Ministry responsible for fostering where policy development and proposals for legislative reforms are set, and where the Fostering Board and the Central Authority are located. It is also where the Advisory Board is based. The Advisory Board occupies a key role in the system. It is the duty of the Board to advise the Minister on the best methods of dealing with every child or young person committed to or taken into his care in accordance with The Children and Young Persons (Care Orders) Act, to exercise general
supervision over such children and in general to promote their welfare.  

Finally, it became apparent during fieldwork that informal fostering was taking place with irregular migrant children. This area, although due to its unofficial nature is not represented in the accredited agency’s statistics, was also included in the research ‘field’ for this project.

However, as Amit (2000) points out, the idea of a neatly-bounded field in this kind of research which involves many multi-layered human and social networks is an oxymoron in itself. What he is critical of is the traditional approach in anthropology and the social sciences to delimit a field obsessively, and often spatially. He reconfigures the construction of the field, and in this sense makes it an essential tool for ethnographers and social scientists involved in field research: “The construction of an ethnographic field involves efforts to accommodate and interweave sets of relationships and engagements developed in one context with those arising in another.” (Amit, 2000: p. 6) In this study, the establishment of these rough so-called ‘boundaries’ described above were used as a guide to delimit and scope the research. This was necessary also because of the ample use of field research and participant observation.

**In-depth interviews**

The main data collection method used was open in-depth interviews. The knowledge sought from the interviews conducted with children and adults differed slightly. Interviews with children sought to understand how children perceived and experienced their lives as fostered children (the conduction of these interviews will be discussed in detail later in this chapter). Interviews with adults also attempted to understand how they perceived and experienced the system, but, depending on the position held by the adult, some adult interviews sought to get detailed knowledge of the official studies and everyday practices that take place within the system.

The researchers’ engagement during the interviews was adapted to suit the communication style that the individual respondents felt comfortable with. Probes were used judiciously to elicit any further elaboration of points raised by the respondents. This interview style allowed the researchers to engage with the issues brought up by the respondents themselves. Indeed, in the course of many interviews the respondents opened up new pathways, and unsolicited but relevant digressions from the main topic.

Interviews, on the whole, took the form of casual, at times impassioned, conversations which ranged from one to three hours. The interviewees’ commitment and engagement with the field was evident almost across the board. Upon being invited to participate in the research project, some interviewees indulged in long conversations in person or over the phone. Others kept contact after the interviews, which resulted in several follow-up conversations and correspondence. When interviewees accepted, interviews were recorded. Most interviews were transcribed in full, some interviews were selectively transcribed and for the rest detailed notes were taken.

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6 Chapter 285 Children and Young Persons (Care Orders) Act.

Anonymity was not only guaranteed to all the interviewees, but it was also imposed on those who expressed a wish to be cited by name. Anonymity serves to protect the identity of the interviewees. It also served to meet the aim of having frank and honest conversations on a delicate and sensitive topic. We wanted to avoid, at all costs, our interviews becoming a platform for protest or political leverage, or giving the impression that we might be able to assist in the individual cases.

Interviews were conducted in various public and private places. Care was taken to ensure that the respondents felt at ease and that the interviews could be carried out at the level of privacy that the respondents chose. Interviewees were generally asked to choose a location of their preference. This included: private houses, offices, coffee shops and restaurants. In the case of children, they were given a choice regarding privacy and their wishes were respected regarding the presence or close availability of other persons of their choice.

**Participant observation**

Participant observation was an important part of the methodology used for this study. Participant observation and immersion in the field yields deep data on behavioural practices which complements the material that comes out of in-depth interviews. This kind of participant observation and immersion in the field requires presence in the various areas of the multi-sited field we were looking into, extended conversations with key people and the recording of this through note taking. Marcus and Fischer describe immersion in the field as a ‘messy, qualitative experience’ (1986, p. 22). This kind of fieldwork, Malkki (1997) notes focuses on the mundane, everyday lives of people. The aim is to uncover meaning behind behaviours and generate data that could meaningfully add to the understanding of the fostering field.

Participant observation included spending time with fostered children under the age of 10 in a space where they regularly meet, spending time in spaces where the formal operations took place, such as Centru Hidma Socjali (where the meetings of the Advisory Board are held and the seat of DSWI), the Ministry for the Family (where the Foster Board is located and policy development takes place), in the private homes of foster carers and by attending other activities where any of the stakeholders were meeting, such as conferences, seminars and talks.

**In-depth interviews and participant observation with children**

Before the interview began, the child’s consent to participate was sought in a manner that is similar to that utilised with the adults. They were given the opportunity to provide a consent signature or mark. In some cases this was done verbally and was recorded as in the case of adults. It was made clear to the children that confidentiality would be waived in the rare case that there is a perceived risk of serious harm to the child.

When the interview was recorded, the child was asked to start, pause or stop the recorder whenever the child wished to. Before starting the actual interview, the researcher introduced herself and generally started a discussion about a topic that was of interest to the child. This made the interview less formal and helped the child to connect with the researcher and to respond more comfortably to the interview.
The aim of our engagement with children was to explore in some detail the individual personal manner in which these children perceived, experienced and made sense of their lives as fostered children. We wanted to know which processes and outcomes of fostering mattered to them and how far these were being realised. The broad open-ended questions allowed for flexibility and we encouraged the children to take the lead in the direction that the interview took.

The children and young people expressed two main reasons why they appreciated participation in the project. One reason was that, in general, they wanted to be more involved in the processes regarding matters that concerned them. The other reason was that they wanted to be of help to other fostered children. This can be summed up in the words of a 16-year-old who said:

“Tghidx kemm fraht u eččitajt ruhi meta s-social worker qaṭli biex niehu parti f’din ir-ričerka. Is-soltu, jisimghu biss lill-ġenituri jew lill-foster carers. Kieku jkolli nerġa niġi fostered, issa naf x’ghandi naghmel. Jien ninkwieta fuq tfal li jkunu ġiżgar minni u li jistghu iweġġghu ghax ma jkunux jafu x’ghandhom jagħmlu.” (Francesca)

“I was so happy and excited when my social worker told me that you wanted to interview me. People usually only listen to the parents or to the foster carers. If I am fostered again, I now know how to cope. I worry about children who are younger than me and who may get hurt because they do not know what to do.”

We tried to get as close as possible to the way the child conceptualises the various aspects of fostering. As is further explained in the ethics section below, we were also seeking not to be the ones to initiate discussion of any topics that may be sensitive to the children. This meant that we avoided leading the children with direct questions except in those cases when children themselves asked us for probes. However, we kept these to a minimum.

*The choice of adult interviewees*

All interviewees were chosen through a mix of purposive and snowball sampling. Purposive sampling allowed us to use our previously-acquired knowledge and experience of the relevant stakeholders. These stakeholders include fostered children, young people who have been fostered, foster carers, persons who have fostered children in the recent past, social workers, policy makers and other professionals.

Adult interviewees identified and approached were those from major stakeholder groups: these included foster carers, birth parents, social workers, policy makers and key professionals. Young adults who had been fostered in the recent past will be presented in the following section. We were looking for key persons in the field who are at the forefront of running and developing the service, and people who are actively engaged in the field and are willing to speak to us in a frank and open manner. This included foster carers and birth parents, a selection of key professionals working at Aġenzija Appoġġ which provides fostering and out-of-home care services, members of the National Foster Care Association, members of relevant professional bodies, independent professional service providers and academics.
Agenzia Appògg provided us with a pool of potential participants who were willing to be interviewed. To avoid over-reliance on agencies and professional bodies, which increases the risk of gatekeeping, we selectively used these lists and supplemented them with independent snowball sampling. Snowball sampling is considered a good way to approach certain stakeholders that would otherwise be difficult to locate. This method can be used to lessen the abovementioned risks associated with gatekeeping when there is too much dependence on a limited number of sources. We asked interviewees to indicate or refer us to people who they knew to have the required characteristics. Used together, purposive and snowball sampling provided the quantity and range of participants that were required for this study.

After several attempts at interviewing social workers at Appògg working in the different units, Appògg requested from us a formal application for their internal approval of participation in the project. This consisted of a detailed form requesting information about the aim and objectives of the project, the methodology, the nature of interviews required and ethical considerations. This form was submitted to Appògg and after due consideration by an internally appointed Board, it was approved. We received clearance from Appògg to interview staff members for the purposes of the project on the 12th of November 2014.

*Reaching the children and young persons*

The process to reach children was a lengthy one fraught with a lot of waiting time. Some children who are in foster care, are also under a care order. Care was taken to ensure that the children would not be harmed by contact with the researcher. Officially we requested the consent of the Advisory Board. This request was supplemented by a meeting with the Advisory Board, where the researchers presented the methodology and the child-friendly criteria that would be used when conducting interviews with children. Permission to conduct interviews with a number of minors under a care order was granted by the Advisory Board on the 16th of October 2014. Once this permission was granted we started the process with Appògg.

Following several meetings held with departmental heads, it was decided that the Appògg social workers would compile a list of children who, in their opinion, we could invite for an interview with us. The social workers were in touch, by phone or in person with those children whom they felt could be in a position to meet us. A list of children who showed a willingness, in principle, to participate in the research project and meet for an interview was compiled. The list included the name of their foster carer and telephone number.

We then proceeded to call the foster carers and ask whether it was possible for them, or us, to ask the children for a meeting. In most cases the foster carer asked the child on our behalf. In half of the cases the interview was held. There were some cases where the child refused to be interviewed and gave reasons for that decision over the phone. In some cases, the foster carer or the child’s social worker advised against our meeting the child on the grounds that, at the time, the child was going through a crisis.

This was a long, slow process that involved the intervention of several adults and professionals. The original list of children compiled by the Looked-After Children Service social workers was
reduced first by the time lag between their compilation and our contract, and reduced further on the foster carers’ or LAC social workers’ advice.

*List of interviewees*

For the purposes of this study and to respect anonymity, interviewees are categorised in the following broad categories: children who are fostered, young adults who have been fostered in the recent past, foster carers, birth parents and professionals. Professionals included: accredited agency workers, SAV supervisors, policy makers, practitioners, members of associations, service providers, independent professionals and academics. The following chart indicates the number of people interviewed in each category, separated by gender.

**Chart 1: Number of People Interviewed Separated by Gender**

<table>
<thead>
<tr>
<th>Code</th>
<th>Type of interviewee</th>
<th>Male</th>
<th>Female</th>
<th>Number of interviewees</th>
</tr>
</thead>
<tbody>
<tr>
<td>C1</td>
<td>Children in foster care (11 to 13 years old)</td>
<td>0</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>C2</td>
<td>Children in foster care (14 to 18 years old)</td>
<td>1</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>C3</td>
<td>Children who had recently been fostered and whose placement had failed (16 to 18)</td>
<td>0</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>C3</td>
<td>Young adults who had been fostered in the recent past</td>
<td>4</td>
<td>3</td>
<td>7</td>
</tr>
<tr>
<td>FC</td>
<td>Foster carers</td>
<td>4</td>
<td>10</td>
<td>14</td>
</tr>
<tr>
<td>BP</td>
<td>Birth parents</td>
<td>1</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>AAW</td>
<td>Accredited Agency workers</td>
<td>3</td>
<td>17</td>
<td>20</td>
</tr>
<tr>
<td>PMPS</td>
<td>Policy makers and public service employees</td>
<td>2</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>MAB</td>
<td>Members of appointed boards</td>
<td>0</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>NGO</td>
<td>Members of non-governmental associations</td>
<td>1</td>
<td>6</td>
<td>7</td>
</tr>
<tr>
<td>IND</td>
<td>Independent professionals</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>A</td>
<td>Academics</td>
<td>0</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>U</td>
<td>Unions</td>
<td>2</td>
<td>0</td>
<td>2</td>
</tr>
</tbody>
</table>

We did not interview children under the age of 11. This was done primarily to avoid harming the children. Age, although not directly connected to maturity, is still a good indicator. We wanted our child interviewees to be mature enough to discuss issues of relevance to this project.

**1.4 Data analysis**

The majority of the interviews were either transcribed in full or selective excerpts were transcribed. In most cases these were accompanied by detailed notes which were taken on site, and supplemented when the recording was listened to. For those interviews that were not recorded we took detailed notes during the interview. Other observations were often discussed at length and notes were kept.

Transcripts and notes were reviewed for the purposes of coding, and main themes and sub-themes
were extracted. This primary analysis was essential to distil key themes out of the very rich, multi-layered and abundant data we collected. The primary list of themes was used to categorise and ensure the flow of the descriptive analytical text which was subsequently produced.

1.5 Challenges encountered

*Interviews with birth parents*

After several unsuccessful attempts to contact birth parents through various networks and contacts, and out of concern that there might not be a representation of this important stakeholder group, it was decided that the Commissioner for Children would send a letter to all birth parents inviting them to participate in this project.

The Commissioner for Children requested the list of birth parents from Appoog using Article 11(f) of the Commissioner for Children Act. Concerns arose about privacy matters and the Commissioner together with representatives from the Foundation for Social Welfare Services and Appoog discussed this issue with the Data Protection Commissioner. Permission was granted on condition that the researchers would not have access to the list and details of birth parents.

75 letters were sent to birth parents. The letter was personalised and signed by the Commissioner herself. It included a short description of the aims of this research project and invited interested parties to come forward to put across their views. They could either call to set up a meeting on the landline of the Office of the Commissioner for Children, or get in touch through a purposely set up email account. Out of 75 letters sent, 7 birth parents got in touch by phone and/or by email. Meetings were set and a reminder in the form of a phone call was made the day before the meeting. Out of these only 5 turned up for the meeting.

1.6 Researchers’ positionality: self-reflexivity and bias

In view of the qualitative nature of this project, it is very important to include a self-reflexive note on the positionality of the researchers within this study. Research, and in particular a qualitative project like this which relied heavily on access to various areas and stakeholders over a relatively short period of time, is affected by the social and political position of the researchers. The researchers were aware of this positionality and of the ‘asymmetrical power relations’ between the researcher and the interviewee (Kvale, 2002). Interviewees were, on the whole, relaxed when talking to us. They shared details and experiences that were intimate and personal. This showed a high level of trust. Some of the interviewees contacted us afterwards with more information, or had lengthy conversations over the phone. There were key demographic characteristics of the researchers which could have influenced the interaction with the interviewees, but which the researchers did their best to address.

Age was one of these demographic details which could have had an impact on the interviews. Being middle aged and older, the researchers assumed different roles and established different relationships with interviewees. Some key interviews were conducted together, and the combination worked well.
There were other factors however, such as socio-economic status and professional status, which the researchers addressed. This was done due to the very diverse group of people that were interviewed. Clothes, markers of professional status and anything that could distinguish were downplayed by the researchers. This was done to avoid standing out, to gain the trust of the interviewees and more critically, to avoid making statements which could make interviewees feel different, or less privileged.

The gender issue generated an interesting dynamic. In some cases, it seemed that being female allowed for closer and more intimate conversations. This was particularly apparent in interviews which were conducted within female interviewees’ homes. Presumably, had the researchers been male, the female interviewees might have been uncomfortable inviting them in a domestic setting. However, this in itself is just one factor in combination with several others. For example, the older researcher, apart from significant academic and professional credentials, has also long personal experience of child rearing, is now an actively involved grandmother, and has professional experience with children in out-of-home care. This meant that she and the interviewees, such as foster carers and children, could relate to each other on these issues. The younger researcher is known to have had contact with children in out-of-home care settings in voluntary and professional capacities, which allowed for some openness in discussing children’s welfare. The gender issue is also interesting because this is a field where the majority of professionals working with the system are women. This would not have had a direct influence but clearly female researchers did not stand out.

A significant point to mention with regards to the profile of both interviewees is that both were viewed as independent, non-affiliated persons, detached from power struggles within the system or partisan politics. This was key in the interviews held with professionals. The older researcher, an academic and professional has reached retirement age; whereas the young researcher, who had been employed with the Office of the Commissioner for Children in the past, is now affiliated to Universities abroad. The profile meant that none of the researchers posed a threat for anyone in the system, or had career interests to push forward.

The researchers approached this research with a clear perspective, a children’s rights perspective which puts the children’s dignity and wellbeing at the centre of its interests. This is not a bias, but a perspective, which the researchers embraced publicly. This perspective helped the researchers in establishing honest and transparent relationships with informants. Protecting the children’s dignity and wellbeing was a unifying factor among the stakeholders. It nurtured the trust and honesty in most of the researchers’ interactions in the field.

The researchers worked closely as a team. This allowed them to address any arising biases that either of them could have. Self-reflexive conversations throughout the project created a space for questioning and critically approaching key issues as they arose during the project.

The researchers felt that their social and political status increased access to various stakeholders, by capitalising on previously established relationships, and through the skills of interacting and interviewing children (including children in care). Additionally, this access was also made possible due to the researchers’ detachment and independence from any local, national or otherwise political alignment within the field or outside.
1.7 The Choice of terminology

Taking our cue from the United Nations Convention on the Rights of the Child, ‘child’ in this study is any young person under the age of 18. However, we have not used only the term ‘child’ for persons under the age of 18. In some places we have used the terms ‘child,’ ‘adolescent’ or ‘young person’ to reflect the context within which the term is being applied. For example, in some of the references to aftercare, we refer to ‘young person’ because the subject applies to older children who are reaching adulthood and young adults who have ‘officially’ moved out of the child care bracket. However, in some parts of the book we use the terms ‘child’ and ‘young person’ interchangeably if it does not make a difference to the context. Where we use the term ‘child’ to include everyone up to the age of 18, we do not intend to offend the young persons who are adolescents or older.

When researching this field, stakeholders referred to some key actors in the field by different terminology. We have chosen the least politically-laden terms and the least divisive. Thus we use the term ‘birth family’ to distinguish it from the ‘foster family’ and the term ‘foster carer’ rather than ‘foster parent.’ The term ‘foster carer’ is the legal term utilised in the Foster Care Act. It is also recognised as being the more accepted term to use (Sinclair, 2008).

1.8 Ethics

Ethical considerations and local compliance

High ethical standards have been adhered to and safeguards were put into place to ensure that respondents were safe from harm. Due regard has been given to ethical considerations of issues that were deemed important such as “honesty; openness of intent; respect for subjects; issues of privacy, anonymity, and confidentiality; the intent of the research; and the willingness of subjects to participate voluntarily in the research…” (Berg and Lune, 2014, p. 28). The nature of the research was verbally explained to participants before the beginning of the interview. This was done in a manner that could be understood by the individual participants. The participants were also given a consent form that contained information regarding the research and regarding confidentiality. They were given time to read this and were asked to sign the consent form. In the case of participants who did not feel comfortable with written text, written identification forms or with signing, the consent process was recorded before the interview. In this case names could be omitted from the recording. What was recorded was the verbal explanation of the contents of the consent form, verification that the participant understood the information and the acknowledgment of the willingness of the participant to take part in the interview. This method was also used with those participants who did not accept to meet and participate in the research, but nonetheless shared their views at length over the phone (Berg and Lune, 2014).

As to the retention of data, the recordings and data that can indicate the identity of the individual contributions of the participants will not be passed on to third parties and will be destroyed soon after the final document is presented.
**Ethical issues of children as participants**

The basic principles that are enshrined in the UNCRC are the best interests, non-discrimination and participation principles (Articles 2, 3, 6 and 12). Article 12 (1) provides:

States Parties shall assure the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child.

In the decades following the UNCRC, the participatory rights of the child have been given due recognition, and importance has been given to listening to their viewpoints independently to those of adults (O’Kane, 2008). Within the field of social research, this principle has precipitated a change in conceptions of children from one of objects of concern that are worth of study to one of active participants in the study of children (Morrow, 2005). It is important to listen to what children themselves have to say about their experiences of care (Smith, 2009). In Malta, in the field of out-of-home care, there has been a related “recognition of the importance of listening to what children themselves have to say about the subject and to ground discourse and thinking about quality care on practice research” (Muscat Azzopardi, 2010).

However, we were cognisant of the special care that needs to be taken when interviewing children who may have suffered the traumas that led them to being in care in the first place. These children may also be vulnerable for other reasons. Care was therefore taken to explain the nature of the research to children in a manner that they could understand and in a manner that would not raise their expectations unrealistically. In the case of child participants, it was clearly explained to them at the outset that any benefits that may arise from their contribution may not be realised within a timescale that can be of direct benefit to them (Muscat Azzopardi, 2010; Anderson, 2005). In this manner, they would not feel a sense of loss if their expectations were not met. The child participants were also made aware of the general nature of this research and that the focus of this research was not on specific cases but on the system as a whole. On the other hand, children were told that their views would be taken seriously and valued. They were told that there were no right or wrong answers to any questions arising during the interview and that what they had to say was of value and could contribute to the formulation of the research agenda (O’Kane, 2008). These preliminary considerations ensured transparency and honesty. It was done to prevent avoidable harm.

The child’s social worker, as explained previously, was informed of the interview. We, the researchers, were aware that, even though care was taken not to distress a child, certain topics that the child could choose to mention may upset or sadden the child. In such cases, in line with good practice, the child’s social worker was informed so that follow-up help could be provided (Blagbrough, 1998).

This research subscribes to the view that research with children does not, in itself, necessitate the adoption of particular methods (Christensen and James, 2008). Children are known to take part willingly in open interviews such as those adopted in this research methodology (Alderson, 2005). The flexibility of this methodology can allow the child to feel a certain amount of control of the general direction that the interview will take and of the topics that are brought up and how much attention is devoted to these topics. We adapted the interview and any open-ended questions to the response and attitude of the child.
At all stages of the interview, we were very sensitive to the feelings of the child and steered away from areas that might seem to upset the child. The child was also told that not all questions needed to be answered and at all times, they were told that they could skip certain areas of focus or stop participating. The interview generally opened with an open-ended question asking the child what worked well in their fostering experience. Unless we were sure of the comfort of the child, and the child themselves volunteered a response, we did not explicitly ask the child for the negative aspects of the care process. This was done to follow the principle that the wellbeing of the child is always to be respected and prioritised over obtaining data from the interview. In no circumstances did we explicitly bring up subjects that could have distressed the child. Children were asked to suggest how the system may be improved. For those children who did not delve into the negative aspects of their own accord, it was possible to deduce certain negative aspects from the responses to the two positive questions.

**Representation of children and the fostering services**

Care has been taken in the latter stages of publication of the research findings not to represent the children and the fostering system in a manner that can be misrepresented by some elements of the media to the detriment of the children. For as Morrow (2005) has pertinently pointed out, with respect to research about children, there is a real potential for journalists or policy specialists to sensationalise the issues. Drawing on the work of Boyden and Ennew (1997), Morrow claims “researchers must bear responsibility for how children are represented in reports of research on the media” (2005, p. 154). Fostered children will not appreciate being singled out as more vulnerable or essentially different from their peers. Preliminary research has already indicated to the researchers that fostered children in Malta feel the stigma of being taken into care and try to hide the fact that they are fostered. Even though the anonymity of the participants will be fully respected in the presentation of the findings, there is still the local danger of stereotyping. This means that sensationalised representations of the findings by the media might increase the incidence of persons applying the findings to all known cases of fostering.

The dignity and self-esteem of the child needs to be respected at all times especially in this electronic age where cyber bullying has added to the dangers of harm that children may suffer from their peers.

Furthermore, as Morrow further points out, “children, as a powerless group, are not able to challenge the ways in which research findings about them are presented” (Morrow, 2005, p. 154). Another danger related to sensationalised versions of the report is that of distancing potential foster families from providing a home for children in care.

The principles agreed upon by media representatives and child experts in the “Oslo Challenge on media representation of children” should be taken into consideration when communicating this report to the media.

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1.9 Limitations of the study

There are several limitations to our study. The first is that we had to pass through several gatekeepers. This was inevitable. In some cases it was also done, as explained previously, to ensure that no harm was done to children. The children that spoke to us on the whole were the ones that had something positive to say. Some of those who had the worst placement breakdowns wanted to put it behind them; they refused to speak to us.

An additional limitation arises from the fact that all the children interviewed were under a care order, and none were placed in care voluntarily. This might have prejudiced the findings or may be a limitation of this project because children in care on voluntary basis are not statutorily entitled to the same services and benefits as children under a care order. Their situation might have been different.

With adult interviewees, a limitation is the very small number of birth parents that collaborated in this project. Out of the 75 letters sent, only 7 responded. We were conscious of this throughout and have as much as possible tried to draw on the experiences of other professionals who have been in touch with birth parents.

A limitation is that, given the vulnerable and dependent position of the children, the information that they have been able to share with us may have been limited in the few cases when foster carers remained in the room. In these cases, the children may have said what the foster carer would have approved of them saying. As much as possible the researchers tried to speak to the children on their own but in those cases when the foster carer remained present, it was deemed more important to respect the judgement of the foster carer.
CHAPTER 2: THE MALTESE CONTEXT

2.1 Introduction

This chapter attempts to give a snapshot of the statistical, legal and institutional reality of the fostering services in Malta. The chapter opens with statistics of key details which give the reader an idea of some of the key characteristics of fostering in Malta today. The chapter moves on to give the statutory institutional map of entities as laid out in the Foster Care Act and the Children and Young Persons (Care Order) Act. It also gives an indication of possible developments in the near future, through a description of the substantial legal reforms present in the new Child Protection Bill currently in its first reading in Parliament. The information presented in this chapter is useful as a background to understand the intricacies and nuances presented in the empirical chapters (Chapter 3 and 4).

2.2 Statistical data

The average age of fostered children in 2015

In 2015, the average age of fostered children was 11. There was a discrepancy in the average age between children managed by the Foster Care Unit and by the Specialised Home-Based Care Unit, and this is a reflection of the nature of the cases handled by the Specialised Home-Based Care Unit. The average age of children at the Foster Care Unit was 10 and the average age of children at the Specialised Home-Based Care Unit was 13.

Table 1: Age of fostered children in 2015

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<tbody>
<tr>
<td>Age</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
<td>10</td>
<td>11</td>
<td>12</td>
<td>13</td>
<td>14</td>
<td>15</td>
<td>16</td>
<td>17</td>
<td>18</td>
<td>19</td>
<td>20</td>
<td>21</td>
</tr>
<tr>
<td>No of children</td>
<td>1</td>
<td>8</td>
<td>2</td>
<td>11</td>
<td>17</td>
<td>14</td>
<td>13</td>
<td>14</td>
<td>12</td>
<td>8</td>
<td>9</td>
<td>7</td>
<td>17</td>
<td>8</td>
<td>7</td>
<td>8</td>
<td>10</td>
<td>11</td>
<td>6</td>
<td>6</td>
<td>205</td>
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</tbody>
</table>

Source: Appoġġ Fostering Unit

Table 2: Age of fostered children in specialised care in 2015

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<tr>
<td>Age</td>
<td>2</td>
<td>3</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
<td>10</td>
<td>11</td>
<td>12</td>
<td>13</td>
<td>14</td>
<td>15</td>
<td>16</td>
<td>17</td>
<td>18</td>
<td>19</td>
<td>20</td>
<td>-</td>
</tr>
<tr>
<td>No of children</td>
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<td>1</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>33</td>
</tr>
</tbody>
</table>

Source: Appoġġ Specialised Home-Based Care Unit
The age they were first taken into care

As seen in Table 3, the vast majority of children at the Foster Care Unit were taken into care when they were under the age of 5. This has implications on foster care. It is impossible to tell from these statistics whether this is a result of younger children being placed in foster care, or more foster care placements available for younger children. The lack of availability of foster care placements for older children is however a well known concern among the service providers. This data is also reflected in the trends (below) on the age at which children are taken into foster care.

The statistics from the Specialised Home-Based Care Unit, which can be found in Table 4, portray the same trend of children being taken into care at a younger age. However, the numbers are less stark. Although there is a higher number of children who were taken into care under the age of 5, we also find that there were 7 children (out of 33) who were taken into care over the age of 11.

Table 3: Age that children at the Foster Care Unit were taken into care

<table>
<thead>
<tr>
<th>Under 2</th>
<th>Under 5</th>
<th>Under 10</th>
<th>Over 11</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>126</td>
<td>73</td>
<td>4</td>
<td>2</td>
<td>205</td>
</tr>
</tbody>
</table>

Source: Appoogg Fostering Unit

Table 4: Age that children at the Specialised Home-Based Care Unit were taken into care

<table>
<thead>
<tr>
<th>Under 2</th>
<th>Under 5</th>
<th>Under 10</th>
<th>Over 11</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>11</td>
<td>6</td>
<td>7</td>
<td>33</td>
</tr>
</tbody>
</table>

Source: Appoogg Specialised Home-Based Care Unit

The total number of years children have been fostered in total

This data shows that only 17% of children who were in regular foster care placement spent three years or under. The vast majority have spent 4 years and over in foster care placement. The statistics for the Specialised Home-Based Care Unit reflect the same trend. Only 6 out of 33, that is 18% have been fostered for a period of three years or under. The rest have spent longer periods of time in foster care.

Table 5: Period of time that fostered children in 2015 have been in foster care

<table>
<thead>
<tr>
<th>Number of years that children have been in placement</th>
</tr>
</thead>
<tbody>
<tr>
<td>0yr</td>
</tr>
<tr>
<td>-----------</td>
</tr>
<tr>
<td>10</td>
</tr>
</tbody>
</table>

Source: Appoogg Fostering Unit
Table 6: Period of time that fostered children in 2015 have been in specialised foster care

<table>
<thead>
<tr>
<th>Number of years that children have been in placement</th>
<th>Mth</th>
<th>1y</th>
<th>2yr</th>
<th>3yr</th>
<th>4yr</th>
<th>5yr</th>
<th>6yr</th>
<th>7yr</th>
<th>8yr</th>
<th>9yr</th>
<th>10yr</th>
<th>11yr</th>
<th>12yr</th>
<th>13yr</th>
<th>14yr</th>
<th>15yr</th>
<th>16yr</th>
<th>17yr</th>
<th>18yr</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>1</td>
<td>5</td>
<td>6</td>
<td>6</td>
<td>3</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>33</td>
<td></td>
</tr>
</tbody>
</table>

Source: Appoğ Specialised Home-Based Care Unit

**Period of time spent with the same foster carer(s)**

According to data provided by Appoğ, the majority of children have been within the same foster care placement for more than three years. Out of 205 fostered children, 193 had never had a change in placement – this is 94%.

The Specialised Home-Based Care Unit manages children who have had several placements in alternative care settings, including residential settings or next of kin placements. In addition, as can be seen below, 7 out of 33 children have changed their foster placement once. 79% have therefore remained in their foster placement. This percentage differs to that of the regular foster care placement but is consistent with the nature of the cases. The eligibility criteria for fostered children by the Specialised Home-Based Care Unit include conditions which require more intensive care.

**Changes in foster care placements**

Out of 205 children at the Fostering Unit, 12 children have had a placement change: 10 had changed their placement once, and two had changed their placement twice.

Out of 33 children at the Specialised Home-Based Care Unit, 7 children have changed their foster placement once. However, overall most of the children have had several placements in different residential settings or next-of-kin placements.

The number of children at the Specialised Home-Based Care Unit who have been through placement changes is much higher. This reflects the greater difficulties of cases handled by this unit, including the higher age at which children are taken into foster care.

**The age at which children have been placed in foster care**

This data shows a clear trend which continues from the trend of children being taken into care at a young age. The vast majority of children are given foster care placements under the age of 11, with more than half being placed in foster care under the age of 3. This trend is generally followed by the specialised foster care placements with most children being placed under the age of 11. The difference is that when comparing the cohorts of ages 0-3 and 3-11, there is a greater cohort of children placed between the ages of 3-11 in the specialised foster care placements whereas in the regular foster care placements the vast majority are placed in the ages between 0-3.
# Table 7: Age children are taken into care

<table>
<thead>
<tr>
<th></th>
<th>3 years of age or under</th>
<th>11 years of age or under</th>
<th>18 years of age or under</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fostering Unit cases</td>
<td>126</td>
<td>77</td>
<td>2</td>
</tr>
<tr>
<td>Specialised fostering unit cases</td>
<td>9</td>
<td>16</td>
<td>7</td>
</tr>
</tbody>
</table>

Source: Appoġġ Foster Care Unit and Specialised Home-Based Care Unit

## 2.3 A brief glance at the main landmarks leading to the development of the foster care services

Prior to the official establishment of fostering services, fostering was not an unknown practice. Indeed, it was often conducted informally by members of the extended family. This could be explained as a direct outcome of the cohesiveness and strong ties of obligation that there were between extended family members in Malta. In 1996, a national policy document on fostering was initiated. In a report commissioned by the Ministry for Social Policy reviewing social welfare services, Aldgate (1999) had outlined the need to introduce an Act regulating foster care. This became a reality in 2007 with the introduction of the Foster Care Act. A landmark shift took place in 2000 when the first Fostering Service Unit was set up within Appoġġ, the national social work agency. This move, which must also be seen in the context of the overall professionalisation of social work services in Malta that had started in the 1990s, brought to an end informal arrangements, including those involving extended family members (Galea Seychell, 2011, p.50-51). Aġenzija Appoġġ contributed towards the development of other related legislation and regulations in this social work field complementary to fostering services. Among these were the Social Work Act and its code of ethics, the Out-of-Home Care Standards and amendments to the Care Order Act.

The 2007 Foster Care Act had been welcomed as a significant milestone. According to Aldgate, Blewett & Rose (2008), the Foster Care Act 2007 marked ‘a coming of age for the service and is central to future provision for looked-after children’ (p.12). Yet, as reported by Farrugia (2010), ‘considering that this piece of legislation is quite recent’ the legislation still falls short in addressing ‘child rights issues and does not (fully) reflect the concerns of children in foster care’ (p. 13). This Act fails to include ‘the choice of foster care’ as a children’s right (Farrugia, 2010). More recently, in 2014, a Child Protection Bill was tabled in Parliament which addresses some of the concerns around children’s rights. It is currently in the stage of a first reading.

Another step in the improvement of foster care services was taken with the appointment of the Commissioner for Children, occurring in late 2003. One of the statutory functions of the Commissioner is to foster the development of alternative care to children who need such care with special reference to fostering and adoption. The Commissioner for Children, within the spirit of Malta’s ratification of the UN Convention on the Rights of the Child, aims a) to promote the

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10 Although child protection services were established as from the inception of Appoġġ in 1994, the fostering service in Malta was only set up some years later in 2000.
participation of children, b) to emphasise standards of social services and c) to monitor policies and practices of social welfare services targeting children, and this inspired great confidence.

Throughout the last decade, the Office of the Commissioner for Children has lobbied for looked-after children’s rights (Commissioner for Children, Annual Report, 2008). Furthermore, the Children’s Commissioner brought together various key players during 2008 and embarked on a research study focusing on children living in out-of-home care, in collaboration with all the parties. The aim of this study was to inform policy makers about the needs of looked-after children including children in foster care (Abela et al, 2012).

2.4 The Maltese legal framework and out-of-home care

The Foster Care Act

The Foster Care Act, Chapter 491 of 2007, as amended by Legal Notice 427 of 2007, was enacted on the 16th November 2007. It was the first legislation of its kind since Malta became independent in 1964. It introduced in Malta the regulation of child fostering. Foster care is defined by the Act in Article 2 as:

\[\text{…a service for a determinate period whereby a child is placed in the continuous care of a foster carer, and through which the child is brought up in a family environment according to his best interests.}\]

Part II of the Act establishes the Fostering Board. The members of the Fostering Board are appointed by the Minister for a period of two years, and shall be composed of professionals from different disciplines including an expert in foster care, a person aged over 18 years who was placed in foster care and a person who is (or was) a foster carer.\(^\text{12}\) The functions of the Fostering Board shall include:

a) examining Home Study Reports and Review Reports in accordance with Part V drawn up by a social worker of an accredited agency;

b) determining suitability or otherwise of prospective foster carers;

c) determining that a foster carer is no longer suitable to act as such;

d) specifying what type of foster care is suitable to be provided by each foster carer;

e) keeping an updated register of foster carers;

f) providing foster carers with official documentation that identifies them as such and an official letter identifying the children in their care;

g) reviewing reports compiled by an accredited agency, following a complaint against a foster carer, and taking any action as deemed fit in the circumstances;

h) making recommendations to the Minister on the parameters to be established for the organisation of training programmes, assessments, counselling sessions for prospective foster carers as well as monitoring of, and support structures for foster carers;

i) making recommendations to the Minister for the more effective implementation of the provisions of this Act and any regulations made thereunder.\(^\text{13}\)

\(^{12}\) Foster Care Act, Article 3.

\(^{13}\) Foster Care Act, Article 4.
Part III of the Act establishes the Central Authority, that is designated by the Minister to accredit any organisations that intend to carry out foster care services. The functions of the Central Authority are outlined in Article 7 and include:

a) receiving and acknowledging applications for accreditation;
b) granting, refusing, or revoking accreditation to organisations in accordance with established criteria;
c) receiving, acknowledging, investigating and taking any necessary action in relation to any complaints against accredited agencies or any organisations purporting to act as such;
d) receiving requests from foreign persons who are approved as foster carers abroad and who, through an accredited agency, request to be recognised as foster carers in terms of this Act, and after making the investigations it deems fit and obtaining all the necessary documentation, deciding whether to accept such request after consulting with the Fostering Board;
e) receiving applications from agencies which would like to carry out cross-border foster care and deciding whether to allow such agencies to effect such placements;
f) taking any measures deemed necessary in the circumstances, if a foster care placement, whether local or cross-border, is in breach of the provisions of this Act.

The Central Authority issues the accreditation for two years, is given the authority to refuse an application and to revoke accreditation according to stipulated conditions.

A Board of Appeal is established in order to review decisions made by the Fostering Board, the Central Authority, to hear and decide an appeal filed in accordance with provisions of the Foster Care Act, and to undertake any other function that the Minister may designate by regulations made by virtue of the Act. The procedures are listed in Part IV of the same Act.

Accredited agencies are regulated in Part V of the Foster Care Act. They are responsible for the overall management and monitoring of the fostering placement. The functions of an accredited agency are to:

a) provide a service according to the standards, criteria and procedures established by the central authority;
b) receive and process applications from persons who apply to be registered as foster carers;
c) provide initial training to prospective foster carers and continuous training to foster carers registered with it, and provide them with adequate support while they are carrying out any foster care placement;
d) match foster carers with children who are to be placed in foster care;
e) make all reasonable attempts to place siblings with the same foster carer if this is in the best interest of the siblings;
f) make all reasonable attempts to place a minor parent and his or her child with the same foster carer;

14 Foster Care Act, Article 10.
15 Foster Care Act, Article 11.
16 Foster Care Act, Article 12.
17 Foster Care Act, Article 15(1).
g) ensure that any foster care placement will be in the best interest of the child;

h) monitor all foster care placements arranged by it and provide support to foster carers during the foster care placement arranged by it;

i) review and propose amendments, if necessary, to foster care agreements;

j) investigate complaints against any foster carer in accordance with the manual or procedures specified in article 18 and draw up a report and forward it to the Fostering Board for any necessary action;

k) investigate any allegations of abuse in any foster care placement, in accordance with the manual or procedures mentioned in article 18, and report as necessary to the competent authority;

l) grant the central authority access to any records and documentation dealing with the foster care procedure of any child and to reports on any foster carer or prospective foster carer;

m) grant the central authority access to its financial accounts and audits;

n) report to the central authority at the end of every calendar year on the performance of its functions;

o) comply with any other duties and obligations as specified by the central authority.\(^{18}\)

Furthermore, the role of the accredited agency is to develop, update and execute written policies, procedures and manuals which shall be subject to approval by the Central Authority. These written policies, procedures and manuals shall include training and assessment procedures; matching of foster carers with children; forms of support for foster carers and fostered children, before, during and after their placement; emergency placements of children; investigation of complaints against any foster carer; change in circumstance of foster carers; cases of abuse of children in foster care and cases of death of children in foster care.\(^{19}\)

The accredited agency is responsible for information given to prospective foster carers,\(^{20}\) for the keeping of registers with details of foster carers and professionals monitoring the placement,\(^{21}\) for ongoing training of social workers,\(^{22}\) and for the assessment of prospective foster carers.\(^{23}\)

The drawing up of the foster care agreement also falls within the responsibility of the accredited agency. The foster care agreement consists of the rights and duties of the foster carers, which shall not be perceived as permanent.\(^{24}\) It shall be in the best interest of the child and shall specifically include:

\begin{enumerate}
  \item the extent to which the foster carer may make decisions with regard to the child in his care;
  \item the frequency of contact of the child with the natural parent or parents;
  \item the child’s care plan;
  \item matters of education, health and maintenance of the child; and
\end{enumerate}

\(^{18}\) Foster Care Act, Article 17.

\(^{19}\) Foster Care Act, Article 18.

\(^{20}\) Foster Care Act, Article 19.

\(^{21}\) Foster Care Act, Article 20.

\(^{22}\) Foster Care Act, Article 22.

\(^{23}\) Foster Care Act, Article 23.

\(^{24}\) Foster Care Act, Article 24(2).
e) any other matter pertinent to the child in foster care.\textsuperscript{25}

According to Article 24(5) the foster care agreement should be drawn up after having heard the child to be fostered, according to their age and understanding, and any person caring for the child, and any person having parental authority, if the person can be found and is capable of expressing their views.

The best interest of the child is mentioned also as one of the conditions for the termination of a foster care placement, together with two other conditions, the foster carer does not conform to the foster care agreement and the Fostering Board decides that the foster carer is no longer suitable to provide foster care.\textsuperscript{26}

The only article in the Foster Care Act which deals with the ‘rights of children in foster care’ puts the primary responsibility on the foster carer, and affords a mention of access to the child’s assigned social worker:

\begin{quote}
A foster carer shall ensure that the child placed in his care shall be cared for, maintained, instructed and educated according to the child’s abilities, aspirations and natural inclinations. The child shall also have access to the social worker who is taking care of the placement.\textsuperscript{27}
\end{quote}

Part VI of the Act lists a number of offences such as the payment for offering, giving or obtaining payment in consideration of any arrangements for foster care placements;\textsuperscript{28} the publication in the media of any details of a child in foster care, the foster carers or the natural parents, curators or tutors;\textsuperscript{29} the use of force\textsuperscript{30} and the obstruction of the operations of the entities established by this Act.\textsuperscript{31} Fostering by unauthorised persons or organisations is punishable and guilty of an offence, also liable to imprisonment and to a fine.\textsuperscript{32}

The Minister retains overall authority for making regulations for the following:

\begin{itemize}
\item[a)] for the protection, supervision and control of children placed in foster care;
\item[b)] for the accreditation, monitoring and control of agencies and for the refusal or revocation of such accreditation;
\item[c)] to provide for any rights and duties pertaining to a foster carer, including that which should be established in the foster care agreement;
\item[d)] to regulate the different types of foster care;
\item[e)] to establish penalties for breach of the provisions of this Act;
\end{itemize}

\textsuperscript{25} Foster Care Act, Article 24(3).
\textsuperscript{26} Foster Care Act, Article 24(7).
\textsuperscript{27} Foster Care Act, Article 25.
\textsuperscript{28} Foster Care Act, Article 27.
\textsuperscript{29} Foster Care Act, Article 28.
\textsuperscript{30} Foster Care Act, Article 29.
\textsuperscript{31} Foster Care Act, Article 30.
\textsuperscript{32} Foster Care Act, Article 31.
to establish the procedure to be followed by the Fostering Board and the Central Authority;
g) to lay down the rules on the powers of and the procedures to be followed by the Board of Appeal; and
h) for any incidental and supplementary matter which the Minister considers expedient to provide for, for the effective implementation of the provisions of this Act.33

**The Children and Young Persons (Care Orders) Act**

Fostered children broadly fall into two groups: those who are in need of protection, and those who are placed into fostering voluntarily. Apart from the Fostering Act, the Children and Young Persons (Care Orders) Act of 1980, updated in 1983, 2002, 2007 and in 2014 and its Subsidiary Legislation, is therefore very relevant to children who do not fall into the voluntary fostering group. This Act aims to protect children who are at risk of harm and in need of care by committing them to the care of the State. A child shall be deemed to be in need of care, protection or control if:

a) he is beyond the control of his parents or guardian; or
b) he is not receiving such care, protection and guidance as a good parent may reasonably be expected to give and -
   (i) the child or young person is falling into bad associations or is seriously exposed to moral danger; or
   (ii) such lack of care, protection or guidance is likely to cause the child or young person unnecessary suffering or seriously affect his health or proper development.34

Once children are deemed to fall under the conditions above, and are therefore in need of protection, the Minister responsible according to Article 10 of the Children and Young Persons (Care Order) Act shall discharge his duty by:

a) accommodating and maintaining him in a residential home, hostel or similar institution provided by the Minister for the reception of children or young persons in his care; or
b) boarding him out with a fit person, whether a relative or not, or with a private institution willing to undertake the care of him on such terms as to payment by the Minister and otherwise as the Minister may, subject to any regulations made under this Act, determine in agreement with such person or the management of such institution.35

This recognition of fostering by kin carers and non-relative carers as one of the alternatives of out-of-home care paved the way for the enactment of the Foster Care Act. Galea Seychell mentions that this was an important step at a time when social work practitioners resorted to foster care on an ad hoc basis rather than as part of a care plan.36

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33 Foster Care Act, Article 33.
34 Children and Young Persons (Care Orders) Act, 1980, Article 7.
35 Children and Young Persons (Care Orders) Act, 1980, Article 10.
2.5 Developments in the offing

A new Child Protection Bill, Bill no. 45 of 2014, has been drafted and is currently being discussed in Parliament. Officially called the Child Protection (Out-of-Home Care) Bill, it seeks to replace the Children and Young Persons (Care Orders) Act, to establish Child Court Services, to introduce child protection orders, to provide for special care and protection for children removed or separated from their parents and in out-of-home care. The fundamental principles enunciated in the Bill go a very long way towards addressing specific problems.

The Bill is awaiting its second reading in Parliament and therefore it is assumed that some amendments need to be made before the Bill progresses through its legislative journey. This section outlines the Bill in its present form.

The Bill defines protection that must be afforded by the State where a child is in actual or potential significant harm or in need of care and protection. The Act sets up an institute of Child Protection Services (CPS) working in tandem with the Police. The CPS may take various measures, including listening to the child, providing support services for the child and his/her family and addressing the Family Court in specific circumstances. The Family Court has exclusive jurisdiction in these matters and is also authorised to take a number of measures, including the issue of a care order and of a removal order depending on the particular circumstances of the case.

In issuing of any such Protection Order, due consideration is given to the maintenance of family relationships and the possible reunification of the child with the family, where this is shown to be conducive to the child’s wellbeing. An appropriate holistic plan is drawn up for the child. All decisions taken in connection with the child protection orders shall be motivated by the best interests of the child, and by the responsibility of the State to provide special care and assistance.

The Bill further provides for a Child Care Advisory Group, whose members shall be advisors to the Family Court. The Group shall be composed of six persons of good repute and who must have a minimum of seven years’ professional experience in child care, child welfare, child development, child protection, child law and/or child psychology.

Where, during the first hearing, the Family Court determines that there are prima facie grounds for the proceedings to continue, it shall appoint a Child Advocate and a Guardian from the Child Court Services to represent and assist the child; provided that where the child expressly refuses the representation of a Child Advocate, the child’s wishes shall be respected.

During the proceedings, a child protection mediator shall be appointed and he shall lead a care conference which is required before issuing any one or more child protection orders. The duties of the mediator are spelt out in the Bill. The Bill further specifies the persons who shall be present during the first hearing by the Family Court.

Furthermore, a guardian shall be appointed from among the panel of experts nominated by the Family Court. He shall participate in any required training and shall safeguard and promote the best interests and rights of the child. The Bill lists in detail the obligations of the guardian, from being

accountable to the Family Court and complying with all directions and requests of the Family Court to meeting and listening to the child as often as necessary to ascertain the wishes, feelings and views of the child. The guardian shall be present and assist the child or represent the child where the child is unable or unwilling to participate in the care conference and care reviews.

The Child Advocate shall maintain a lawyer/client relationship with the child insofar as the advocate shall represent the wishes of the child. The responsibilities of the Child Advocate are set out in detail.

The Bill specifies the contents of a care plan. Where a care plan has been agreed upon by the parties, the child protection mediator shall submit it to the Family Court, together with the report ordered at the first hearing. If no care plan has been agreed, this is reported to the Family Court with any recommendations.

Even where there is no contestation, the Family Court shall still review the submissions and take a decision with reference to the recommendations contained in the care plan by a decree. The Family Court may only restrict the contact of the parent or other close persons with the child, where it is convinced that contact is detrimental to the child’s growth, development and wellbeing. When taking such a decision, the Family Court shall also set a date for review not later than three months from the decision, unless this is manifestly not in the best interests of the child.

Any decision concerning any order decided upon by the Family Court in accordance with this Act shall be reviewed by the Family Court not later than three months from the date of that decision and consequent reviews, by the Family Court, shall take place at least every six months, or any other shorter period that the Family Court may deem necessary in the best interests of the child. Any party to the proceedings may appeal to the Court of Appeal on points of law.

A Child Protection Order shall be valid until the child attains the age of 18 or until the Family Court revokes or terminates it.

The Bill provides specific issues which the Family Court must take into account in deciding whether or not to terminate the effects of a Child Protection Order. The Family Court shall, in the child’s best interest, consider:

a) the parents’ current situation;

b) whether the parents can provide adequate everyday care, personal contact and security necessary to the wellbeing of the child, according to the child’s particular needs;

c) the length of the period in which the child has been placed in care;

d) the attachment between the child and the person providing out-of-home care;

e) the attachment between the child and the parents; and

f) the child’s views and wishes according to the child’s maturity and understanding.

Provided that the Family Court shall reject such application where it is satisfied that the child has developed a significant attachment to the person taking care of him and alternative environment, which indicate that removing the child may lead to the child suffering significant prejudice or harm.

The Bill provides for foster care to be decreed as permanent where it has been ongoing for more than four care reviews and appears to be long term, and the views and wishes of the child have been considered, it may decree permanent such foster care. Permanent foster carers shall remain bound
by the requirements of ordinary and extraordinary acts of administration but care reviews shall take place annually instead of on a six-monthly basis.

Additionally the Family Court may decree that a child who has been placed under a Child Protection Order may be freed for adoption if evidence is brought to show that the parent or parents are unlikely to be able or are unwilling to provide the child with appropriate care and the Family Court has ascertained that freeing the child for adoption is in the child’s best interests.

The Bill spells out the responsibility of the State in this matter. Where a child has been removed from the care of the parents and placed in out-of-home care, the State has a responsibility to ensure that the child receives special care and protection for that child’s wellbeing. That responsibility shall be vested in the guardian appointed according to the provisions of the Bill. The Family Court shall authorise the person caring for the child to carry out ordinary acts of administration which are essential for the general and every day wellbeing of the child as part of the care plan of the child as well as to carry out extraordinary acts of administration deemed essential for the wellbeing of that child. The Bill lists the differences between ordinary and extraordinary acts of administration. Extraordinary acts include travelling outside Malta, submitting the child to any type of serious medical intervention, including cosmetic surgery, promoting a religion to the child, other than the religion of his parents. In the case of emergency and where the wellbeing of the child is endangered, the carer may carry out extraordinary acts of administration deemed necessary and which cannot be postponed but shall immediately inform the guardian and the Family Court of such action.

Finally, Article 39 of the Bill sets out that in taking any decision in the best interest of each child, the Family Court shall be able to count on the State’s responsibility towards the wellbeing of the child in ensuring special care and protection when a child is removed from the family and placed in out-of-home care.

The Bill lists what the responsibilities of the State shall include, *inter alia*:

a) taking all appropriate measures with the aim of promoting the wellbeing and care of children;

b) provision of support services including pre-natal and ongoing child health centres as well as other health care services, day care, education, community work and youth work, in order to provide a preventative child welfare system, which promotes and safeguards the growth, development and well being of all children and supports parenting;

c) ensuring that all welfare structures are directed towards preventing child and family problems and eliminating and preventing the emergence of disadvantageous factors concerning the circumstances in which children are brought up;

d) provision of support to parents and those persons involved in the upbringing of the children, including the provision of necessary assistance at a sufficiently early stage to the benefit of the children.

### 2.6 Concluding remarks

This chapter opened with a statistical picture of fostering in Malta today, to give an idea of the key characteristics of the fostering service. The composition and trends that can be drawn from the statistics are critical to the depiction and challenges that the current fostering services face. Following the statistical snapshot, the chapter moved to a brief historical trajectory of the formalisation of
foster care services. From then on, the chapter dwelt on detailed descriptions of the designated roles and responsibilities of the various institutional structures within the social services system as set out by the Foster Care Act (2007). As mentioned previously in the introductory chapter, fostered children are in touch with many other professional services and institutional structures such as the education services, psychological and medical services and security services. These, for the sake of readability, have not been included in this chapter although when the following empirical chapters make reference to the ‘system’ with which fostered children are in touch, these are generally included. The proposed reforms as listed in the draft Child Protection Bill would have a significant impact on the current construction of the social services system and have therefore been included. This draft Bill is still in its first reading in Parliament and therefore it is not possible to pre-empt what the final version of the Bill will include.
CHAPTER 3: “I WOULD LIKE YOU TO WRITE THIS DOWN”: THE CHILDREN’S VOICES, THE HETEROGENEITY OF THE CASES AND THEIR ENGAGEMENT WITH THE SYSTEM

The quote in the title of this chapter is taken from the response of an 11-year-old participant who wished us to take note of what she was saying and to pass on her message for the benefit of others. Like most of the children and young people who participated in this research through an individual meeting, she understood that what the participants had to say could be of benefit to future service users. The rest of this chapter presents the data collected from the interviews carried out with children and young people. These participants were generous in their responses. With only a couple of exceptions, they prolonged the discussions far longer than had been expected.

Their responses will be presented and analysed in two ways. We will give an overview of the main themes that arose and how these were conceptualised and articulated by the children and young people. We will also give more detailed accounts of a selection of responses where these may further enhance our understanding of selected issues. In this manner, we will exploit some of the rich qualitative data of our research. This data will reveal in finer detail how the children experience their day-to-day lives as fostered children. It also describes how the children navigated through the tasks that fostered children may face vis-à-vis their holistic development, their relationships with the members of the foster family and their birth family, their education and the social services that they receive as children in out-of-home residential care. The range of experiences that the children have described is varied but each one can help shed light on how to strengthen what works well in foster care and how to address some current gaps and weaknesses. The chapter will end with some final thoughts based on what the children and young persons had to say.

The main issues are grouped in a manner that reflects the responses of the children and young persons. One of the main concerns of the research is to explore the range of characteristics which may contribute to successful placements. The data reveals how the very concept of a successful placement is perceived by the individual children and young persons. The children’s responses were the determining factor in the final classification of the themes. As we shall see later, this has implications at the level of policy and practice. However, our concern with children’s rights and with the holistic wellbeing of the child also contributed to the prioritisation of certain themes.

An overlap of themes occurred throughout. The complexity of children’s lives makes this overlap inevitable. This complexity is reflected in the presentation and the analysis of the data. It shows how children’s lives cannot be compartmentalised into separate themes.

3.1 Detailed case studies

Living in a family: A broad spectrum

The experiences of fostering described by the children and young persons varied widely. The children spoke about how they felt their placements had worked out. Meeting the children in their home environment and spending time with them, gave some indications about the level of success of the placements. Some children had lived for a long number of years in the same foster family. Others had experienced different foster families and placement breakdowns. Some had returned to their
foster carer’s home or to their birth family or to residential care after placement breakdowns. One of the participants had experienced only one relatively short foster placement. Despite the diverse background, experience and context of the participants, there was one common positive factor that was cited by the participants. This was that of having lived within a family while in care. However, the agreement stopped there because the reasons for citing this as a positive factor varied very significantly. These depended on how successful the placement had been in the view of the child.

Before proceeding to the different reasons given by the interviewees in this regard, it is important to note a relevant bias in this area of the research. The participants who had refused to participate in this research when they were approached by their social workers all indicated that they had wanted to move on from their fostering experience and put it behind them. The most common reasons cited by their care workers or social workers indicated that for these children some aspects of the experience of fostering had been very unsatisfactory and painful. One child told the researcher that she did not want to be associated with the idea of fostering which she thought was considered as wanting when compared with adoption. So the research does not include responses from these children and young persons who had found the overall experience disappointing. The heads of care of the residential homes in which two of them were living told us that the children had experienced instability and disappointment after the foster placement breakdowns. One head of care mentioned the intensive support that the child needed to cope with the feelings of failure and with the subsequent sadness that the child in her care was experiencing. For this reason, the head of care decided that the child should not even be approached or asked whether the child wished to participate.

By contrast, those who agreed to participate had found that the experience of family life in a foster family had given them, to varying extents, what they wished for and needed from a family. The current contexts of these participants varied. Some of them were minors living with their foster family, another was a minor living in his birth family, others were young adults who had stayed on with or returned to their foster family while others were living in residential care.

*Foster carers that love me and care for me*

The participants who spoke in the most positive terms about their lives in foster care all said that they felt loved and cherished. They presented themselves as happy and at ease. Many of them did very well at school and had high aspirations and plans for their future. Most of the participants emphasised that what was essential for a foster placement to succeed was that the foster carers are like good parents. One participant added that this meant that the children grew up free from physical abuse:

“Importanti li t-fal ikunu ghand ġenituri tajba u mhux ghand ġenituri li jsawtuhom.” (Theresa, C1)

“It is important that children are taken care of by good parents and not parents who smack them.”

It was later clarified that the smacking mentioned in this quote referred to the context of the birth family that a child may have been taken out of. This child equated not being smacked with good care.
However, some of the participants also expressed the feeling that they did not always satisfy some of the high expectations of their foster carers. They presented this as a source of stress both for them and for the foster carers. The high expectations related mainly to discipline, tidiness and schoolwork. In the cases of some of the younger participants this was ongoing and could have been an indication that the placement required more support. Given the difficulties sometimes associated with children during puberty, it also indicated that the amount of support and training required may need to be stepped up in preparation for a potentially more demanding phase in the placement. In the case of one of the older participants, the stressful situation had escalated and had contributed to placement breakdown.

Despite the breakdowns, all the relevant participants had retained affectionate bonds for the carers from at least one of their foster care placements. These bonds had been built as a result of the love and care that these foster carers had given the children.

**Living in a family: Cases A John (C3) and B Simon (C3): ‘mixed feelings’**

As mentioned above, the reasons cited for finding the family experience positive varied. Some of the children experienced one or many placements that broke down earlier than planned. However, overall, they still appreciated having had the opportunity of living in a family.

John (C3), an adolescent participant, lived in residential out-of-home care most of his life. He had also been fostered. He felt he had benefited more from group residential care in every aspect of his overall wellbeing. Even though he preferred residential care, he still appreciated the opportunity of having lived in a family and of experiencing the routines that came with living in a family, such as being picked up from school by a parent figure. He says:

“What I had experienced as positive is this: I was fostered when I was 9 years old… to have the opportunity of being in a family that you have never previously experienced, is something… is having an experience that you have never had. This is the positive aspect, you experience everyday family life, you are taken to school every day by your family and you are picked up from school by them, you have meals with the family and you go out with the family.” (John, C3)

However, he then presented a series of rival dualities that were hard to reconcile. On the one hand, he said that without this experience, he would not have known how a family could live together, share meals and activities. He treasured this knowledge. On the other hand, he was hurt by the fact that the foster carers had never made him feel on equal footing to their own child. He described his complex emotions regarding how he was painfully made aware of what he had missed by not having had a family of his own. These feelings of personal loss were intensified by watching the biological child of the foster family experience family life with his birth parents:

“Min-naha tirrealizza li qatt ma kont taf x’hemm fid-dinja u min-naha l-ohra qed tapprezza li qieg hed go familja.” (John, C3)

“On the one hand, you realise you had no idea of what there was in the world but on the other hand you appreciate being part of a family.”
Another duality, on which this young person further reflected, concerned how his life would have turned out if he had remained with the foster family. He weighed these possibilities against what he would have lost if he had not had the opportunities that he had actually experienced in residential care. He thought that, had he remained in the foster family, he may have been expected to join the family business just as the biological children had done:

“Li hu pożittiv hu li mbaghad issir propju qisha familja normali.” (John, C3)

“The positive aspect is that it then becomes just like a normal family.”

This means that in the eyes of this participant, the expectations of foster care had been high and had even extended to sharing in the family business as family members would. This may have been an unrealistic expectation as this factor extends beyond the scope of foster care. In fact, the participant told us that the foster carers had asked for the placement to be terminated when their own child was hurt by what he conceived as a threat to his own position as biological child. The biological child had resented hearing the fostered child address his foster carers as mummy and daddy. On the other hand, the fostered child had expected a foster family relationship that would fill the void that he was feeling through not having had a birth family in which he could live. It was these high expectations of foster care that had led to the foster carers’ request for the placement to be terminated. This participant was an intelligent young man who had done well at school and was capable of understanding what fostering was. However, he expected more than a home to live in and good overall care. What he had missed in residential care was really belonging to a ‘normal’ family like his friends outside residential care. So when he was living in a luxurious foster ‘villa’ he was not happy. It was not the material comforts or the good care of a caregiver that he longed for. The basic material comforts and care had not been missing when he had been in residential care. With hindsight, he realised that he felt that he belonged more in residential care with other looked-after children and with care workers who cared for him without raising his expectations to that of family membership.

So he viewed his opportunity to live in a foster family as one of many options that had been open to him. The optional nature of the placement had distanced him from a sense of belonging and identity and had led to the above-mentioned questioning and mixed feelings of gains and losses. The experience of the family had helped him to weigh the losses against the gains of family life in general. It may also have helped him to come to terms with the loss of his own family because the foster family life that he had thus experienced had not been rosy. However, overall, in his view, the benefits had still outweighed the losses and he had appreciated the opportunity of having lived in a family even though the placement had not lasted as long as expected.

Another adolescent Simon (C3) gave an account of various placement breakdowns but he said he had actually benefited from every foster family experience. The outcomes that he mentioned referred to educational achievement, trips abroad and boundaries that had kept him from losing his way. The families had helped him to become what he was. They had all contributed to his education and had cared for him. However, he too felt that the presence of the carers’ own children had contributed to the various breakdowns in his stays with foster families that had started when he was a baby and had lasted until he was an adolescent:

“Kont fostered fi tliet familji differenti through Appoġġ pero meta kont zghir”
“I was fostered by three families through Appoġġ but when I was young I was problematic. Privately, I used to feel that this was not my family. So you start doing things to annoy them, or to draw attention to yourself but in reality you are only harming yourself. My longest foster placement lasted 15 years. I can speak mostly about this family. They helped me a lot, they educated me and they took me on trips abroad. Obviously it was I who was problematic. I used to feel out of place relative to their children, you understand? You start doing things just to show that you are there, you understand? Sometimes this leads you to certain behaviour, they sent me away many times but then took me in again.”

This participant expressed that the temporary nature of foster care had been an unfortunate factor in that it did not provide for the more long-lasting family support that he had needed. He too felt that he lacked security and had also longed for the security of permanence in his placements. In fact he repeatedly stated that he would have preferred adoption by far. He concluded his contribution by opining that despite his various placements, he had ended up in residential care, with no home and no family to give him the ongoing support that he needed:


“With all due respect I prefer adoption. With adoption there is a signature, and the child becomes like one of your children, fostering is a bit dangerous. It has its positive aspects but it is dangerous. I have nothing against fostering, every family that fostered me tried to help me. All were good to me, they made little mistakes, nothing serious. Mistakes that occur in evey family… But I prefer adoption as now, in my case, after 15 years (in a foster family), I found myself on my own and I ended up in a residential home. Yes, they gave me a
good foundation, I was brought up in a family, and I did not have a troubled childhood, but the fact remains that I am still here (in a residential home). Had there been a signature confirming an adoption, a signature confirming ‘this is my son’, an adoption, I would at least have gained more from enjoying that family until the time that I could fend for myself.”

In contrast to the previously-mentioned participant John (C3), he had experienced warmth in the foster families and had retained a more positive idea of what a family can contribute. He felt nostalgic and wished that the placements had not broken down. One of the significant differences between this participant and the previous one lies in where the attribution of blame for placement breakdown is located by these participants. The former participant had laid the blame on the attributes of the foster family, while the latter had blamed it on his own challenging behaviour. The significance of the attribution of blame is discussed below. However, it is also relevant here. These interviewees view it as one of the relevant factors in the measurement of the success or otherwise of a case of fostering. The success of the case need not be equated to whether a fostering placement has broken down or not. As can be seen from the above examples which both ended in placement breakdowns, Simon’s foster care case was more successful in that it contributed more to his overall wellbeing than had other forms of care. This can also be contrasted with John who viewed residential care as more conducive to his growth and wellbeing.

*Living in a family. Case C Lisa (C2) ‘now I have found the love I deserve’*

Some participants experienced both painful failure and happy success. Life in foster care had been unfortunate at times, but also a journey which led to a thriving experience. Lisa (C2) had experienced difficult foster placements where she had suffered pain. However, she was appreciative of having eventually found a family where she felt safe and where she was receiving the love she felt she deserved. This participant had started her contribution with the changes she wished to see in the fostering system. She had spoken more about the failures of her previous placements and about what fostering should not be. However, she emphasised that in her current foster family, she had found the love that she needed and that she was doing well in all aspects including her education. Like many of the participants of this research, this participant also mentioned doing well at school as a valuable outcome of living with a family that was there to help you.

The quality of the children’s lives also depended on their school experiences in more ways than one. In fact, this participant mentioned that the current problems that were weighing her down were related to her peers in school. This made her even more appreciative of having a supportive family where she could find refuge from the personal problems that she was having with her peers. She had fallen out with her school friend and was in a ‘bad mood’ as a consequence of this disagreement. This is not unusual among school friends and it is also not unusual for children to be upset when fallout with a school friend occurs. However, the importance that this participant gives to how this incident had made her feel underscores how all the ingredients of the day-to-day lives of children form a complex whole. This issue highlighted the manner in which the fostered child benefits from a supportive foster carer who can appreciate the features that matter in a child’s life and give individual attention to a child. Given what she had suffered in the past, it was important for her to feel that she had a supportive and loving foster family. Even though she had no illusions
about permanence, she still felt that she was thriving within this family and expressed optimism about her future:

“I would like to see changes… maybe the (foster) parents could be much nicer to the kids, not hard-headed sometimes… they could get angry with the kids but not smack or hurt the children. The positive… I have been fostered before and it has been horrible, you get beaten… but a family will love you and take you in with them and they will show you the love that you deserve, they try their best.” (Lisa, C2)

Living in a family: Cases D Kelsey (C1), E Ella (C1), F Michael (C2), G Martina (C2), H Mark (C3): ‘happy and thriving’

Many of the interviewees seemed to be doing very well with their foster families. I was invited to speak to them in their homes and I was given the time to get acquainted with the family.38 These visits were preceded by phone calls during which I was introduced to the foster carers. In every case the fostered children welcomed me to their foster family homes. We initially spoke about recreative activities and schoolwork and the children were put at ease. In some cases, the children said very little about the actual fostering process.

They only expressed that they were very happy and that they were thriving. They did not feel the need to expand on their succinct statements:

“Jiena sewwa hawnekk fil-familja.” (Kelsey, C1)

“I am happy with this family.”

or that of Ella (C1):

“Ghal kemm tkun fostered, xorta thoss li tkun mahbuba u li ma nhossni li ghandi xejn inqas minn shabi.” (Ella, C1)

“Although you are fostered, you still feel loved and I do not feel less privileged than my friends.”

When probed for further input, she referred to what she had just said and explained that:

“Dan jorbot ma kollox li nista’ nghid li hu pożittiv.” (Ella, C1)

“This ties in with all the aspects that I could describe as positive.”

The significance of this statement can only be understood in the light of the rest of the conversation. She was a very serene and mature child for her age. She was easy to communicate with and she also

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38 The use of the first person is adopted when it helps to recreate the spirit of research process. This in no way indicates a disassociation or disagreement from either of the authors.
seemed very happy. She spoke about how keen she was on her studies and showed great pride in how diligently she had started taking her own study notes early on in the scholastic year. Ella (C1) was a high flyer in school and she had very clear ambitions and extremely high aspirations for her future. She told me what she wished to become and spoke about her passion for the profession of her choice. In fact she even showed me a beautiful special-interest book that she had been given as a present and that she was enjoying reading because it was directly related to her chosen field of study. Ella (C1) was enthusiastic about what she was learning in the sciences and showed me her school files and voluntarily discussed her favourite subjects. Her school files and books were neatly placed on her computer desk that was also in the kitchen-living room. This indicated that the family shared this living area room for various activities. Ella (C1) also spoke about all her extra curricular activities that she carried out on a regular basis. These spanned competitive-level sports, the creative arts and social events. She shared recreational activities with friends and neighbours of her age who were often invited home. This indicated how her foster family was addressing her holistic developmental needs. It may also explain why her answer to the initial question was so succinct. Ella (C1) distanced herself from processes, issues and concerns that could be associated with the social services. This in itself was significant.

In fact, she did not seem to have experienced the insecurities mentioned by the previously presented interviewees. Her foster placement had been marked by security for many reasons. Ella (C1) had been placed with this family as a toddler. No mention was made of a birth family. The foster carers joined us after the interview. We had tea with them and they seemed very warm and caring. Ella (C1) referred to them as mummy and daddy. The ‘mummy’ had fussed over me from the very start and had gone out of her way to make me feel comfortable. When the ‘daddy’ joined he mentioned how happy he had been when the child had come into their lives and he said that his only wish was that he could go on being of service to her. The couple had no children of their own. In the light of all this, it was made clearer to us why the child had stated that having such a loving and caring family that was there for her explained everything. In light of this, everything seemed to have been working well. The only recommendation that Ella (C1) made referred to the reduction of bureaucracy that lengthened the process needed to obtain permission needed for certain important decisions that affected her life.

Michael (C2) was another participant of about 12 years of age who also did not speak at great length about fostering. He spoke in English and he smiled throughout our conversation. He said that he was very happy in his foster family and that he lacked nothing. Michael (C2) kept repeating that he was happy about everything and felt that he was thriving. So to him the main outcomes related to an overall happiness. However, Michael (C2) wanted to make sure that he was giving me relevant detailed information. So he insisted that I asked him direct questions, as this would help him respond. Michael (C2) was keen to participate fully. The previous meetings with fostered children of his age had indicated how important relationships with friends were. Before we had started the actual interview, he had just been speaking about activities that he shared with his friends and about how he had helped them out with technical matters. Michael (C2) had shown that he also had some companions in the neighbourhood with whom he shared hobbies. So I felt safe to probe about fostering and friendships. Michael (C2) felt very comfortable with this. He cheerfully explained that it made no difference to his friends that he was fostered. He added that this did not make him feel any different to his friends:
“most of the people have problems. It is almost everywhere now. Fathers and mothers divorced… fathers and mothers fighting.” (Michael, C2)

When asked how he felt about having a say in decision-making, Michael (C2) said that he considered it very important to have a say in decisions made about his care plan. He had prepared a request to be made to the Advisory Board regarding a particular training activity that he had wanted to participate in. His foster carer had empowered him in this and had prepared him carefully for his Advisory Board session. He had wished to attend this activity because it was related to the career he had wished to take up when he grew up. Initially he was not successful in obtaining permission but after a second attempt the Advisory Board agreed to his request. He was very satisfied that he had been successful and the empowerment that he had received from his foster carer had contributed to his self-esteem. In fact his foster carer used to show him all the email correspondence that she had with his social worker and kept him involved in the decision-making process.

When probed about how he felt about social services, Michael (C2) said he did not have any contact with the social worker apart from a meeting he would have with her before an Advisory Board meeting. For him this was enough:

“I have enough time with her. I hardly ever see her so that is good for me. I do not really speak to her because things go so well here and I just see her for the six-monthly meetings at the Board and I do not really need to speak to her about anything.” (Michael, C2)

However, it could also be true to say that since Michael (C2) had not been given enough time to establish a meaningful relationship with his social worker, he did not really know what he was missing. He may not have realised the roles played by the social worker and the foster carer regarding the drawing up of his care plan. So he happily dismissed the need for contact with a social worker.

Regarding contact with his birth family, he mentioned meeting his siblings and occasionally meeting his mother when she could make it. Here too he showed that he was satisfied with the arrangement and he did not seem to have any issues of conflicting loyalties. The general feeling that he conveyed was that he felt secure in his foster family. They had made space for him in their lives. They had also provided the physical space and equipment in the garage for his hobby that required the input of specialised tools and equipment. Michael (C2) shared this hobby with his foster father and with his friends and neighbours. His foster mother helped him with his homework as he had fallen behind in his schoolwork prior to coming to live in this family. She kept in touch with his schoolwork. The foster mother had helped her own children with their homework when they were still young. Her children were all grown up now and had moved out. She had also previously helped another fostered young person who had moved back to his birth family.

This case shows the manner in which a case succeeds from the point of view of a fostered child. It shows what counts as success to this child. What counts as success varies from child to child, from case to case, and from context to context. I also had an opportunity to talk to the foster carer before and after the interview. She seemed very happy with this boy and was keen on seeing him thrive. On the way out, when the boy was out of earshot, I asked her how she had felt about having had to let go of her previous foster child. Her reaction indicated the manner in which she conceived of
fostering. She looked at me and said ‘but she returned to her birth mother’ in a manner that implied that there was no reason for concern or regret.\(^{39}\)

Another respondent, Martina (C2), who was 17 years old, also expressed that she was very happy in her foster family. The first thing that she told me was:

“After living in residential care, foster care gave me experience of what it means to live in a family and to have a sense of family.” (Martina, C2)

Martina (C2) was very busy with exams at the time as she was sitting for her Advanced Matriculation Certificate. When we were making arrangements for the interview it was made clear that the family accommodated her needs in her studies and that these studies were given much attention. Martina (C2) was finding the support that she needed at a time that could be stressful for any student. She said she had found her social workers ‘okay’ and she referred to them by name. However, Martina (C2) spoke disparagingly and emotionally about the decision-making process with regards to children in care. Her dissatisfaction with the Advisory Board centered on the manner in which important decisions were taken by persons who did not really know the child. Martina (C2) concentrated almost exclusively on this aspect of the services. However, her prospects for her future seemed bright. She too had high aspirations for her future. She spoke optimistically about the ambitious career path that she had chosen. This career would place her in a key position to be of help to very vulnerable children. It seemed as though Martina (C2) was aware of the extreme difficulties that some children face and wished to contribute towards their wellbeing. This displayed a noble altruism on her behalf and also a sustained faith in the good that services can or should do for the most vulnerable children.

Just like Martina (C2) above, a young man Mark (C3) who had been fostered for a considerable number of years also spoke positively of the family experience and contrasted it with residential care. However, even though his experience had been characterised by permanence, he also warned against the dangers of not fully appreciating the temporary nature of fostering:

“Fostering is a very lovely and positive thing. It provides a family home for a child. This home is different from institutional care that just provides a home but does not provide a family. In fostering we have a family environment. Obviously fostering means that it is a temporary provision of a family. It is important that the temporary nature is made clear and that the child is made aware of it. There is the contact with the birth family. So there are both realities. The reality of the foster family and that of the birth family. These may be very different.” (Mark, C3)

He pointed out that contact with the birth family did not apply in his case, as there had been no birth family with whom to make contact. However, Mark (C3) still emphasised the importance of the child knowing that the foster carers are not birth parents. He placed the onus of this responsibility on the foster carers:

\(^{39}\) I asked for her permission to mention this response in this research.
“It is important that the foster carers make sure that the child understands that they are not his parents. It is really hard for a child to realise that they are not his parents and that his parents are there, that they are a reality. It is hard. It is difficult.” (Mark, C3)

This theme will be taken up again below but this participant highlighted how it is intimately connected with life in a foster care family. As we shall see below, he also emphasised the important role that both the birth family and the foster family had in ensuring that the child is not adversely affected by split loyalties. Mark (C3) stressed the good outcomes of the positive role that the foster family has in the life of the fostered child, but ties this in with contact with the birth family:

“The child gets more of a life from the foster parents. The foster parents make more of an effort to give the child a good upbringing and to give the child love. The foster parents can tell the child that he/she wants the child to stay with her but that the child has to go and meet the birth parents.” (Mark, C3)

Living in a family: Case I Ylenia (C1) ‘outcomes that I can think of’

At 11 years of age, Ylenia (C1) was one of the youngest participants. She was accompanied by her foster carer who stayed with us during the interview. This participant said very little. Ylenia (C1) said that she appreciated living in a foster family because it helped her to do better in school:

“It-tfal jitghallmu iktar u jhosshuhom iktar hekk ghax ikunu jistghu jitkellmu ma’xi hadd.” (Ylenia, C1)

“Children learn a lot and they feel better because they can confide in someone.”

The foster carer looked at Ylenia (C1) and with a surprised expression asked her if she was sure that was all that she had to say. However, I made a gesture that implied that I was pleased to let Ylenia (C1) have her say. I suspected they had rehearsed what Ylenia (C1) was expected to say. I made Ylenia (C1) feel comfortable and thanked her for her response. Ylenia (C1) smiled all along and fixed her eyes on me. She then asked me to help her with more direct questions and the rest of her response is included below under the relevant headings. When the interview was over the foster carer spoke at some length about the pressure that the demands of schoolwork exerts on children. Like Ylenia (C1), she prioritised doing well at school as one of the most important positive outcomes of foster care. This preoccupation with the pressures not to fall too far behind in schoolwork was a common theme.

Living in a family: Case J Andrew (C3) ‘pictures of my First Holy Communion and Confirmation’

Andrew (C3) was in his 20s. He described his very troubled childhood. He gave detailed accounts about how much he had suffered in his birth family before being taken into care. The suffering had included physical and emotional abuse by his birth mother. This notwithstanding, he acknowledged his birth mother and was still regularly in touch with her. No mention was made of his father. His foster placements with the same foster carer had broken down many times. Like participant
Simon (C3) above, Andrew (C3) said that his challenging behaviour had been the cause of these breakdowns. His behaviour had settled. Andrew (C3) visited and spent time with his foster carer whom he referred to as his mother. Andrew (C3) was currently living in a separate abode with his partner. However, Andrew (C3) considered his foster carer’s home as his family home. It was where Andrew (C3) had grown up. It was full of photos of the milestones of his life that Andrew (C3) had shared with his foster carer. Andrew (C3) showed us round the foster carer’s house and pointed with pride to family photographs in which he was included. This was the family that had supported him. Even though Andrew (C3) was in touch with his birth mother who lived in the same village, he treated the relationship with caution. Andrew (C3) considered himself to be part of the extended family of his foster carer. This was evident from the way in which he referred to the cousins and uncles and aunts that featured in the family portraits that adorned the house. Living in this foster family also meant living in an extended family.

Living in a family: Case K Francesca (C3) “possible strain on family life”

Two of the adolescent participants said that they had suffered placement breakdowns that had coincided with stressful periods that the foster carers themselves were going through. Lisa (C2) described only the pain that the stress caused her. However, Francesca (C3) said she felt that her presence in the foster family might have been adding to the strains on family relationships that had been escalating.

Francesca (C3) described how her previous foster mother had started reacting unusually aggressively. She described stormy confrontations with her ‘stressed’ foster mother. She referred to other disagreements between the foster mother and other members of the foster family. She described how eventually the confrontations came to a head and the placement failed. The adolescent left the foster family where she had lived since she was a baby. She implied that her presence in the foster family had been one of the reasons why the foster mother and foster father had been having worrying relationship problems. She suspected that her absence from the family had helped the relationship between the foster carers to improve:

“Issa l-affarijiet vera kkalmaw, u bhala koppja iktar inghaqdu issa, u ma nafx jiena xi stajt jiena naghmilhom biex gibt dawn l-affarijiet kollha… Ma kienetx l-intenzjoni tieghi. Issa, la tlaqt, u naf li l-affarijiet qeghdin ahjar, I don’t regret it. Iva naf li nimmisjahom hafna u nixtieq nerga’ immur hemm u narahom u hekk… lilhom xorta mama’ u papa’ nghidilhom, mhux hekk?” (Francesca, C3)

“Now, matters have calmed down considerably and they have grown closer as a family, but I do not know what I could have done to bring about this situation… It was not my intention. Now that I have left and I know that things are going well, I don’t regret it. I know I miss them a lot and I do go back to see them and so on… I still call them mummy and daddy, don’t I?”

Francesca (C3) was missing all the foster family very much and repeatedly mentioned how much she would appreciate visiting the foster family home after an absence of many months. However, she said she found great comfort in visiting her foster grandparents and foster uncles and aunts and the rest of the foster family. The foster mother had told her that if she left the foster family,
she would not be allowed back. Another older interviewee had referred to situations like this. He had said that if parents were having problems with their biological adolescent children, it is most unlikely that those parents would impose a similar condition on biological children. It had made him feel insecure and unloved to think that foster carers could just terminate a placement when it was not going as well as they thought it should. This was the case with Francesca’s (C3) foster placement and she was very sad that she could not visit what had been her home for practically all her life. She was waiting for the day that the foster carer would at least allow her to visit.

Francesca (C3) explained that she had very strong emotional bonds with the different members of the foster family. She also explained that these bonds would remain more meaningful to her than some of the bonds that she could eventually make with her absent birth family members should they enter into her life.

Francesca (C3) spoke at length about the social service system that was responsible for her care. These themes will be discussed later in this book but they are significant here as well. She expressed how disappointed she felt about the manner in which the assessments of the foster placement were carried out. She also underscored the necessity for visits by social workers to be much more frequent and include unannounced visits. She insisted that the child needed to be given the opportunity and the space to be able to speak to her social worker in private. She was emphatic about the fact that the child’s contact with the social worker needed to be done outside the foster home and not in the presence of the foster carers. All in all, she did not feel that she had received enough support from the system.

3.2 Issues as brought up by the children themselves

*Living in a family: Boundaries*

Amy (C1) who was 11 years old, had lived in two foster families that she could remember well. She contrasted the two foster families:

“Il-familja li kont noqghod maghhom, jekk ma rridx niekol dik, ma niekolx dik... ghand dawn issa kważi drajt niekol kollox. Per ezempju, nghidilhom, ‘le ma inhobbux’ imbaghad (names female foster carer) tghidli ‘duqu qabel ma tghid li ma thobbux u tghidli mbaghad wara li nduqu u nghidilha ‘kemm ghogobni’ u nghidilha ‘illum sirt inhobb xi hağa ġdida’ U mhux taghmilhom ‘spoilt’ jekk ma tkunx thobb dik il-hağa, tippruvaha qabel ma tghid li ma toghġobx.” (Amy, C1)

“The family I used to live with before... if I did not want to eat something specific, I did not eat it. With this family I have got used to eating everything. For example, if I say ‘I do not like that’ and then (names female foster carer), tells me ‘taste it before you say you do not like it.’ Then after I taste it, I tell her ‘I liked it’ and I tell her ‘today I started to like something else.’ And (in this way) you do not spoil them (the fostered children). If they do not like the taste of something, you make them taste it first before they can say that they do not like it.”
What Amy (C1) appreciated about her current foster family was that they did not spoil her. She was mature for her age. She expressed very eloquently how important it was not to spoil or pamper children too much. Like participant Simon (C3) above, she appreciated the benefits of some of the boundaries that her current foster carers set. However, there was an element of ambivalence because she also complained that she did not like certain extreme restrictions that made her stand out from her school friends. In fact, these restrictions were making her very unhappy and she repeatedly told me that she was longing for an opportunity to speak to her social worker about them. She complained that she felt very sad about the fact that her social worker was hardly ever available, very rarely visited and that her contact with her was not enough to give her the opportunity to explain how she was feeling. This child was at an age when she would soon start the transition to adulthood. She was calling out for help from her social worker to help her deal with issues concerning boundaries. This may have been a prequel to a crucial period in her placement that required timely and adequate support from the social services that were responsible for the wellbeing of the child.

To a lesser extent, another participant Theresa (C1) spoke about how constrained she felt by the exacting and persistent demands of her foster carer. Theresa (C1) said that this required much patience on her behalf. Both Amy (C1) and Theresa (C1) expected some more space for involvement in decisions concerning their lives. However, both participants had very caring attitudes toward their carers. Both of them had also indicated that they were keen on playing a helpful and altruistic role in the relationship that they had with their carers. Theresa (C1) mentioned that she was protective of her carer and was keen on doing her best to see that her carer was happy. It is significant to note that in these cases, no anger or extreme measures were implied. Rather, they implied that boundaries had always been set in an atmosphere of parental love that did not undermine the security or the dignity of the children. Both of them said they loved their foster carers very much and that, to them, these foster carers were considered to be mothers. In fact, Theresa (C1) had emphasised that in her experience, her foster carer had been the only person whom she had known as a mother and who had cared for her as a good mother would.

The situations described above differ from the more troubled and turbulent behaviour problems that some of the participants had described. These are discussed under a separate heading as the main issues arising from these sets of cases are significantly different.

Living in a family: ‘I want to help them in their old age’

Even though Amy (C1) referred to her foster carers by their first name, she said that she considered them to be like parents to her. Both foster and birth parent figures featured predominantly in her long meeting with me. She loved them all. She expressed feelings of gratitude for both birth and foster families for having loved her so much. Permanence and continuity were important to her. Amy (C1) expressed a desire to keep up contact with both the birth and the foster family when she grew up. She also expressed a desire to go on caring for all of them when they grow old. Amy (C1) said that she wanted to be allowed to help them when they themselves may need her help in their old age:
“Nixtieq li jibaghu jiftakru fit-tfal taghhom, li la jikbru jkollhom kuntatt, tal-fostering u l-familja propja. La tikber ikollok kuntatt maghhom, tibqa’ bil-kuntatt mhux qisek tghid ‘rabbewni u daqshekk’. Tibqa’ bil-kuntatt u tiehu hsiebhom la tikber ukoll u jekk ikunu xjiehu. U jekk huma jkollhom bzonn l-ghajnuna tieghek taghtihielhom u mhux tghid ‘x’jimpurtani minnek’. Anzi naghtik l-ghajnuna. La jkunu jhobbuk hux?” (Amy, C1)

“I would like them to remember their children and that when the children grow up, they maintain contact with them, with the foster carers and with the birth family. When we grow up, we should keep in contact with them and not just think ‘they have brought us up and that is all there is to it’. You should remain in contact with them and look after them when you are an adult and when they have grown old. And you go on helping them if they need help. You should not say, ‘I do not care about you.’ On the contrary ‘I will help you.’ Shouldn’t you once they love you?”

So Amy (C1) needed to know that her relationship with both her foster and her birth families would be lasting. She also envisaged an eventual reversal of roles when she would be the one to care for her birth and her foster family.

**Smacking and emotional abuse**

In contrast to the two cases described above regarding boundaries, Lisa (C2) and Francesca (C3) were two other participants who were quite explicit about feelings of emotional and physical pain that they had suffered while they were in foster care.40

They said that the behaviour management approach of their previous foster carers included smacking. In one of the cases, emotional abuse was also reported. Both described how this caused emotional pain. They were emphatic about the negative effect that this has on fostered children. Their accounts suggested that their carers were feeling anger. One participant spoke at some length about how she felt about disciplining children:

“I mean, jekk jaghmlu xi hağa hažina, tfal huma! Ghalfejn ghandek tgħajjat maghhom jew ġieli ahna, jien kont imsawwta, kont mill-foster parents jiġifieri. I mean m’ħux affarijiet. Jew se tidhol għal-haġa u jkollok il-paċenzja, imma ma tkunx ħajba l-haġa hux?” (Francesca, C3)

“I mean, if they do something unpleasant, they are only children after all. Why should you shout at them, or else, even I, I was sometimes smacked by my

40 In both cases the researchers asked the participants whether they had told their social worker about the smacking. Both said that the social workers had been informed. However, in both cases the researchers told the participants that they would have to waive confidentiality on this aspect and speak to the social workers about this. They were both very comfortable with this and gave the researcher their consent.
foster parents. This should not happen. You are either going to undertake a task and have patience for it or not...”

In her reply to a probe regarding whether she had informed her social worker about the smacking she said:

“Iva, kont ghidtilha. Kienu jkelimuha huma, u dan l-ahhar, meta kont nghidilha li sejra, kienet vera nice mieghi l-foster parent ghax kienet taf li ha mmur u tipo li ha titlifni issa u hemm jien kont nissaporti hafna, minn dejjem ta, minn meta kont ghadni żghira inkun hurt kienet ittini u hekk.” (Francesca, C3)

“Yes, I had told her. They used to speak to her, and more recently when I used to threaten to leave, the foster parent was really nice to me, as she realised I would leave and she would lose me, and I used to put up with a lot, for a long time, ever since I was a little girl, I was hurt and she used to hit me.”

She was asked to explain what kind of smacking she was referring to:

“She either pinched me, I mean, or when she was very cross, she would hit me, with her hands I mean, not with a belt or a squeegee or something like that. But still... And she had grown used to the fact that if she smacked me I would tell her ‘stop’ or ‘I am going to report this’. So mostly she used to insult me verbally.”

This participant described how the emotional abuse was more painful to her:


“She did not smack me a lot when I grew up. She used to call me names, mentioning mummy and daddy and so on. This sort of thing. And this hurts more than being smacked. Because the effects of a smack wear off quickly.”

The social workers had been informed about this situation. She described the impact of the support:

“Kienet tghajjarni, u mbaghad kont immur ghand psychologist ukoll. Kienet tghini kif se nikkowpja maghha l-affari. Ghax ġieli kienu jkelimuha huma, u kienet tghidilhom ‘X’41 u hekk. Jiżifleri, ma kienetx taghti kashom. Imbaghad kont nara jien x’ghandi naghmel biex jew innaqashom l-affarijiet...” (Francesca, C3)

41 The participant used an English expression that denoted that the foster carer was the one to decide how to manage her household. This is quoted verbatim to respect anonymity.
“She used to call me names, then I used to go to a psychologist. The psychologist used to help me cope with it. Sometimes they (the social services) spoke to her and she used to tell them ‘X’ and so on. In other words, she used to ignore them. So I had to work out how to improve the situation myself...”

However, this interviewee explained that the carer had been acting in an atypical manner because she had taken on more than she could cope with. She described the current position after the placement breakdown:

“M’ghadhiex tkun daqshekk tense il-mama’ u hekk.... Jiena nahseb li ghax tant kienet tkun stressed u ma kienetx tiflah ghal-iktar u kienet tiżvoga...” (Francesca, C3)

“Mummy is no longer so tense...I think that what happened was due to the fact that she was stressed and could not take on any more and she used to vent...”

Despite the above, Francesca (C3) referred to her foster carer as ‘mummy.’ She also showed that overall, she had also deeply appreciated having been brought up in the foster family and frequently made reference to the otherwise good upbringing that she received. She also expressed deep feelings of love for the whole foster family, including grand parents, aunts, uncles and cousins. This is being mentioned here to highlight the otherwise positive experience that she had been given. However, leaving aside the question about the ongoing appropriateness of this placement, this account suggests that the foster carer had not been provided with the adequate support that she needed in order to fulfil her role. It is very significant to note that Francesca (C3) had been most emphatic about the dire need that she had felt for more frequent assessments of the placement, more frequent home visits, unannounced home visits, meaningful participation of the child in the formulation of care plans and better support all round from the social services. In brief, she had described a situation where she had realised that there had been an imbalance between what was expected of the carer and fostered child and the resources/services that were available to deal with it.

The birth family

The majority of above participants had all been in care for the greater part of their childhood. The role of the birth family in their lives varied considerably. In this section, mention will be made of some of the positive contributions and some of the concerns related to the participants as members of their birth family.

i. Expressions of love

The positive contributions referred to love that the parents showed their children. This expressed itself in a desire to be able to have contact and to give gifts to the children. However, as one participant pointed out, the birth mother may not have the financial means to buy the gifts for her children that she would like to. This participant was sensitive to the pain that a birth mother may feel when she would like to pamper her child with presents that she thinks that the child would appreciate. What was significant for this interviewee was that the mother desired to give the child
what she wanted. This participant was critical of children who played on the emotions of their birth mother by expressing wishes for presents. She was very sensitive to the pain that the birth mother could feel when she realised that she could not financially afford to give the child costly presents. What mattered for this participant was that the birth mother did not suffer unnecessarily.

ii. The child’s identity

The participants shared a deep interest in understanding their identity and in being at ease with who they were. Unfortunately, in some of the cases, the children expressed how much they had suffered as a result of social stigma that resulted from the fact that they could not live with their birth families. Unlike Michael (C2), a female participant who was about 12 years old confided how she had tried to keep the fact that she was fostered a ‘secret.’ She explained how much she had been hurt when the word went round in school that she was being fostered:

‘u taf kemm niddejjaq meta jikxfu s-sigriet.’ (Amy, C1)

“and you know how much it hurts when someone divulges your secret.”

She mentioned how often her friends had wondered why they had never seen her mother. They would ask who the foster carer was and this would embarrass and confuse her:


“They told me several times at school that they had never seen my mother. And I am ashamed to say that I do not have a mother, really ashamed. Even when she (the foster carer) comes (to school), they all ask me ‘who is she? who is she?’ I do not quite know what to respond. She (name of foster carer) told me ‘tell them that I am your grandmother.’ But to me she is not a grandmother. I consider her to be my mother. And I do not know what to tell them.”

So Amy (C1) was ashamed of her position as a fostered child. She considered her foster carer to be a mother to her. She also expressed how much she loved her birth mother.

iii. Knowledge and contact

Some of the participants knew the reasons why they had been taken into care. The participants who spoke about knowledge about the birth family agreed that fostered children need to be given this knowledge. They strongly believed that fostered children needed to know why they were in care and what had become of their parents. However, as was stated by one of these participants, the right time and manner needs to be carefully chosen for letting the child know about the birth family. A younger participant put it this way:

“Ghax jien qabel hekk kont, jien ghadni ma nafx ghalfejn mort fostering, nixtieq inkun naf imma ghadha qatt ma qaltli... mhux bifors inkun naf... jew
“Because I was like that before, I still do not know why I was fostered, I would like to know but she has never told me...I don’t have to know...or for example, I may be told when I grow up, but for the moment I am fine as I am.”

An older participant who had been fostered in the same family as a younger fostered child expressed concern at attempts to protect her younger fostered sibling from knowledge about her birth family. According to her, the best approach would be for children to be given the appropriate opportunity to meet their birth parents when the moment was right. She said that she did not agree with her foster carer’s practice of resorting to making up stories to excuse absent birth parents in order to protect the fostered child from being told the painful truth.

Francesca (C3) was of the same opinion regarding secrecy. Francesca (C3) drew on her own experience as a fostered child who had grown up in a foster family. She said that there would come a time when the child would need to have information about birth parents and this would present serious emotional hardship. So Francesca (C3) thought that when it is in the child’s interest to have knowledge of the birth family, this should be carefully provided. As was happening in her case, sooner or later the child would need this knowledge:

“Tajjeb jew hażin, lit-tifla nurhielha jiena. Ghax jekk jiddečiedu xi hağa tkun taf biha hi. I mean, ghall-inqas hekk tkun taf min hi u hekk nahseb. Mhx f’kull każ jiğiżieri, per ezempju, il-mummy ikollha, jien naf, tkun drug addict jew tixrob u hekk, ma tkunx każ li tista’ tara lit-tfal taghha, hekk mod iehor. Imma ghall-inqas nispjegalha lit-tifla fuq il-mummy taghha, tghidilha... Imma hi tikber u tinduna x’inhuma l-affarijiet... trid tghidhom b’attenzjoni kbira ghax tweġġa’ hafna... Ghax jiena meta kont żghira, jien ma nafux lid-daddy tieghi. Ma nafx min hu jiğiżieri. Ghandi ritratti mieghu. Imma ghaliża li ma nafx parent wiehed hija hafna u li issa li qed nikber u ghandi ċ-ċans qed nibża naghmilha ahseb u ara wahda li ghadha żghira u ma tafx min huma t-nejn li huma. ... naf kemm hi diffiċli.” (Francesca, C3)

“For better or for worse, I would take the child to meet her birth parents. Because I believe that she should know about decisions that have been taken concerning her. I mean, at least she will know who she is and know matters like that, I think. I do not mean this to apply in every case. If, for example, the mummy is a drug addict or an alcoholic or in any similar situation, that is different and she should not see the child. But at least I would explain to the child about the position of her mother. Then she will grow up and realise what the position is... You have to be very careful how to tell them (the fostered children) as they can be hurt. When I was young I did not know my daddy, in the sense that I did not know who my father was. I have photos with him. But it was hard for me not to know one of my parents. And now that I am growing up and may be able to get to know him, I am afraid to do so. So it would be much worse for a girl who is still young and does not know any of her parents... I know how difficult it is.”
She described her own difficult current situation and anticipated that other fostered children would suffer in a similar way unless they were helped when they were younger.

Mark (C3) also expressed the importance of knowledge and contact. He did not underplay the difficulties that this involved. Mark (C3) placed the onus of this on the foster carers who could be in a position to avoid the introduction of rival loyalties. According to him, this knowledge should be accompanied by effective reassurance of stability in the foster placement:

“It is important that the foster carers make sure that the child understands that they are not his parents. It is really hard for a child to realise that they are not his parents and that his parents are there, that they are a reality. It is hard. It is difficult. … A child knows and for a child who knows and who loves his birth parents it would be a positive thing for the foster carer and the fostered child to speak about the birth parents and to go along with it. This would be harmonious and would be positive. It is good for a child to be aware of both sets and to speak about the natural parents. The child gets more of a life from the foster parents. The foster parents make more of an effort to give the child a good upbringing and to give the child love. The foster parents can tell the child that he/she wants the child to stay with her but that the child has to go and meet the birth parents. (The) sad part (is that) the child can be brainwashed by the natural parent to believe that the foster parent is not a good mother/father.”

(Mark, C3)

So even though Mark (C3) warned against the manner in which the children’s feelings could be manipulated by birth parents, he still believed that knowledge and contact were necessary for the child. However, Mark (C3) highlighted the possible risks so that measures could be taken to provide adequate professional support to all the parties concerned. He believed that this support could take various forms including training and well-formulated policies. According to Mark (C3), this training needs to be thorough and honest. He was very emphatic about this. Mark (C3) insisted that the main objective of training needs to be the professional manner of the frontline work that has to be done by foster carers. He believed that it was only in this way that placements could have a higher rate of success. Mark (C3) warned against training that was aimed at minimising the foregrounding of the more difficult aspects of foster care. By difficult, he was not referring to the behaviour of children that could be challenging. By difficult Mark (C3) was referring to the misunderstandings that may exist concerning differences between fostering and adoption that were not always understood well enough. According to Mark (C3), this could lead to foster carers fearing the hold that birth parents could have on fostered children and vice versa. In fact, Mark (C3) said that this was the ‘hardest thing’ about fostering. He did not downplay this. Mark (C3) felt that this was so hard that he himself would never consider fostering just because he would find this too difficult. At this stage of his contribution Mark (C3) repeatedly emphasised how hard it was. He expressed uncertainty and hesitation but his final message was this:

“If I were a parent I would not think of fostering a child because the child would then leave and go back to his family… because at the end of the day the child will prefer his parents even though they have not provided love or a good upbringing. It is hard, sad and difficult to understand. I would not go for it (fostering). For the foster carer it is so hard to know about the temporary nature
of it but they have to be aware that the child is not going to stay – it is sad – two or three years and then ‘bye bye’ and they are left with a void.” (Mark, C3)

So what Mark (C3) feared was this feeling of a ‘void’ that could be the sad outcome for foster carers. This showed that Mark (C3) cared very much about the wellbeing of foster carers. His placement had been very successful at the level of personal emotional growth and at the level of professional development. He was a young adult in a top profession who had spoken very highly of his foster family. His bond to his foster family was very strong.

iv. Contact and more

The different emotional responses regarding contact with birth parents were very clear and not ambivalent. Some of the fostered children expressed how much they loved their family:

“U ahna, il-fostered, ghall-inqas inkunu nistghu narawhom lill-ġenituri taghna.” (Amy, C1)

“And we the foster children, at least we can see our parents.”

Amy (C1) spoke of the worse situation of children whose parents were not alive. She appreciated fostering as care for children who still have contact with birth parents. She explained:

“Ghax fostering u adoption differenti hafna, hafna, hafna. Fostering meta jrabbuk familja u tkun tista’ tara lil-ommok darba fil-ġimgha u adoption meta jiehduk ghal dejjem, ma tkunx tista’ tara lil-ommok ghax jew tkun barra minn Malta, per eżempju, jew tkun mejta, jew ma tkunx tixtieq illi tarak per eżempju. Jogħobni l-fostering ghax inkun nista’ nara lill-mama’.” (Amy, C1)

“Because fostering and adoption are very, very different. Fostering means that you are brought up in a family and are able to see your mother once a week and adoption means that they take you permanently and you cannot see your mother either because, for example she may be living abroad, or she may be dead, or perhaps if she may not want to see you. I like fostering because I can see my mother.”

Amy (C1) explained that she has been in care since she was a baby, about 10 years in all. She had lived with one family for five years. She has been with her current foster family for another five. Despite having lived away from her mother practically all her life, Amy (C1) was still very sensitive to various situations that might cause avoidable pain to her mother. In fact, from the stories that she said, she showed how sensitive she was to the feelings of her mother and to the feelings of her foster carers. She felt protective about the feelings of her mother and was distressed about unnecessary pain that her mother could suffer. One of these, which will be referred to below, was the frequent changes in those who provided social services to her and to her mother. Amy (C1) said that this caused much pain to her mother who suffered embarrassment about having to expose her material poverty and humble living conditions to yet another person. So after having lived in foster care for 10 years, Amy (C1) still had a strong bond for her mother and eagerly looked forward to her contact meetings with her mother. What was positive about this bond was that it
did not interfere with the mother and child relationship that she said she had also formed with her foster mother. Amy (C1) did not explicitly put it this way but during the rest of the conversation she had showed how much she cared for her foster mother and, as quoted above, it was also a mother/child relationship to her. This case showed how it is possible to form attachments to more than one mother figure and to do so without feelings of divided loyalties.

Unlike Amy (C1) who mentioned her mother throughout our meeting, Michael (C2) who was close to her in age only referred to his birth family as a response to a direct question. He was one of the participants who had insisted on direct questions to help him out with his response. When asked about contact visits with birth family, Michael (C2) said that he only met his birth mother and siblings when they turned up for contact meetings. He appreciated meeting them but did not have regular contact:

“At SAVs (Supervised Access Visits) I meet my brother and sister and my mother. Sometimes my mother does not turn up. I do not spend enough time with her and I do not see her often, maybe once every six months… SAVs go well and I meet one of my brothers because the others are usually busy. When my mum turns up it goes well.” (Michael, C2)

This participant did not make further reference to his birth family. However, throughout the conversation, the positive involvement of his foster family was repeatedly referred to. Here too, there was absolutely no reference to any feelings of divided loyalties.

Other participants made fleeting references to contact with birth parents in the context of discussing other themes. Their references did not display what these meetings meant to them. However, one participant made a general comment about the importance of safeguarding children when they had contact visits with birth parents. She approved of the presence of supervisors to prevent harm that children could suffer at the hands of abusive birth parents:

“jew ghax kienu jsawtuhom per eżempju u meta jmorrju jarawhom ma nkunx nixtieq li qishom… tajjeb li jkollhom is-supervisor maghhom, dik toghjobni li tkun taf eżatt xi jkun qed jiği.” (Sara, 3)

“or perhaps because they used to smack them and when they go to see them I would not like… it is a good idea to have the supervisor present, I like that because one knows exactly what is happening.”

In the eyes of Sara (C3), contact with birth parents should not stop. However, it also represented a potential danger for children and so required supervision. Another risk associated with contact was already mentioned above. This was the risk of ‘brainwashing’ the child into thinking negatively about foster care mentioned by Mark (C3). Here too, it was not suggested that contact should stop in cases of such behaviour. What had been suggested was that there should be a professional response to address the issue.

v. The support of the foster carer after contact

Francesca (C3) had clearly delineated some of the troubling potential outcomes of contact with
birth parents that required dedicated response from the foster carer. She had described the role of
the foster carer as being key in addressing certain needs that a child may have after contact with
birth parents. Francesca (C3) had been speaking about the importance of contact with birth family
and responded to a probe regarding what some foster carers say about how some children may find
it hard to settle after contact:

“Anke lili hekk kienu jghiduli. Ifhimni, jiena li kont fostered u lil-mummy tiegħi kont naraha darbtejn f’xahar biss, kont bdejt naghmel qisu challenging
behaviour ħafna. Kont per ċempjju l-iskola ma naghmilx il-homework. Kont
ghaddejjia minn fażi li nqatta’ l-kotba, inhażżez fuqhom jiġifieri. Kont vera
frustrated u hekk... ghax jiena kont qisni kont imċahħda milli nara lill-parents
tiegħi. U tipo vera, meta kont immur ghand il-mummy, il-mummy ghandha
lifestyle mod u l-foster parents ghandhom lifestyle mod ieħor. U meta kont
immur jiena, kont trid taddatta ġhal-lifestyle tal-mummy tiegħi. Imbaghad
meta kont immur kont insibha naqra diffiċli sakemm taddatta ġhal fejn kont
qabel.” (Francesca, C3)

“That is what they used to tell me as well. I mean I was fostered and only used to
see my mummy twice a month, and I started experiencing some quite challenging
behaviour. For example, I used to skip doing homework for school. I went
through a phase of tearing up my books, scribbling on them. I was experiencing
feelings of frustration and other similar emotions... this was because it was as
though I was being deprived of the opportunity of seeing my parents. And well,
it is true, my mother has a different lifestyle from that of the foster carers. And
when I used to go to my mother I had to adapt to a different lifestyle. And when
I went back again (to my foster family) I used to find it difficult to adapt and
return to my previous environment.”

This had made her foster carers wary about her visits to her birth mother. They expressed concern
about how her visits were having a detrimental effect on her behaviour. They blamed the contact
visit for the disturbance but Francesca (C3) turned their argument on its head. Francesca (C3)
thought that they were not understanding two essential ingredients of the situation. First of all they
did not really understand what she was going through. Secondly, they had not understood what a
vital role they had in the resolution of the troubled waters that she was navigating. Francesca (C3)
explained what she had been through:

“Hija hağa naturali. I mean, nahseb jiena meta kont fostered u l-parents (foster
carers) kienu jghiduli hekk, kienu jghiduli li ha ninbidel kont nghidilhom
‘immagina li kont toqghod mal-mummy tieghek, immagina l-mummy tieghek
kienet il-foster parent u kont tmur ghand il-mummy tieghek.’ Qisek trid
taddatta għaż-żewġ nahaħ u vera ma hijiex faċli specjalment meta tkun għadek
żghira. I mean, hija ovvja li inti ha tkun naqra iktar imdejja wara u tkun iktar
tipo angry u hija ovvja għax filli tkun qegħda mal-mummy u mbaghad ikololok
terġa’ tmur. U jista’ jkun mhux għax int trid tibqa’ mal-mummy imma dik il-
hağa li se tissepara ruhek minn mal-mummy għax vera tewġġa li heqq, jiena
hekk naraha. .... Kemm mill-birth mummy u anka bil-kontra. Jien meta kont
immur ghand il-mummy kont qisni noqqgho nibki u nghidilha ‘ma, ha nerga

“It is natural. I mean I think that when I was fostered and my parents (foster) used to tell me that I would change, I used to tell them ‘imagine if you were living with my mummy and imagine if your mummy was your foster parent, and you visited your mummy.’ You need to adapt to two situations, and this is really not easy especially when you are young. I mean it is obvious that afterwards you feel a bit disappointed, and maybe a bit angry, this is normal because first you are with your mummy then you need to go back. Maybe it is not because you wish to remain with your mummy, but the idea of separation from her hurts, that is how I see it... Both from the birth mummy and vice versa. When I visited my mummy (birth) I used to cry and ask ‘mummy, let me come back with you, I love you mummy.’ Then to go back to my mummy (foster) I would be really sad. I used to spend the following two days making a scene and crying and asking ‘Why me?’ and I used to say ‘I do not deserve this. I deserve better than this’. That is the time when you need the foster parents to be with you and to understand you. It is true that it seems difficult, and you make scenes, but in reality they need to know that it is very difficult, it is not so easy to say ‘I will visit my mummy and then come back.’ Then there are your feelings, I mean.”

So Francesca (C3) expected the foster carers to put themselves in her position and to understand what she was experiencing in order to be in a position to give her the support that she badly required from them during this period. She wished that her foster carers had been better prepared for their ‘proper’ role as foster carers. In fact she equated the knowledge, skill and competence that she was describing with the essence of what it meant to be a good foster carer. She expressed the disappointment that she used to feel between the ages of about 6 to about 13 when she thought that she was not receiving the love and support that she required after contact with her mother. She said that beyond that age, she began to understand her feelings better and was more equipped to cope:

“ghax huma jmissom jafu li, li tiği fostered pjuttost diffičli minnha. U meta tara’ li dawk in-nies li suppost ihobbuk, li qed irabbuk, li suppost qed jinkuraġġuk u jghinuk, imbaghad tarahom jaghmlulek hekk, vera hağa, I mean, li tikkontradixxi ruhha... u jien kont nghid ‘dawn mhux vera jriduli l-gid, tipo’... sa ma bdejt nifhem jien imbaghad.” (Francesca, C3)

“because they should know that being fostered is in itself difficult. And when you see that the persons who are supposed to love you, who are bringing you
up, who should be encouraging you and helping you, and you see them doing this to you, it is contradictory, and I used to say to myself, ‘they do not really have my interest at heart’....until I started eventually, understanding.”

Francesca (C3) does not deny that contact with birth parents can be followed by challenging behaviour. What her account suggests is that situations like this make specific demands on the role of foster carers. She describes how foster care needs to provide support that combines the love, care and understanding of a parent-like carer together with the knowledge, skills and competence of a professional workforce. This account suggests that she did not receive the support that she felt that she required after contact from other sources such as the social care services.

vi. Dependence on the consent of the birth family

Theresa (C1) spoke at some length about how aggrieved and angry she felt that she could not practice the religion of her choice because she had no legal say in the matter. She explained that her father was not a Catholic. He absolutely refused to allow her to be baptised because he belonged to another religion. Theresa (C1) spoke very disparagingly about this situation. She said that she currently only meets her father once every two weeks and claimed that she had no ties at all with him. Theresa (C1) emphasised that he had never contributed to her upbringing. He had never done anything for her or had anything to do with her upbringing. Theresa (C1) explained her position:

“Issa jien īġgilidt u ghidtilhom u ma nafx x’ma ghamiltx u ma nafx x’qaluli ezatt. Imma mid-dehra ma jistghu jaghlmluli xejn. Jiena li kieku nixtieq li la int m’ghandekx x’taqsam assolutament xejn mal-ġenituri tieghek ma jkuxn hemm bżonn il-firma taghhom. Ghax inti la qeghda fil-kustodja taghhom, la qeghdin jiehdu hsiebek huma, u laqas qeghdin jaghmlu xi hağa li... ifhem... li tgħid ‘orrrajt ha hsiebi’, jew, ‘orrrajt ghamel hekk.’ Dan m’ghamel xejn. Jien dhalt f’istitut ta’ sena u sitt xhur, u l-bqija xejn. La ha hsiebi u, u l-anqas ha hsiebi hadd ieħor. Imbaghad (foster carer’s name) kienet tajni u iffosterjatni hi. Le, jien mieghu ma ghandi x’naqsaq assolutament xejn. L-omm putpja ma narahieq, u la ma rrid naraha. U ma jridx jifirmali.” (Theresa, C1)

“Now I have fought for this. I have told them and I do not know what more I could have done. I do not really understand what they told me but it appears that they cannot do anything about it. What I wish for is that once a child has absolutely no link/involvement or connection with his/her parents then there should not be a need for their consent. This is because you are not in their custody and they are not taking care of you and you cannot say ‘well, he has taken care of me’ or ‘well, he has done this for me.’ This person has done nothing. I was placed in residential care when I was 20 months old and after that there was no more involvement. He was neither involved in my upbringing and neither did any one else look after me. Then (name of her foster carer) knew me and she fostered me. I have absolutely nothing to do with him. I do not have any contact with my birth mother, neither do I want to have any contact with her. He does not want to give his consent.”
When asked who she had made her request to, Theresa (C1) was not sure of the structure of the decision making process. However she said that ‘they’ had listened to her but seemed powerless regarding her request as ‘they’ had indicated that they were bound by law regarding matters such as choice of religion. The decision making process will be discussed below so at this point, it will not be fully discussed. The data suggested that Theresa (C1) was confident in representing her case. However, she did not have access to a child friendly explanation of her participation in the decision-making process of matters that regarded her care plan. Theresa (C1) was an intelligent person and a high achiever in school. So she would have been capable of understanding what she needed to understand regarding navigation of the system of care. Theresa (C1) could have been empowered to participate in the decision-making process.

The biological children of foster carers

Some of the participants spoke about their position vis-à-vis the biological children of their foster carers. It is significant that in all cases, it was only the biological children who were close in age who were mentioned. Some of the foster carers had had biological children who were grown up and had moved out of the family home. These were never mentioned and this suggests that they were not sources of concern or distress to the fostered children. On the contrary, the three participants whose foster placement experience included biological children who were close in age reported negatively about the presence of biological children within the foster home. These three placements had also failed. One cannot draw general conclusions from this fact but it does alert one to the demands of such placements.

However, John (C3) explicitly said that his foster care placement had failed precisely because of the effect that his placement had had on the biological child. He said that he considered it to be ‘a problem’ when a foster family adopts a child and this family already has a child of its own. He explained that he thought that being taken out of residential care at the age of about 10 and being placed in a foster family without first having had brief stays in the foster family did not work out. He thought that the move should have been gradual. This would have allowed for the necessary preparatory work and support that was needed for both the biological child and the fostered child concerned. The biological child was upset by the foster placement:

“Their son, well he used to be annoyed whenever I called his mother ‘mummy.’ Well he did accept me… because he… em… he happened to know me and we used to go to the same school together. He used to know who I was but the fact that I was not his real brother, it was painful to him and I could understand that. Do you understand me? (...) because of the simple fact that you… it was as though you felt that everyone else is upstairs and only you were downstairs… it affected me. Now at the time, how old was I? I was 9 years old and I could understand the situation as well. It felt as though I was in somebody else’s territory/environment. So I could understand him… if it had happened to me and I had been his age and someone was fostered… I would call his mother ‘aunt’ and I did not address her as ‘mum’ or ‘ma’ because it would offend him. So I used to try, when I was not in his presence, I would not go so far as to address her as ‘ma’ but I used to make the effort not to call her aunt so that at
least I would keep the custom. (John, C3)

Some references to biological children were more fleeting but they were still significant. An adolescent had referred to the biological daughter as ‘it-tifla taghhom propjā’ and described her as someone who got on very well with her mother, ‘taqbel hafna mal-mummy taghhaa’. When this participant had disagreements with her foster carer, she said the biological daughter would always back her mother. This made her feel worse.

The other participant who mentioned birth children described how aggrieved he felt when he thought that they were given preferential treatment by the foster carers. He thought that this affected his behaviour very negatively:


“Things that I do not like much in fostering, and I think this is important, is when people foster when they already have children of their own. Let me rephrase that. Let me put it in another way, it does not help that much. Because blood ties are always blood ties, and you feel like a fish out of water, you feel cut off, you feel they are preferring their own children. The first time they correct you, even for something minor, you make a scene, you understand?”

Simon (C3) also thought that the demands on a foster carer who had many young children of her own had been too great for her to handle. This was another case where the participant also partially blamed lack of adequate support and the late intervention of the care services for the placement breakdown that ensued. Simon (C3) said that the social workers should have been more aware of what was going on much earlier on in the case. He thought that timelier and more regular support had been required. Simon (C3) opined that the situation was allowed to degenerate to the point when the carer had to ring the social services to tell them to come and take the child away.

**Being happy**

One of the participants contrasted material comfort with contentment. Some placements might tick all the boxes concerning material requirements. However, what she considered most important was the element of happiness:

“There was never anything that I could complain about... they always paid my school fees. I went to a Church school. I mean I used to go out and dress up like my friends, she always bought me things. But it is not always those things that matter. What matters is being happy at home, I was not happy, so it was not enough that I had material things.”

This contribution provides rich food for thought. It suggests what is important to consider when monitoring a foster care placement. The outcomes that mattered to her were not associated with having a decent standard of living, for a good education, or being able to keep up with the lifestyle of peers and such matters. These matters were not so difficult to assess and the boxes could be ticked once and then reevaluated by a qualified professional in the field. However, what mattered to her could only be adequately assessed by a professional who had first built a relationship of trust with the child. Happiness is not easy to define, let alone to assess. Children find it easier to open up with someone after first having built a relationship of trust. This contribution makes very resource-rich demands on the system.

**Temporary nature of fostering**

The participants who felt secure in their foster placements did not mention or indicate that they feared that their placement would be terminated. However, Simon (C3) repeated his preference for adoption and further described how insecurity can make a child suffer:

> “Naqbel aktar mal-adoption milli mal-fostering. Mhux ghax il-fostering hażin imma l-fostering mhux permanenti. Imma tifel tkissru, tkun taf illi llum jew ghada tigi ommu tiffirma u tiehdu. X’jiğiżiferi?” (Simon, C3)

> “I prefer adoption to fostering. Not because fostering is not good but because fostering is not permanent. But the child can be destroyed by the thought that one day the birth mother could sign and take him away.”

Mention has already been made above to the contribution of Mark (C3) who viewed this aspect from the point of view of the foster carer. These participants are referring to long-term placements during which emotional family-type bonds are created. They raise these questions in a system of foster care that accommodates long-term placements without affording these placements the safeguards that could be in place with an option for permanent fostering. They may be highlighting a gap in our system.

**Challenging behaviour**

Three of the participants described what they called the ‘difficult’ or ‘challenging’ behaviour that they had sometimes exhibited. Andrew (C3) gave detailed accounts of how his placement had broken down many times. However, he had returned to the foster placement every time. The placements of Francesca (C3) and of Simon (C3) who had both spoken about their ‘challenging’ behaviour had broken down permanently. Simon (C3) took part of the blame of the frequent
placement breakdowns upon himself. He described the frustration that he used to feel when he reflected on his situation as a child who had to live away from his birth family:

“Qisha rabja ġo fik li tohroġ wara ċertu żmien, ma nistax nifhem ghal x’hiex, jiġiżiferi... rabja kbira, fhimt... tibda tghid, ghalfejn jien ma stajix inkun fil-familja naturali tieghi?” (Simon, C3)

“There is an inner anger which emerges after some time, I cannot understand it, a great anger, you start asking yourself, why couldn’t I be in my own birth family?”

Simon (C3) felt disappointed by what he considered to be the manner in which the social services had left him unsupported once he had been placed in a foster family:


“I recommend fostering but it is important to follow up fostered children. For example many care workers identify a family for you and so on but after a certain time I do not know what happens, they seem to forget about you. They leave the children on their own. Is that possible? I do not know. I think it is a good idea to meet once a week (with social workers) because of your character... I know because I was fostered... you will need help. You need help to cope mentally. Although the anger is great and maybe the support does not help, it is important that we support the children. Otherwise what happened to me can happen to others. After a time of not finding psychological or medical help, you end up taking actions without others knowing about what is happening, others such as those who work at Appoġġ.”

These words are not to be taken lightly. His impression was that he had been placed in a foster family and had subsequently been abandoned by the social services. His impression was that he had not been provided with the required supervision and assistance. Whether this impression was justified or not, the fact is that Simon (C3) felt unsupported and insecure at a moment when he really needed assistance. According to him, the placement broke down when the demands on the unsupported foster carer reached breaking point:

“They only get to know when the foster carer phones them and tells them, ‘Come and take the child away.’ Do you understand? She tells them, ‘Come and take him away as I cannot stand him any more.’ In reality it is not an anger that is caused by what is happening then, but an anger at what you had been through when you were young. Do you understand?”

He made a strong case for more meticulous and regular monitoring of foster care placements.

*Age at which a child is ‘fosterable’*

Two of the participants spoke about the manner in which prospective foster carers select the children that they are willing to foster. John (C3), whose placement had failed when he was much younger, felt aggrieved that at his age, no prospective foster carer would be willing to foster him. They would assume that he was ‘troubled’ and rule him out without even having bothered to meet him:


> “There is a mentality that fostering is only appropriate for young children. On the other hand, if I were 16 years old… it would be difficult for me to find a family that would be prepared to foster me. People would think ‘if he is sixteen and is in residential care then he is not what we want, it would be difficult to parent him…if we foster a child as a baby, then we can bring him/her up as we wish to. So we had better not foster him.’ They assume that the boy is going to be troubled without even having met him or having spoken to him.”

Mark (C3) deplored what he called the ‘shopping list’ mentality of some prospective foster carers. His strongly worded remark was based on what he thought of as a misconception of the whole *raison d’être* for fostering. The potency of this message might be lost in paraphrase:

> “What I mean is that if you are doing this so that you get for example, a girl of a particular age with a particular hair and eye colouring, then you have the wrong idea of what fostering really is. You cannot approach fostering with a specific list. If you want to do a service, you should not care so much what kind of child you get. But in their fantasies some foster parents have a particular picture of their ideal child, of their preferences. I am not referring to… to a certain extent it is also fine to have a preference for a particular age group… But preferences like, for example, for a blond child, and expecting that you can go and see and choose… That is also going to create a sense of ownership or that means that you want to own the child and not to give a service. It is not the attitude that is best for the child. It defeats the purpose. Why do you have a preference if you do not think of him as yours? Just take him with you.” (Mark, C3)
Safety of foster carers

Mark (C3) worried about the safety of foster parents in some cases. He spoke about some birth families that may come from deprived or criminal backgrounds of ‘ignorance, abuse, poor housing or crime.’ Mark (C3) highlighted potential disparities between the foster family and the birth family. He worried that in some cases this could lead the birth families to harbour feelings of aggression towards the foster carers. Mark (C3) worried that during contact meetings the birth parents can extract information about the identity and home address of the foster carers. Therefore he thought that safety measures should be in place to protect foster carers from harm.

Services

All the participants who spontaneously mentioned the social services themselves stated that they thought that the support and the monitoring that they received was insufficient. The same applies to the decision-making processes such as the Advisory Board sessions and the Case Reviews. The main complaints are grouped and presented separately under the following headings:

i. frequency of the monitoring of the service;
ii. frequent change of social workers and SAV supervisors;
iii. need for more meetings with social worker;
iv. Dissatisfaction with social worker;
v. the Advisory Board.

i. Frequency of the monitoring of the service

The section under the heading “Challenging Behaviour” included the complaints about insufficient support made by Simon (C3) whose placement had broken down. A similar position was adopted by Francesca (C3) whose placement had also broken down after fifteen years. Francesca (C3) was commenting about her foster care experience and said that she had been dissatisfied by the limited number of ‘home visits’ and ‘case reviews’. She also questioned how much the system had allowed her space to genuinely express what she had been feeling:

“Il-home visits kienu jkunu naqra, kif taqbad tghid, setghu kienu aktar frekwenti ghax kienu jkunu ftit hafna u hekk... u anke il-case review. Il case review konna naghluluq gisu once a year nahseb u ma kienx ikun biżżejjed. Fil-fatt trid tara, anke t-tfal, per eżempju. Jiena fil-case review ma kontx nghid dak li nhoss, kont nghid dak li l-foster parents iridu jisimghu... Dik hija xi haqa li ma tantx naqbel maghha ghax ma tkunx tista’ titkellem kif vera trid.” (Francesca, C3)

“Home visits were a bit, so to say, infrequent and so were case reviews. We used to have a case review about once a year I think and that was not enough. In fact you have to also consider the children. For example, in the case review I used to avoid saying what I felt, I used to say what the foster carers wished to hear... I do not agree with that because you cannot express what you really feel.”
Similar thoughts were expressed by Amy (C1) who had been fostered since she was a toddler and was still living with her second foster family. Her desire for more monitoring was founded on her need for more opportunity to engage meaningfully with her social workers:

“Jiena li nahseb li huwa tajeb huwa li jkun hemm case reviews dawk li joqoghdhu jikellmu u hekk halli anki jkollom idea fuq x’ikun hemm fil-home visits ukoll… Inkun nixtieq aktar Boards, per ezempju biex inkun nista’ nkellimhom kull xahar u nghidilhom xi jkun qed jiğiřili, u nkun irríd nghidilhom xi affarijiet imma ddum hafna sakemm tkellimhom ghax xi darba f’sena li jkollok il-Board. …ftitxixhom u ma ssibhomx… ‘Illi nkun nista’ nkellem lil social worker, illi jkolli hin nghidilha x’qed inhoss. Imma jekk kwaži ma tanx naraha, kif tridni nispjegalha x’inhu jiğiři. Kwaži s-sena l-ohra, ta rajtha! Ma tkunx tista’ tghidilha. Mbaghad jippretendu li jkunu jafu fuqek! Kif tridhom jkunu jafu fuqek jekk kwaži qatt ma tğiži? Kull ma ratni darbtejn, tlieta? Erbgha? Ma tanx rajtha hafna jiğišeri suppost la nbidlet tibda tği biex tipprova nirranġaw u nippruvaw inkunu nafu aktar lil xulxin. …ma tanx ikolli cans imma veru nixtieq nghidilha… mhux qed naraha dawn iz-żminijiet. Ma naftx issa meta jkolilha il-Board jew xi hağa ohra u nixtieqha tği.” (Amy, C1)

“I believe that it is good to have case reviews where opinions are expressed and so there can be an idea of what is happening in the home visits as well… I would like more frequent Board sittings, for example, so that I can speak to them every month and tell them what is happening to me. There are a lot of things I want to tell them but a long time passes before you can speak to them because you have a meeting about once a year. You try to see them but they are unavailable… I would like to speak to a social worker and tell her how I feel. You know, I saw her almost a year ago! You do not have the opportunity to speak to her. And then they expect to know about your life. What can they know if they are never there? She saw me maybe two, three times? Four times? I saw her a few times and then, she was replaced… she should have come to try to establish a contact with me, so we could get to know each other better. I am not given much but I really have a lot to tell her. I am not seeing her these days. I do not know if she will come when we have a Board sitting but I would like her to come.”

What this implied was that she wished that the Board would meet more often because it was before every Board meeting that the social worker listened to what she had to say. Amy (C1) associated the social worker’s interest in what she had to say with Board meetings so she assumed that they would only take an interest if there were a forthcoming Board meeting. Later on Amy (C1) said that she really needed to speak to her social worker to voice some concerns about the beliefs of her foster carers regarding some items that mattered much to her. Amy (C1) found difficulty navigating through the system which she did not understand well enough:

“Qed iddejjaquíni li biex taghmel Bord tal-Appoğq qed iddum hafna u nkun irríd nghid xi hağa lis-social workers u nčemplulhom, per ezempju biex nghid xi hağa lill-mama’ u ma nsibuhomx, jew jaghluk on-hold jew jghidulek li ma humiex hemm.” (Amy, C1)
“What is bothering me is the long interval between one Appoġġ Board sitting and another... and I would like to speak to the social workers and I phone them, for example, when I would like to tell my mother something, and I do not find them, they put you on hold or you are told that they are not there.”

This concern ties in with what these participants had to say about the frequency of meetings with social workers and monitoring visits. Clearly they wanted meetings to be held more frequently.

Mention has already been made about concerns regarding announced home visits. In that case, the participant had described the behaviour of her foster carers:

“U nahseb bhala home visits irid ikunu iktar. U s-social workers, iridu jčemplu d-dar u jmorru ghal gharrieda d-dar. Ghax jekk inti sa tavzhom ġimgħa qabel, f’dik il- ġimgħa jien kont nara li l-parents, il-foster parents ha jkunu haflna ahjar miegli, u ha jinxu b’ċertu mod sweet u hekk. Imma mbaghad, meta ma jkun ġej hadd mill-Appoġġ jew hekk, kienu ikunu vera ‘il kontra u hekk. Allura, tavzahom mhux idea tajba, nahseb jien.” (Francesca, C3)

“There should be more home visits and social workers need to phone home and visit unannounced. If they are informed a week in advance, during that week I used to notice my foster parents being much more friendly with me, and they would act in a ‘sweet’ way and so on. Then, when no one from Appoġġ is coming they act differently. Announcing visits is not a good idea.”

She also emphasised that the visits needed to be conducted in a manner that is empowering for the child and allows the voice of the child to be heard:


“Foster parents always speak on behalf of the child but sometimes they do not pass on the message that the child wishes to convey. No one feels comfortable having his/her shortcomings discussed in their presence. I used to do that. I know that mummy was hurting me in some way, but I was not going to tell them then. I was afraid, that is why.”

She strongly suggested that the social workers meet the children outside the foster family home.

“U tajjeb li s-social workers imorrju l-iskola, per ejżempju. Imorrju jkellmu t-tfal hekk ghal gharrieda.” (Francesca, C3)

“And it is a good idea for social workers to visit schools (to have a meeting with fostered children), for example. They can go unannounced to speak to the children.”
When she was asked if she thought that this approach might put prospective foster carers off the idea of fostering, she said she understood the concerns being raised. However, she stood her ground:

“İfhem, ghalija l-fostering huwa biex t-tfal ikunu ghall-ahjar. Issa kif ihossuhom il-foster parents hija importanti imma l-ewwel it-tfal. I mean, ghax jekk inti lit-tfal mhux qed taghtihom ic-çans jikkellmu, ma tistax tiehu typo feedback minn ghandhom. U jekk ikunu d-dar quddiem il-parents jew ikun hemm il-foster parents u s-social workers, xorta t-tfal mhux ha jikkellmu.

...Qed nifhem x’inti tghidli. Ifhimni, jiena nahseb li l-ahjar li tghidalhem li jkun hemm home visits li jiġifieri jkun hemm mutmenti li ha jkollhomb imorrju jaghmu case reviews u hekk, u li jghidulhom li forsi once in a while forsi jmorru jkellmu lit-tfal l-iskola. Hija xoghol imbaghad... ghax jiena ġie ġew l-iskola u jiena kont nghidilhom kollox lilhom, kont nghid lill-mama’, per ezempju: ‘illum ġiet is-social worker.’

Kienet tghidli: ‘Iva, x’ghidtilhom?’

Kont nghidilha: ‘Ghidtilhom kif immorrju d-dar ahna.’

Ghax foster parents m’ghandhomx ghalfejn, ghax ikunu jafu li ġejjin is-social workers jimxu tajjeb mat-tfal. Ghandhom jimxu tajjeb mat-tfal dejjem.’

(Francesca, C3)

“If you understand me, the best interest of the child is the point of fostering. It is important to consider the feelings of the foster parents, but the interests of the children should be given priority. What I mean is that, if you are not providing the children with an opportunity to express what they have to say, you can get no feedback from them. And if they are at home in the presence of the parents or in the presence of their foster parents and the social worker, the children will not express themselves.

...I understand what you are saying, I think the best way is to explain that there will be home visits, that they may have to prepare case reviews etc. and to tell them that once in a while they (the social workers) may need to visit the children at school. Sometimes they did come to school and I told them everything. I used to tell my mother: ‘Today the social worker came to school.’

And she would say: ‘Yes? What did you tell them?’

And I used to tell her: ‘I told them how things are at home’.

Foster parents should not be on their best behaviour because they know that a social worker is about to visit. They should treat the child well all the time.”
ii. Frequent change of social workers and SAV supervisors

One of the most common complaints about the services related to the frequent change in social workers. Maria (C3) was one of the participants who most highly praised foster care and the immense good that it can bring to a child’s life. However, she expressed this concern:


“There will be a problem… such as when the social worker for the child is replaced. There the children are traumatised as they need to explain everything afresh. Sometimes two are replaced, sometimes three. This is very negative for the child. I have been through this twice. I was traumatised.”

Maria (C3)’s complaint was reiterated several times by other participants. Rachel (C3) was also concerned about the negative effect of the changes in social workers on the birth family:

“Li joqoghdu jinbidlu s-social workers hija hağa hażina. Jiena biddilt xi seven times u ta’ kull darba qisek tghid l-affarijiet fuqek u qisek tafdahom minghajr ma taf xejn fuqhom tkun vera, vera difficili, I mean, anki ghall-parents stess jiĝifieri, jaghtu l-background tal-familja taghhom lil haddiehor ġdid. (Rachel, C3)

“It is not right that the child’s social worker changes frequently. My social worker was changed about seven times and every time you need to speak about your situation and you need to trust them without knowing anything about them, that is very, very difficult. I mean, it is even difficult for the parents themselves, to have to explain afresh the family background to another person.”

A similar grievance was felt when the SAV supervisors changed frequently. As Amy (C1) explained:

“Il-hağa li qed iddejjaqni hi li kwazi l-hin kollu jinbidlu, u dik veru qed iddejjaqni... milli jiği jwassluni jekk kelli ghaxra żgur; żgurissimu li kelli akta minn ghaxra. Dawk li jmorru jwassluni ghand il-mama’, taf kemmi ilhom jinbidlu?” (Amy, C1)

“What concerns me is that they change all the time, it bothers me. I am sure I had more than ten of the ones who used to accompany me, those who take me to see mummy, you know how many times they change?”

When asked why it upsets her, she explained:

“…iddejjaqni ghax per eżempju il-mummy tieghi ukoll u jien sakemm nibdew nidrawhom... u anke l-mummy ma tkunx tafhom u jidhlula ġo darha u l-mummy tisthi ghall-ewwel.” (Amy, C1)

“It bothers both me and my mother because before we get used to them, when
they *come to the house* to visit her, my mother feels shy at first.”

However, what hurt her most was that when a supervisor of a planned SAV could not make it, the supervisor was not replaced. Instead, the SAV was cancelled. This meant that she had to miss out on meeting her mother:

“…minflok li jjibu lill-ohra, ma jaghmluli xejn, per ezempju... u l-aktar li niddejjaq ghax inkun ilni ġimgha ma nara lill-mummy. Niddejjaq, inkun ilni ma nara lill-mummy u li ma narahiex jiġifieri, veru niddejjaq... li ma narax lill-mummy li nkun ili ma naraħa ġimgha u tghidli ‘ikkancellata.’ Anke per ezempju, inkun ġa ppreparata, niği mill-iskola ferhana u mbaghad tibaghtilna message u veru ninharqu jiena u l-mummy u anke (mentions foster carer by her name) tiddejjaq li tibaghtilna message hekk, tghidilna li ma tistax tiġi jew ghax inqalali hekk jew hekk u veru niddejqu kull meta jiġrilna hekk”. (Amy, C1)

“…instead of replacing her, they do nothing about it, for example… and what saddens me the most about this is that this happens after not having seen my mother for a week. This really bothers me, not being able to see my mother after not having seen her for a long time, it really saddens me... not seeing my mother who I have not seen for a week and then they tell me that the visit is cancelled. And I would have been looking forward to the visit, I would have returned home from school feeling happy about it and then they send me this message and mummy and I and even (mentions foster carer by her name) are all really upset that she has to send such a message. She sends a message that she cannot make it, because of something unforeseen happening at her end, and we are really annoyed when that happens.”

iii. Need for more meetings with social worker

Reference has already been made to the responses that emphasised how dissatisfied some participants were about the lack of sufficient support that they had received from the social services. These complaints were always contextualised and have been included under the relevant themes.

As in the case of Michael (C2), meetings with the social workers were often associated with the Advisory Board meetings. They were not associated with support received when it was needed most. However, some of the participants did not mention the need for social workers at all. These were the participants who seemed to be doing well and who had not experienced problems about permanency or placement breakdowns.

iv. Dissatisfaction with social worker

Only one of the participants mentioned that she doubted whether the social workers acted upon complaints that she had made:

“Ghalhekk, jiena lis-social workers kont ghidiṭilmom u qaluli ‘issa niehdu hsieb
“So I had told the social workers and they told me ‘leave it in our hands’. But things did not move forward. To be honest various things which bothered me were done and I told them about this but they ignored me.”

She felt that she was not provided with feedback from the social workers regarding the concerns that she had raised. She would have liked to know how her views were being taken into consideration. She had no idea if there had been any outcomes from her engagement with the social worker or what attention had been given to the issues that she had raised. Thus, she felt that she was a disempowered participant in the decision-making processes that pertained to her wellbeing.

v. The Advisory Board

Michael (C2) expressed that he had been satisfied with his participation in Advisory Board sittings. Michael (C2) was mentioned previously, as the fostered child who was empowered by his foster carer to make a request to the Advisory Board.

However, most interviewees had difficulties with their participation at Advisory Board sittings. Some simply felt out of their depth in the decision-making system. They felt confused about the status and role of the different fora where decisions about their care plan were taken. For example, Theresa (C1) referred to the decision-making process when she was expressing her extreme frustration at not being able to practice the religion of her choice:

“Yes I do go to some Board but do not have an idea what it is called or what it is. They listen but cannot do anything because of the law.” (Theresa, C1)

Theresa (C1) expressed what to her was a serious concern about the logistics of Advisory Board sittings. Theresa (C1) was half way through secondary school and she had described how seriously she took her studies. In fact she was keen to display her science files and other school-related work. Theresa (C1) was very emphatic about how much she worried when she had to miss lessons at school to attend Board sessions or meetings at Appoġġ:

“What I disagree with is that Board meetings are held during school hours. These are usually at the beginning of the scholastic year. It is just for a short time but I miss school. I am in Form 3 and I have to prepare for Form 5. I miss 8 lessons. Sometimes I miss double lessons.” (Theresa, C1)

She went into some detail about what these meetings cost her. She kept repeating, in a tone of disapproval and of astonishment that the Board meetings were held during school hours and that this caused her to miss out on lessons. This worried her because she was afraid that it would affect her studies adversely:

“Why is it during school hours? ...part of my physics lab book is missing because I had to go to Appoġġ. I have to ask my school friends for the notes so that I can copy them. Just at the time that I need to be in school... this happens
every year, every single year. If they had meetings in the summer, then I would only miss basketball lessons. I suggest that the Board meetings should be held in the summer. But if I miss lessons now, I will feel the effects of missed lessons in Form 5. It is difficult for me to have to ask the teachers to fill in what I missed or to ask my friends for the notes.” (Theresa, C1)

She showed that she was very conscious of the fact that she would need to do well in her studies in order to be able to hold down a job in the future. She needed to know that she would be able to be in a position where she could support herself. Her long-term security was very much on her mind. She felt that having the Advisory Board sitting during term-time could have an adverse effect on her studies. Irrespective of the validity of her fears, she was being given the message that the Advisory Board meetings and meetings at Appoqø are held at times that are convenient to the adults involved and not at a time that is suitable for school children.

Some of the younger participants said that they felt shy or intimidated to participate in Advisory Board sittings:

“Nísthë nìtkèlëm quddièm kulhad... Dawk in-nìès kollha jharsu lejk…”
(Ylenia, C1)

“I am shy to speak in front of everyone… All those people looking at you..”

Some of the older interviewees criticised the manner in which decisions are taken about their life. Martina (C2) spoke almost exclusively about the Advisory Board:

“I do not agree at all with the idea of a Board and the way it operates. I do not agree with the way decisions about children are taken. When I went there to discuss about leaving the residential home that I was in, I had not been to the Board for about a year and I had not seen my social worker for about a year and a half. And they were going to take a decision about me. How could they take a decision about me?” (Martina, C2)

Martina (C2) believed that the persons involved in decision-making should be those persons who share the day-to-day living with the children and who had built a meaningful relationship with them:

“We need more people there who are hands on, people who can take decisions because they spend time with us. So we need people who are with the children and who see how they spend their day to be on the Board. It cannot be that the Sister (referring to the nun who had looked-after her while she was in residential care) who was with us could not make decisions herself but had to call the social worker and the social worker would say that the Board and the Minister would decide. At least they can decide together with the Sister.” (Martina, C2)

Martina (C2) was concerned about the fact that it was people who did not know her who were responsible for her care plan.

“When I go to the Board, I see people all around me who I do not know. Maybe I see them at most once every six months. One time there was one Board. The next
time they had all changed. I know that there were elections and so the people on the Board changed. It is not easy to go in there and you see lots of people who are not familiar to you and they are all looking at you.” (Martina, C2)

In her experience, Martina (C2) had found that she was not at all empowered to participate in the decision-making process. She would go determined to have her say but would feel daunted by the setup:

“You do not feel comfortable to speak to them. They look around at each other and at you and they are all strangers. It is true that there is your social worker. But you go there determined to say this and to say that. Before you go you think ‘I will tell them this and I will tell them that and I will ask for this.’ Then you go there and you can say nothing.” (Martina, C2)

Martina (C2) said that she wished that the persons who took the decisions would take more consideration of what the frontline carers had to say. However, she opined that it was the Board and the Minister who took the decisions concerning her life. At this point, she switched to Maltese to exclaim emphatically:

“Bla sens jiddechiedu huma x’se naghmlu ahna… thossok trid tibda tmur kontra u tirribella. Ighidulek ‘issa nressqu r-request lill-Ministru’.” (Martina, C2)

“It does not make sense that they decide what we are to do… you feel like going against their decision and rebelling. They tell you ‘now we will pass on your request to the Minister’.”

At this point she said that she found it strange that the Minister should have the final word concerning her fate:

“For me, whatever the Minister says, I do not know the Minister and the Minister does not know me. I do not expect the minister to know us all or to meet us. Yes, it is true that the Minister is an authority who is deciding about me, who has authority over me. But that is not easy for the Minister. We do not even know who the Minister is and have never met the Minister.” (Martina, C2)

She underscored that the decisions are taken by the Board and a Minister who do not know the children. She was concerned about the position of younger children:

“This is even more difficult for younger children; this is all meaningless to them. I have seen children distressed. They are told by their carer that they have to wait for an answer to see what the Social Worker and the Minister is going to decide. They may go keenly to the Board full of hopes. Then they cry with disappointment. It is formal and difficult. You go there with the intention of saying something then you just have a mental block and do not manage to say what you wanted to.” (Martina, C2)

This is her perception of the proceedings of the decision-making process.
3.3 The children’s recommendations

Recommendations that were made by the participants while discussing the first research question are mentioned previously. The responses to the research question regarding any further recommendations will follow. The first recommendations are addressed at the fostered children themselves. The main messages relate to how fostered children could be more sensitive to the feelings of their birth families.

 Fostered children should be sensitive to birth family’s feelings

Amy (C1) spoke about how children can take advantage of the position of their birth mother and try to guilt-trip her into buying them expensive gifts. She said that she herself had acted that way in the past before becoming more sensitive to the pain that she was causing her mother:

“U anke, jekk ikollok il-familja propja… ghax ġieli ma jkollhomx minn fejn… ghax ikunu fqar… ma toqghodx tghidilhom ‘illallu kemm toghgħobni dik. Ixtrihieli, ixtrihieli.’ Ghax ikunu disappointed li jkunu jixtiequ jixtruhielek u ma jkunux jistghu ghax ma jkollhomx minn fejn. U jhossuhom disappointed hafna ghax ma jkunux jistghu jixtruhielek u veru jkunu xtaqu imma ghax per eżempju, jew ikunu fqar, jew ma tantx ikollhom minn fejn… ma nkunux tosti magghom… ha toqghod thossha ‘sad’ ghax ma xratilhiex dik il-haġa, ….u ġieli niddejaq, u din irridek tiktibha, ghax ġieli ma jkollhomx minn fejn u t-tfal xorta jibqaghj jaghmlu ta’ rashom” (Amy, C1)

“and also, if you have a birth family… because sometimes they cannot afford it, because they are poor, so you should not tell them ‘my, how much I like that. Buy it for me, buy it for me.’ They will be disappointed because they would like to buy that thing for you but they cannot because they cannot afford it. And they would feel very disappointed because they cannot buy it for you even though they would have really wished to, but because, for example, they are poor or do not have enough resources…we should not be cheeky with them… she will feel sad because she has not bought it… and sometimes I feel upset, and I want you to write this down, because sometimes they cannot afford something and the children still go on insisting on what they want.”

Amy (C1) repeatedly made reference to the poverty of her mother and to how her mother felt about this material poverty. She had another recommendation to make to fostered children regarding the buying of gifts for the birth mother and for the foster carer:

“li t-tfal jiňfakru ġil-ġenituri tagghom u jixtrulhom xi rigal żghir, ghax jien hekk ghamilt. Lill-proprja u anke li jieħdu hsiebhom. Ghax dik xi haġa li, per eżempju iżxtrulhom biċċa ċikkulata wkoll japprezzawha. Din qisu s-simbolu ta’ happiness qisu li taghti rigal, li xrajtilhom xi haġa. …inhobb nixxerja (to share)...” (Amy, C1)

“that the children think of their parents and buy them some small gift, because that is what I did. A gift to give to the birth parents and also to those parents
who look after them. Because they would appreciate it, even if it means just buying them a bar of chocolate. Giving them a gift is like a symbol of your love, having bought them a gift…I love to share…”

Amy (C1) also recommended that when the fostered children grow up they should keep in touch with both the birth family and the fostered family. She also recommended that they show gratitude towards both families for having loved them.

_Fostered children are given information about birth family_

This theme was discussed earlier. It was recommended that fostered children be given information about their birth families as early as possible. Francesca (C3) recommended that this needed to be done in a sensitive manner:


“From the beginning. Because then they used to tell my sister that she (her birth mother) was abroad and such stories. Because her mummy did not want to come and see her. They could have told her not that her mummy was abroad or did not wish to see her, but that ‘for the time being she cannot come to see you’.”

She explained how her recommendations were built on her own personal experience as a fostered child:

“Imbagħad, jien naf? Ikollha 8 years tispjegalha l-affarijjiet kif inhuma għax l-affarijjiet xi darba se jiġu f’wiċċ l-ilmu u jekk it-tifla tkun taf, ser tehodha kontra taghhom żgur għax anki jien, jien hekk kont ghamilt. Bdejt nghid huma jiktellmu hekk għax huma ma jridux lit-tfal jittilqu. Issa fil-verita’, jien għalija, xi ħaġa vera tajba li t-tfal ikunu jafu minn huma l-ġenituri taghhom għax xorta huma, il-parents taghhom huma, I mean, ma nafx għalfjejn ghandek ma thallihomx tipo jarwhom.” (Francesca, C3)

“So what can I say?’ When she is 8 years old, she can be told how things stand, because the truth will surface one day and if the girl gets to know the truth, she will definitely hold it against them because that is what I did. I used to think that they were speaking in that way because they did not want the children to leave. In reality, the way I see it, it is a good thing that children know who their parents are, because at the end of the day, they are their parents, I mean I can see no reason why the children should not visit them.”

_Fostered children meet birth family frequently_

Amy (C1) recommended frequent contact with birth family:
“Li mmorru naraw lill-ønituri taghna l-propja u li nibqghu mmorru.’ (Amy, C1)

“That we visit our birth parents and we keep on doing this.”

Amy (C1) described how she looked forward to the day in the week that she meets her mother and recommended that the frequency increases:

“Ikolli seba’ mitt sena sakemm isir il-Hamis. ...ghall-anqas it-Tnejn u l-Hamis. Mhux darba biss fil-øimgha ghax fit fitt wisq, kemm taraha, fitt, fitt inhossni ghalija forsi ma nafl forsi ghall haddiehor, imma ghalija nhossni fit ...imma forsi fit mill-ønituri ma jkunux iridu jralwhom aktar minn darba.’ (Amy, C1)

“I wait anxiously for Thursday... at least Monday and Thursday. Once a week is too little, just to see her, I feel it a lot, maybe not so for other children. But perhaps some of the parents do not wish to see them more than once.”

Another participant met her siblings for one hour every now and again when the siblings could make it. She recommended more frequent meetings with siblings:

“Nixtieq niltaga’ maghhom iktar spiss imma jekk ma jkunux jistghu, ma jistax ikun.” (Ylenia, C1)

“I wish to visit them more frequently, but if they cannot make it, it cannot happen.”

**Parental Responsibility**

There was one recommendation regarding parental responsibility. Theresa (C1) recommended that certain decisions such as choice of religion should be taken out of the exclusive hands of birth parents. She based her recommendation on her situation that was one of a very long-term foster placement.

**Prospective foster carers consider fostering older children**

Two of the participants recommended that prospective foster carers do not only or mainly consider fostering younger children. They recommended that prospective foster carers also consider fostering older children.

**More people decide to become foster carers**

Maria (C3) strongly recommended that many more people come forward as foster carers. She expressed a desire to see more children having the same wonderful experience that fostering gave her. She recommended that people should not be reluctant or scared to take on the responsibility because she was convinced that it was really worth the effort and very rewarding.
**Biological children of prospective foster carers are prepared for placement**

Two of the participants recommended that before the actual foster placement starts, the prospective foster family first needed to be given the required help to prepare it for the placement. It was recommended that therapy might be needed in circumstances where the foster family has biological children living in the family home:

“They have a biological child and they decide to foster, that is okay… But they need to see how this biological child is going to be affected.” (John, C3)

The gradual introduction of the fostered child into the foster family was also recommended. John (C3) drew on his experience of a placement breakdown that had caused him much pain. The placement had broken down because the biological child of the foster family had found the presence of the fostered child painful:

“I suggest that there needs to be a sort of guiding session. I am only making reference to situations where there are biological children of the foster carers, a real son or daughter. They have to assess how the son is going to be affected.” (John, C3)

It is interesting to note that pre-required therapy/psychological help was recommended for the biological children and not for the fostered child. The underlying concern was the difficulty of the birth family’s children to adjust to the foster placement and not the difficulty experienced by the fostered child.

**More frequent contact with social worker**

Some participants recommended far more frequent contact with the social worker. One of the recommendations took this form:

“Li jkollna l-Board li jibqghu ghaddejjin u li jkollna aktar ghajnuna ghat-tfal.”
(Amy, C1)

“That we have Board sessions frequently and we have more support for the children.”

She strongly recommended that only informed decisions be taken regarding care plans. She recommended sufficient contact between child and social worker for a relationship to be built between the child and the social worker. She believed that it was only in this way that informed decision-making could be carried out.

**Reducing bureaucracy involved to obtain required documentation**

Two of the participants recommended the speeding up and simplifying of the processes necessary to obtain certain required documentation such as passports. Complicated processes meant that they sometimes had to miss out on activities in which their peers in school were participating, such as
school trips abroad:

“Nissuġ Gerrixxi li jiffaċilitaw il-proċess ta’ kif toħroġ passaport.” (Ella, C1)

“I suggest that the process of issuing a passport be made less burdensome.”

Training of foster carers

One of the older participants recommended that foster carers be given better training and preparation:

“That the foster parents are really trained well. They get emotionally tied to the child without wanting to. Some do not have children of their own and they may be older and so they may be more vulnerable. They treat them as grandchildren. Training really needs to drill them. They are human beings after all and they get attached to the children and they find it hard to let go.” (Mark, C3)

Mark (C3) insisted that the training should ensure that the prospective foster carers really know what fostering a child can involve. He insisted that the training should not be used as a way of attracting prospective foster carers but as a realistic preparation for foster care:

“So the recommendation is that the preparation of the foster parents should not be ‘sugar-coated’ just to attract potential foster parents because there are not enough foster parents. Do not just make do with what is available because this is not enough… training needs to make them much more aware of what fostering really is so that they can make a decision with an open mind. Otherwise they will feel that they were deceived by the training. In reality it is important for foster parents to know the reality out there. Otherwise it is just not fair at the end of the day because there are people’s lives involved, the lives of the children and the lives of the foster parents. Both suffer when there is a placement breakdown or when the child leaves the foster home.” (Mark, C3)

Mark (C3) linked this recommendation to the other recommendation that he had made (already mentioned previously). This is the recommendation that there should not be a ‘shopping list’ approach to the selection of a prospective fostered child.

Kinship fostering

Sara (C3) recommended the encouragement of kin fostering where possible. She believed that the family ties could be beneficial for all concerned.

More child-friendly environment for decision-making processes

Most of the participants had not felt empowered in the decision-making process and some suggested a more child-friendly procedure. One of the youngest participants recommended:
“Li jkun hemm persuna wahda fil-kamra… li jkun hemm persuna wahda biss…” (Ylenia, C1)

“That there will be one person in the room… just one person…”

Another participant said that it would help having someone of their choice present, with whom they got on well. The person would need to be someone that they felt they could trust. This person could represent their wishes and also help them to feel empowered.

3.4 Concluding remarks

The key messages that the children and young persons passed on were clear and relevant. If one considers the totality of their contribution, one understands more fully the concept of the entitlement to special protection and assistance the child “temporarily or permanently deprived of his or her family environment, or in whose own best interests cannot be allowed to remain in that environment” (Art 20, UNCRC). In fact, the policy and practice orientations that their contributions suggest are all in line with the UNCRC and with policy and practice recommendations that have been included in the United Nations Guidelines for the Alternative Care of Children.

A family environment

The participants who were still living with their foster carers felt a reassuring sense of belonging in their foster family. They were happy not to be ‘deprived’ of a family upbringing once they could not live with their birth family. They appreciated the love, security and support that such a family provided them with. It also helped them feel that like their peers, they had a family with whom to grow up. Most of the older participants explicitly expressed appreciation of their previous foster families.

On the other hand, a few of the participants expressed the deep pain and turmoil that they experienced when they reflected on how different they were from other children who had their own family they could live with. They were tormented by the question ‘Why did this have to happen to me?’ However, although both their placements had broken down, they still appreciated the upbringing that their previous foster families had provided them with. This appreciation was also expressed in the case of the placement breakdown that had reported smacking and emotional abuse.

A sense of permanency

All the children said they had been in care for a number of years. In some cases, they had been in care for most of their childhood and adolescence. Those who were living in their foster family did not speak about fostering as temporary care. They assumed that it would last indefinitely. The main reasons for this sense of permanency were twofold. One reason related to the improbability of the possibility of family reintegration. The other reason pertained to the strong emotional family ties that the child had formed in the foster family that had become his/her de facto family.
In various ways, the children and young persons indicated the importance that they gave to stability. This was also seen in the case of those children who had placement breakdowns. In fact, the most bitter frustrations were succinctly and summarily articulated by those who were now outside the foster care system. These were the young persons who had not been fostered again and who were now in out-of-home child care or inappropriately placed in adult shelters.

**Birth family**

The birth family featured in the whole research process. Some of the selected participants had to drop out of the research because they were disturbed by developments in social problems that the birth family was going through. Another participant had mentioned how she was taunted in school about the lifestyle of her birth family. Some of the participants spoke affectionately about their birth family and what they meant to them. As seen above, their responses varied immensely. Among some of the older children, the need for knowledge and contact with birth family came out rather strongly. This however did not necessarily translate into a wish to be reintegrated into their birth family. Some participants spoke negatively of their birth parents and featured them as the source of their frustrations. Some made no mention of birth parents but only mentioned their desire for contact with their siblings.

**Supported contact**

Rather than express divided loyalty between the birth and the foster family, on the whole the participants expressed the importance of harmony and emotional support in their lives. Children highlighted their appreciation of the role played by foster carers in helping them process the emotional pain that they may feel after contact with birth family. As children in care they needed to come to terms with the reality of their situation that involved being emotionally attached to two different families. This could be a source of emotional turmoil that required particular support before and after contact with birth family. They considered the provision of this emotional support as one of the roles of the foster carers. Often their solution was not to avoid contact, but to have help, understanding and love that would help them address the situation and proceed with their lives.

It was also underscored that there was a need for more support for the foster carer in matters relating to contact with birth family. Some emphasised that the foster carers themselves required much more support and training from the social care services in order to manage to carry out their caring role with respect to contact.

**The voice of the child**

On the whole, the children expressed detachment, disappointment and bewilderment at the different aspects of the complex social care system beyond their foster family. They wished to understand the relevant aspects of the system more. They would have liked to be more empowered by and within the system. Some of them said that they felt that they did not have much of a say in the decision making process. They expressed the wish for this to be more child-friendly in many aspects.
Normalising family life

Some of the participants mentioned the adverse consequences of having to go through the lengthy official decision-making procedure in order to obtain permission regarding certain aspects of their lives such as going on a school trip abroad. They would have preferred a less cumbersome procedure.

The need for more support

Some of them insisted upon the potential value of building a healthy relationship with their social worker. Some expressed the need for much more frequent contact with their social worker. The negative consequences of frequent changes in social workers and in SAV supervisors was also underscored.

The important need for more overall support of the foster care placement was most emphatically articulated with regards to what was considered to be the lack of frequent enough visits and contact by the social welfare agency. Some advocated far more frequent and unannounced visits to monitor the needs of the foster care placement.

Some participants spoke about periods of tension leading to a build-up of a crisis that sometimes went unnoticed and unsupported. They wished that there had been more easy access to timely support and preventive interventions that may have saved their placement from breaking down. They also spoke about the stressful periods that both the carers and the children went through prior to breakdown.

They reiterated the need for more frequent home visits and case reviews. Two participants considered that lack of support was partially to blame for their placement breakdown. Another participant spoke of how much she wished her social worker would visit her far more often so that she could discuss her concerns.

There was concern expressed about how the presence of an unprepared and unsupported birth child in the foster family could contribute to a placement breakdown. One of the participants advocated more resources being devoted to address this concern.

Finally, it was also mentioned that more support for aftercare was needed. Some of the older participants said that they wished to feel reassured that they would find the support that they needed until they were prepared for independent living.

However, many of the participants did not request more support. They felt that they were stable and were thriving with the level of support available.

Education

Many of the participants placed a high score on the importance of receiving a good education. Their foster family had provided them with an environment that was conducive towards achieving their
education potential and they were happy that they were scoring high grades in school. However, for some, the school environment was also a source of pain because of the stigma that was associated with children who required alternative care.

**Social stigma and gaps in service provision**

A related aspect of the social stigma that was mentioned in the context of peers, also featured in a different context. A couple of participants mentioned that some potential foster carers might assume that older children are ‘damaged’ or ‘troubled.’ They mentioned that this made potential foster carers reluctant to foster older children. Some participants found this very painful. What they expressed underscored the importance of avoiding any social or media coverage of children in out-of-home care that may single them out as problematic or potentially problematic children. It also highlighted that there was still a gap in the service provision of out-of-home care and aftercare for older children and adolescents. This was making some older children and young persons feel discriminated against.

**The children’s obligations**

The children and young people also spoke about children’s own ‘obligations.’ These featured in both positive and negative manners. The positive referred to the love and gratitude that children should always express towards both their birth and their foster family. On the other hand, they were also critical of those of their peers who stigmatised fostered children because of their status as looked-after children. They highlighted the need for non-discrimination of children by other children.

**The children’s recommendations**

Both the older and the younger participants had very valid contributions to make. Even though the world of some of the younger participants was ‘smaller,’ this did not make their recommendations less sharp and incisive. In fact, all the recommendations that were made were highly relevant and most of them dovetail smoothly with those made by the adult participants. This congruence shall be seen in the following chapters.
CHAPTER 4: THE ADULT STAKEHOLDERS POINT OF VIEW: ADDRESSING THE NEEDS OF A PROFESSIONAL CHILD-CENTRED SERVICE

The responses of the children and young persons in the previous chapter are presented in a manner that is intended to best preserve and capture their meaningful contribution to the research project. Their responses include the emotional aspect that cannot be portrayed without being faithful to some of the fine detail of what they had to say. Thus, the organization of their responses defies a neat classification according to their relevance in line with the main and subsidiary research questions.

This chapter presents the responses to the main and subsidiary research questions that were given by the rest of the interviewed adult stakeholders. As shall be seen below, the relative weighting of attention devoted to the different aspects of the three research questions ‘what factors lead to positive outcomes’, ‘what factors lead to negative outcomes’ and ‘what recommendations would you propose’ varies considerably. Sometimes recommendations were given when the second question was being answered and were therefore not repeated in the section devoted to recommendations. However, there were a few points that were mentioned only and specifically as recommendations and these are listed in the third section.

This chapter presents more direct engagement with policy, law and service frameworks than the previous chapter. This reflects the areas of interest and concern that were most emphasised by the adult respondents who were more knowledgeable about the details of these aspects than the children were. As a result, this chapter complements the previous chapter and broadens the perspective.

The stakeholders represented here all play different, complementary and essential roles in contributing towards the holistic needs and wellbeing of children who experience being brought up in foster care. They include the birth and foster families, the professionals providing the children with social care services and professionals in the field of education, medicine, child law and child development.

4.1 Question One: Factors that contribute to meet the holistic needs of the fostered child.

The particular elements of the positive aspects of foster care that were highlighted by the different stakeholders in the light of this research question were indicative of what the stakeholders themselves considered to be most important outcomes of foster care for the wellbeing of the child. There was general agreement about the benefits of experiencing a loving family that provides basic care, security and safety from harm as well as an opportunity for overall development, emotional warmth, a stimulating environment and overall support and guidance.

This need for such a positive experience spanned the fostering of both older and younger children. The experience of fostering a baby or toddler can be very different from that of fostering adolescents who have been in care since childhood. Below are examples of three complementary cases that span different scenarios and are representative of the respective responses that were received. Direct comparison between them is not possible and can be misleading but an analysis and an evaluation of the facts related to each case can prompt reflection and inform understanding.
Case study 1: Factors leading to the overall positive experience of fostering troubled adolescents

Some foster carers had taken on responsibilities of providing a home to older children in difficult circumstances after their own children had reached adulthood. They had risen to the challenge and had provided much needed and long lasting support. The children that they fostered were very vulnerable. Some of them required specifically dedicated services that are not provided for locally for children with challenging behavior. In fact, the concern of where to place very troubled male or female adolescents who had suffered multiple placement breakdowns was a recurring concern. A male foster carer described the background of the adolescent that his family had fostered:

“She was a girl with a very troubled past and she was a troubled girl herself as well. She had been in institutions since she was 3. …it was not a nice picture. She was 15 going on to 16 at the time and there was this problem of where she was going to go. At first she went to a residence in Valletta but over there all the women were older than her… there she got into a fight with an older woman… and they did not want to keep her over there any more… She could not find a place, she was quite a rebellious person. There was also no possibility of her staying in the residential care where she had been before… Her mother is alive but she could not go with her mother as she was estranged from her mother. Eventually some relative of hers offered to take her in… she was taken in but after a few months it did not work out any more.” (FC1)

During a crisis situation, when the child was refusing to respond to any one, a member of his family was called to intervene. This person had been the adolescent’s social contact while he was growing up in residential care. This led to the family deciding to foster this adolescent:

“… the fostering services got in touch with us through X. And he was very encouraging and helpful. We had this social worker, who was attached to us and who came to speak to us at home and to more or less prepare us for this. We were asked to attend a course, …We found the course helpful because we did not know what we had to deal with. … That is how it started. She came to live with us. The whole episode lasted about a year. When she came home we gave her a room… I gave her my laptop, and she could come and go very much as she wanted, basically. We treated her like one of the family, she had meals with us, we bought her new clothes. When we met with the Advisory Board they complimented her on her appearance, she was smart, in a suit and presented herself well. In the year that she spent with us, we had been helping her with Maths and English to help her get a job. My wife and daughter had managed to get her enrolled in a very good choir project, because she likes to sing and we had sent her for singing lessons.” (FC1)

He described how this adolescent received support from his grown-up married children who accepted her as part of the family. The family included very young grandchildren. Even though the placement broke down under very disappointing conditions, the overall experience proved to be very positive because the adolescent is now on very good terms with her foster family. To this very
day, she appreciates what they do for her, goes to them for the kind of support that she would have required from a parent and has settled into a lifestyle that the foster family admires:

“But it did not work out. It did not work out because she got into contact with her mother. Actually her mother got in touch with her. She has a sort of love/hate relationship with her mother. She resents her mother because her mother never really took an interest in her, just dumped her into an institution from when she was very young. Her father had not been a very good person... He had many children from different women and the girl resented this. But somehow there was this lingering wish to in some way or other bond with her mother.” (FC1)

Two other foster carers (FC8, FC9) described how an adolescent in their care resented certain boundaries and actually created incidents to bring about the termination of a foster placement. They described the adolescent’s resentment of boundaries set by the parent figure who is providing their care and protection. This was considered quite typical of their age group as teenagers in general. Some of the cases of foster care encountered in this study indicated that some of the young persons tended to opt for what they thought would be the least restrictive home environment. This meant that they would try to go back to the birth family where such boundaries are not insisted upon and where they wished to be:

“I believe her mother put pressure on her, one way or another. ...but what she did was that she tried to create an incident, an issue with my daughter, ostensibly it was about staying out late and the kind of places she visited. We were not very happy with these places. She blew it out of proportion and then we discovered that it was intentional. We were very concerned... The girl spent the night out and we did not know where she was, and we were very worried, and the following morning she announced that she was going to leave.” (FC1)

Another foster carer had described similar behavior of an adolescent who ‘forced’ placement breakdowns:

“She is a lovely child after all... em then it started turning sour at our place, because we believe that she, with all her running away and all the stories she told, we believed that she always wanted to be back with her birth mother, and she never believed that she would stay in a home (placement), so she made it for herself, she made it impossible to stay in a home (placement). They had no way (referring to previous placement) how to keep her so they had to kick her out, they had no other way, I do not know... but they had no other choice but to kick her out... a procedure she goes through, she goes towards the limit so that people who actually help and love her reject her. That is what she is after, I think, she just had this rejection all her life.” (FC12)

In every case of a placement breakdown, the foster carers said that they found the situation heart-breaking. There were tears in the eyes of (FC1) as he recalled how the young adolescent had left his family:

“She was sulky and did not speak to anyone, and she bought some plastic bags and packed all her things and I asked her where she was going and she said she
was going with her mother… we drove her with her bundles to near Appoğğ, where she had to meet her mother. She did not say goodbye or speak to anyone. Her mother came in her car, we transferred the bundles of clothes, said bye and that was it. That was the end of our fostering story… I would have preferred her to have told us that she was going back to her mother. But somehow she could not do that; she had to fight with us. She had to give herself an excuse to go.” (FC1)

The particular feature of this placement breakdown regarding the child seeming to “give herself an excuse to go” was reported by other foster carers who had been fostering troubled adolescents who had been in care for long and who had experienced multiple moves in the care system. The cases that the foster carers described suggested symptoms that children in out-of-home care may exhibit after having had “insecure experiences of attachment and care giving” and who consequently “are likely to test the staying power of the majority of carers” (Aldgate et al 2006, p. 54).

However, like the majority of the cases described in the responses, this placement breakdown did not undo the positive bond or the relationship of trust that had been built up. In fact, as a young adult, the adolescent who had been fostered is now once more part of the foster family of (FC1). Foster carers all reported finding it very rewarding when the youths or young adults return to the foster care family that they felt was a secure place where they could find support. In the foster family they had experienced being loved in a consistent manner. One foster carer (FC6) had described how the two very troubled and challenging youths she had fostered for about a year before the placement broke down still call her mummy and send her a mother’s day card. They are young men and still spend special days like birthdays or Christmas with her family. They are still in contact with her because, according to her, they knew that she and her husband were the only persons that they could rely on when they needed support.

In the particular case study, the foster carer described the situation as it was today:

“Since then, (interestingly, yesterday we were having dinner with her) she broke up with her mother because when her mother realised that this was not a viable source of income, (referring to the adolescent not being amenable to prostitution), the mother drove her out of the house. By then she was 18 and she approached us again and we welcomed her as if nothing had happened. In fact today she regards us as her family. She has a daughter now and is in a stable relationship with her partner and they live in a flat in a social housing scheme place. We are back on very good terms with her.

I am very happy because the values we managed to pass on to her in the time she was with us have really impacted her life. Her attachment with us has remained and for instance she gets her daughter to call me grandfather, and my wife is the nanna. …she comes to us for advice, we help her out in many ways.

…This woman has gone through a lot. I admire her because she is a really good mother and her values are excellent. … So even in that short time she spent with us she has picked up good values and I regard her practically as my daughter.” (FC1)
The overall conclusion was a very positive one that shows how long-term the positive effects of fostering can be:

“To conclude I think that the experience left me with the belief that fostering can help. At least for that year we were showing her another dimension to life. She still sees her mother occasionally but she is totally estranged from her. If she needs to go to hospital, my wife will take her. If she needs medical help or to buy some medicines she does not get that support from her mother, she gets it from us.

I think she feels what a deep hurt she had inflicted on us that day. And I think one of the things she appreciates is the way in which we accepted her back. We still make it very clear that she is important to us, still part of the family, but that is our experience. It was painful for us the way she left, because she did not leave when she was 18 but she left under these conditions, but anyway, it’s worked out. …I am very glad that we did it. I will admit that for a while we were a bit angry and a bit bitter, but I consider it as a positive experience.” (FC1)

This foster carer’s profession had included specialised qualifications in child psychology and in child education. The similar case mentioned above also involved professionals who were qualified in a similar way. These latter foster carers (FC8, FC9) described a similar outcome of a placement breakdown over sensible boundaries. The fostered child had then returned to the foster family after the age of 18. In this latter case, the child had been fostered for a longer time and the birth mother had been very supportive of the placement. The foster carers (FC8, FC9) were happy that support with education is still ongoing and the young person has since graduated. These cases can both be considered as successes even though there was a placement breakdown. The success is suggested by the overall positive long-term outcomes of the foster care. However, in both of these cases, the prior characteristics of the foster carers included tertiary level education qualifications in child psychology and in child education. These qualifications may have been additional characteristics that contributed to positive child development. In fact, Aldgate et al (2006) state that children with disorganised patterns of attachment need experienced and qualified caregivers “who are themselves secure in their adult attachments and have living circumstances where children can be given the attention and consistent response they need” (p. 84).

The positive outcomes reported by this and similar responses indicated that it is not uncommon for children who have been fostered and whose placement has broken down to voluntarily reconnect with their former foster carers. In most cases under study the adolescents whose placement had broken down through very challenging behaviour renewed contact with their previous foster carers. When this contact was made, the young person who had been fostered showed emotional ties to the foster carer. They showed that they were deeply appreciative of all the care and love that the foster carer had shown. This suggests that the foster care had been successful in providing them with the safe anchor that would go on yielding positive outcomes in later life.

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42 The 16-year old girl who was being fostered had insisted on spending a few days living abroad with a man who she had only just met a day earlier.
Case study 2. Fostering a baby or a very young child

Many of the foster carers were fostering children who had not lived with their birth families since they were babies. Some of the children were still quite young. A foster carer who had fostered a very young child for a few years gave an account of the rewarding experience that many others in her position had described:

“Had it not been the contribution of my family, the child would not have had the opportunities that we gave her to thrive. The experience has provided us with the opportunity to offer help when the child really needed it. It is something that you live every day 24/7. It is rewarding for the foster carers to see the process wherein the child gradually builds up a trusting relationship with you. This is very beautiful in fostering. You see a child, especially as it was in our case, when it was a very young child so she was vulnerable, you see a child open up and gradually start to build a trusting relationship with you.” (FC2)

In some of the cases, the babies had suffered neglect that had delayed their development. In one case, the child was born suffering from harm that had been induced as a result of substance abuse during pregnancy. One particular child had severe needs that required regular medical attention in order to avoid serious problems. The birth family had not been in a position to attend to his needs and to consistently keep up with the medical appointments. The case study being considered here was one of the cases where the neglect had induced a severe negative effect on the young child that the foster family had been looking after for a few years:

“It is very positive to see the progress in the development of the child in factors where there had been neglect. She had been neglected in all the areas of her life including hygiene, development, stimulation and nutrition. So even with regards to the physical and educational aspects, it is very satisfying and rewarding for us foster carers to see the progress that we can bring about. We provided her with a loving and stimulating family. We read stories to her and play stimulating games and she loves it. She would not have had these opportunities otherwise.” (FC2)

Reference was also made to the benefits of providing a child with a wide and supportive extended family. This extended network was described as supportive and as contributing to the child’s wellbeing.

This foster carer, despite having expressed disapproval about how the birth mother spoke very disparagingly about her during SAVs, still tried to preserve the child’s sense of identity. She expressed how important it was for the child’s health development to form a positive identity that included her relationship with her birth family:

“So we really make sure that we give her the opportunity to form a complete identity. So we talk about her birth family, we talk about her siblings, her parents. …We are open with each other. She already speaks freely about her fostering experience. We prepare her before she speaks to her mother. We empower her. Expectations are not raised. We try to be realistic.” (FC2)
She also had tertiary level education that covered child psychology. She spoke about the importance of helping to nurture emotional intelligence in a child:

“(In order to bring about positive outcomes) relationship is everything and how emotionally intelligent the foster carer is. If you are ready to discuss emotions – emotionally fluent – it is beneficial. They (the fostered children) need someone to teach emotional intelligence in a safe context to be able to verbalise it. She (the fostered child) felt safe to say (what she did not like about her mummy). If I had been negative about her mother she would not have felt comfortable to say this, because she is loyal to them. She loves her. So we can speak freely about the birth parent. Not all foster carers accept that. They (the fostered children) love the birth parents even though they have suffered at their hands. When she comes home from school she uses me as an anchor even though at school she feels distracted.” (FC2)

All the foster carers expressed the deep satisfaction that they felt in having provided a child with the caring and supportive family life that they otherwise would not have had the opportunity to experience. They referred to the severe problems that existed in the birth families, problems that were extremely detrimental to the wellbeing of the child. Some mentioned that they had been instrumental in breaking the cycles of social problems. In this case-study, this aspect was also highlighted by the foster carer:

“Fostering can be a very positive experience for the fostered child. One of the reasons for this positive aspect is that as foster parents we are trying to break the negative cycles in the lives of the families of the children. We manage to do this when we try to ensure that the children will not have the same problems that their birth families have, problems that have been in families over generations. For example, we prepare them to live stable lives which are different from the kind of lives that their parents have had.” (FC2)

What is interesting to note in responses like this is that according to this viewpoint, removing a child from the birth family is seen as the main and sometimes only opportunity for a better future for the child. This was a common response and in general, there were no references to concurrent support services that the birth families could have been receiving to help them to address the problems that they were facing and that had led to the children being taken into care. In fact, with the exception of the approach of an emergency foster carer, the placements were generally spoken about as placements that would last until the child reaches adulthood.

While these responses do point to better outcomes for children who are fostered, they are in themselves an indictment of a system. It is a system that fails children as it does not provide sufficient assistance to their families whose serious needs were sometimes inherited over generations. In fact, two of the foster carers that expressed how rewarding it was to give children the positive family experience that they needed said that the birth mothers themselves had been in residential care. Other foster carers mentioned the lack of maternal commitment of birth mothers with prolonged substance abuse problems and the ongoing detrimental effect on the child that contact with the birth family produced. So while there was general agreement on the benefits of foster care, there was less concurrence on the positive role that the foster carer had in assisting the care services in
their efforts at reunification of the child with the birth family. Assisting reunification could have been more visibly foregrounded given that foster care forms part of the social welfare services.

The role of social welfare services in the case of children who are receiving out-of-home care has been repeatedly articulated by recent European Court of Human Rights (ECtHR) case law that states that the Court (ECtHR) considers that:

“The role of the social welfare authorities was precisely to help persons in a precarious situation find ways of overcoming their difficulties. A care order should normally be regarded as a temporary measure, to be discontinued as soon as circumstances permitted and that any measures implementing temporary care should be consistent with the ultimate aim of reuniting the natural parent and the child… the authorities had failed to make adequate and effective efforts to secure the applicant’s right to live with her child and had thereby breached her right to respect for her private and family life.” (R.M.S. v Spain 28775/12 18.6. 2013 [Section III])

The responses above are not evidence that the social services authorities were not making ‘serious and sustained efforts’ towards addressing the birth family’s possible reunification. However, they did indicate that if this work was being done, it was not high on the foster carers’ agenda. The significance of this will be made clearer when the theme of the children’s contact with birth families is addressed below. We will return to this point after having given an account of responses to the second research question that are related to these concerns.

Case study 3. The role of the birth mother in an adolescent’s life

Related to the above, there was a notable exception to the concurrence over the benefits of foster care. This concerned elements of the extent of the role that foster carers can play in helping to maintain contact between the child and the birth family. While some of the foster carers were ambivalent about the positive role that they could play in this respect, others noted how essential the positive contact with birth family was. They mentioned their role in facilitating this contact as yielding beneficial outcomes for fostered children:

“For the child, this fostering experience really helped her. It did. …the result was worth every hassle… yes, it was worth it… she moved from a home where there was much violence. She was first in a residential home. Then she was looked after by my family. Here she learned to belong. She felt that she belonged to a family where she was loved and cared for. So far, this has been a success story for her. She has passed her exams and is studying at university. Without these supports, she would not have arrived here. She was allowed to be taken out of residential care with the consent of the birth mother. It was good that the mother was involved. The birth mother took the responsibility of the

placement. It was good that there were no hassles about this. Appoţţ was fully supportive of the situation… contact with her birth mother was important. It was important for the child. She needed this especially in the beginning. She thought about things and questioned. The fact that her mother was in her life was very important for her. What also helped her was that she knew that her mother wanted her there (in the foster family) because it was better for her (the child). This helped the child come to terms with her situation. She needed to know that her mother had not just not wanted her.” (FC3)

The child needed to know that the intention of the mother was not to abandon the child, that the mother loved the child and that the mother had placed the child in care for the greater good of the child. The fact that the birth mother believes that the placement is in the best interests of the child is conducive to the emotional stability of the child who does not feel torn between two ‘mother’ figures who are competing for her loyalty. Thus the foster carer does not feel threatened because in almost all the cases under study, the foster carers had formed a strong emotional tie to the fostered child and wished the placement to last. The notable exceptions over the desire for the placement to last was that of emergency foster carers who nevertheless did have strong emotional bonds to the children they had cared for.

This importance of the attitude of the birth family was a recurring theme throughout this case. It mostly indicated that the impact of the birth mother was paramount. In line with this, professionals who work close to the children also mentioned the positive outcomes that result when the attitude of foster carers is amenable to nurturing a healthy bond between the child and the birth family. They mentioned other cases where this was done by foster carers who would include prayers for the birth family at bedtime, buy gifts for the child to give to the birth parents and/or include them in family celebrations or family events held at the child’s school. It is interesting that the singling out of the role of the birth mother was a cross-cutting theme. This was often presented in an exclusive way with the role of the birth mother superseding that of the birth family. To a much lesser degree some might also refer to the role of the birth mother as representing the birth family. From the material of this study it is unclear whether this is: a) mother-child bond, b) cultural, or c) arising out of circumstances – children who are in care might more easily be in contact with the mother.

*Case studies 4 and 5. Foster carers’ ongoing support*

Two different kinds of case studies are grouped together because they both refer to the positive outcomes resulting from support that foster carers go on giving after foster care placements come to an end. One case is about ongoing support that the foster carers give a birth mother after she is reunited with a child that the foster carers had fostered. The other case, which was more commonly encountered, is about the ongoing support that foster carers give to adolescents who have grown out of care or whose placement had been terminated for one reason or another.

Some very positive outcomes were reported regarding the role of foster carers in helping the birth mother address her problems. Sometimes the ongoing support was given equally to a child who had grown out of care and to the birth mother. A kin foster carer had fostered his grandchild. He had also supported the birth mother who was his daughter. He now provided ongoing support to both
granddaughter and daughter. He said that he knew that his daughter would require his support for as long as he lived and worried about what would become of her after he was no longer around. Another foster carer reported how she had built a relationship of trust with the birth mother who was young and vulnerable. The foster carer’s role was seen as one that was actually helping the birth mother to cope with her responsibilities as a parent. The birth mother did not feel threatened by the foster carer and she felt that the foster carer was supporting her. A very positive outcome of this relationship was that in the view of this birth mother, fostering was a welcome and much needed help. It was not viewed as a form of ‘punishment’ inflicted on a birth parent who had somehow failed as a parent. The foster carer who had had other experiences of fostering described her role in one of the cases where she had helped birth parents:

“In one case, we had helped both the child and her mother to start a different life. The mother used to come to us and we helped her to get on her feet again. She even managed to overcome her difficulties with our support and the child was given back to her mother. The child did well with her mother and her mother now has a job and a career and is also graduating this year. She (the fostered child) considers us as an aunt and uncle and the child is very stable. But her mother still feels that we have to remain in her life.” (FC4)

The emotional attachment that the child had formed to the foster carers was being sustained and it proved to be very beneficial for the child. However, even though the emotional and the material support that these care givers were offering were instrumental in helping the family remain united, this support did not automatically have official recognition and support from the social welfare services was needed. However, it was perceived in a very positive manner by individual professionals in the field. This indicates that the role of foster carers in producing good outcomes for children cannot be time-barred. It suggests that aftercare would benefit from having official recognition and from being eligible to ongoing support services. The official recognition could include training and supervision as required at least until the child who had been fostered reaches an age when young persons would normally be in a position to live an independent life. This would be in compliance with the Standard Area Three of the National Standards of Out-of-Home Child Care that were officially launched in Malta in 2009. It would also be compliant with the UN Guidelines for the Alternative Care of Children that state:

“131. Agencies and facilities should have a clear policy and should carry out agreed procedures relating to the planned and unplanned conclusion of their work with children to ensure appropriate aftercare and/or follow-up.” (p.19)

Compliance to the 2009 Standards and to the UN Guidelines would also include recognition of the support given to fostered adolescents once they are no longer in foster care. At the time of this study, such support was very commonly given by foster carers and it was referred to as ‘voluntary’ support. It was no longer officially recognised as a service and there was no reported social services support for this service. However, as stated above, the positive outcomes of foster care are not time-barred. With one notable exception, all the cases that were encountered in this study spoke about long-term support as having been an important and satisfying contribution that was emotionally rewarding to the adolescents and to the foster carers:
“If we had not been ready to work on a voluntary basis to be of support to young persons who have moved out of care, these cases would have ended in a very different way… so we had to help her start an independent life. We found that we could manage to help her to receive benefits; we had found her a flat for her and her baby, and had also secured a subsidy to help her. She was there in her flat but she was afraid of living alone in a village so far away from us. Eventually we managed to find her a flat in our own village because she cannot live without us. She needs our support every day.” (FC5)

Cases like this also raise significant questions about whether the social services devote enough resources to meet the needs of aftercare. This is one of the factors that highlights the need for the implementation of an Out-of-Home National Child Care Policy that seeks compliance with the 2009 National Standards of Out-of-Home Child Care. In 2009 a 10-year strategic plan was officially launched together with the 2009 National Standards for Out-of-Home Child Care. However, this Plan has only been partially implemented.

**Factors contributing towards positive outcomes: the contribution of birth children of foster carers**

When the birth siblings play an active and supportive role in the foster care that their parents provide, the outcomes that were reported were very good. Some of the older birth children had asked their parents to foster a child who they themselves had been supporting when the child was in residential care. All the cases reported indicated that the bond between the siblings was strong and that the foster carers found very helpful support from their birth children. However, all the cases referred to here are ones where the birth children had become young adults and the fostered children were at least six years younger. One of the siblings who is now a young adult reported having been very pleased at the prospect of her parents fostering a 10-year-old girl:

“As a sibling, I was quite excited at the idea of fostering a girl because I am a girl and only have brothers, I enjoyed helping her study, going shopping with her, picking her up in school. I was about 24 years old and when I went to pick her up in school, they used to say to her in school ‘your sister is here’ and she loved it.”

She still has a good relationship with the fostered girl who has since herself become a young adult. She proved to be a good role model for her foster ‘sister’ and has supported her in every way including in her tertiary education.

Another family, whose children were in their 20s when they fostered an adolescent, reported how their individual birth children had supported the foster care placement and contributed in their own unique ways. They also helped with the educational coaching of the fostered girl. Each one of the birth children gave the fostered child individual coaching according to their own area of expertise.

**Factors contributing towards positive outcomes: the birth parents’ views**

The few birth parents who responded to our invitation to give us their views did not have much to
say about what leads to positive outcomes in fostering. However, one of the birth parents related how she had entertained high hopes for her children whom she had voluntarily placed in foster care. The birth mother explained how in the district that she came from, there were some cases of children who had been fostered by good families of high social standing. She had observed that these children were having a good upbringing that included a high quality education. She had envisaged that foster care would give her children much better life chances. She thought that it would be much more than she herself could hope to give to her children under the circumstances that she was in. The mother had explained that she had been in residential care up to the age of 17. She said that when she left care she was poor, vulnerable, had no job and was homeless. She described how she had fallen prey to a man who she thought would give her protection. She lamented that in actual fact, he had coerced her into prostitution and substance abuse. So when her child was born she knew that she was in no position to give him a good home. She did not want him to grow up in residential care because she herself had witnessed children suffering when she was in residential care. She wanted something better for her son.

Foster care seemed to offer the child a prospect for good outcomes. However, the foster family that fostered her son fell far short of her expectations. This foster family subsequently also fostered her daughter. She thought that the foster family was even less suitable than she was to bring up children. However, it took a long time for her to go through rehabilitation and to manage to free herself from the ‘bondage’ imposed by her pimp. By this time, her children had formed strong emotional ties with the foster family and they abused her during access visits. The older child had also mentioned self-harm if she were to be returned to her birth mother. The birth mother was not financially stable and had no real home to offer her children. So she thought that she had no real option but to leave her children in foster care. However, she discussed various points regarding what could lead to good outcomes for children in foster care.

In her opinion, foster carers should:

- give priority to the full development of the child;
- value education and provide children with stimulating, educational toys and activities;
- not give preferential treatment to any of their fostered children if they foster more than one but should treat them all equally;
- not smack children if they misbehave;
- use behaviour management methods that are not harmful to the child;
- not make it very difficult for the birth parents contact sessions to take place but should facilitate contact;
- refrain from abusing the children emotionally by showing excessive emotional distress surrounding the contact sessions;
- realise that exhibiting emotional outbursts of insecurity and grief surrounding contact was not in the best interest of the children because it increased the children’s insecurity.

In fact, she was quite articulate about the potential benefits of foster care as can be seen from the points that she raised. However, she was also critical of the service received by her children that fell far below her expectations.

Some birth parents expressed how very angry they were that their children had been taken away from them. They too expressed what they considered real shortcomings in the foster care that their
children were receiving. They too thought that they could do a better job of the upbringing of their children, had they received the required social welfare support. All those who participated in the research still took an immense interest in their children. However, for different reasons, they felt utterly helpless to change their situation and have the family reintegration that they wished for.

Many professionals and academics perceptively emphasised the importance of the openness of birth parents to foster care. According to them, this openness was one of the key factors that contributed to positive outcomes. If birth parents viewed foster care as a service that was helping them in the upbringing of their children at a time when they required assistance in this, then they would not view foster carers as rivals for their affection. This was viewed as essential if the child was not to be torn between rival loyalties. It also meant that the birth family would not be inclined to pose a physical threat to the safety of the foster carers. This allowed for healthy communication between those involved in the care of the child.

*Factors contributing towards good outcomes: the views of professionals*

To a large extent, professionals concurred on the factors that led to successful foster care and to better outcomes for children. They mentioned all the positive factors mentioned by other stakeholders above. For example, they all agreed that when a child cannot live with the birth family, then giving the child the opportunity to live in another family is beneficial to the child. They also extolled the genuine, altruistic and lasting affection that many foster carers showed and they expressed how this led to good outcomes for children in out-of-home care. Some highlighted the long lasting benefits that result from the formation of an individualised, emotional bond with a foster carer. They reiterated how this bond often lasted beyond the foster care placement. Some mentioned the ongoing support system and mentoring system that some fostered children go on receiving from the foster carers after the placement has come to an end. This was viewed as one of the potential positive outcomes of foster care. They explained how after the age of 18, the adolescents still required to keep contact with the persons who have showed how much they cared for them and to receive their support and help.

All in all, they said that despite insufficient resources, many foster carers did succeed in providing the care that the fostered children required. However, they also pointed out that much depended on the individual approach of the foster carer and the carer’s disposition to cooperate with the other adults involved in the child’s life. The way one professional put it was typical of many responses from professionals working in the field:

“There are many foster carers out there doing an excellent job. There would be no success without them. The system depends on them. They care altruistically for the children in their care and they do their best to honour the child’s need for contact with birth family.

They cooperate with the social workers. They are also an invaluable help in the training of new foster carers. This is because they are sending out the message of what foster care is to new foster carers. Even though the input of social workers is essential in the training of foster carers, yet the input of
experienced foster carers in the training of others can be a very positive factor that contributes to good outcomes.”

Many professionals were of the opinion that, unless contraindicated, contact with birth parents was important for the child even when parents were not committed. One of the reasons given was that children sought out their roots and contact helped them to develop their identity. However, some professionals and academics emphasised that contact should only occur when the child and the birth family are prepared for it. They also highlighted that the type of contact should also be suited to the individual cases. Another factor mentioned in this regard was the facilitating contribution of foster carers regarding contact. This contribution included the involvement of the birth family in the lives of the children whenever this was assessed to be in the best interests of the child. It also included help with the logistics of contact that sometimes made ongoing demands on the foster carers. Positive outcomes were also associated with the support that foster carers gave to help the child through the emotional turmoil that contact sometimes entailed.

There was general agreement that the level of support that foster carers are given is important for good outcomes. The support they referred to includes both support by professionals and financial support. As one professional explained, the financial package that specialised fostering provides has been beneficial:

“The money helps to pay for the extra professional services that the child may need. The State does not provide sufficient services for these children who may need therapy or specialised help. The money that these carers get helps them to give a good service. These people give up their lives, a lot of their time… They would not cope if they were not given the money that they are given in the specialised foster care package. These carers should not be expected to fork out a lot of money from their own pocket to care for these children. That is why the State should take more responsibility.”

It was also indicated that thorough training of foster carers regarding the nature of foster care was one of the other important ingredients that led to successful placements.

However, as shall be seen further on in the study, the available human and financial resources were not adequate to cover the whole foster care service.

4.2 What is not working as well as desired?

The responses of the adult stakeholders regarding what was not working as well as desired tended to focus on certain common themes that were presented both from different and from common perspectives. A number of stakeholders were seriously concerned by the statistics that indicated a recent annual decline in the number of persons willing to become foster carers. They thought that these statistics were also indicative of a system that was not working as well as it could. As there was general agreement regarding the main areas of concern, this highlighted the pressing need to address these areas.

Apart from the overarching concern regarding the shortage of services resulting from unrealistic workloads, the following were the main areas of common concern which will be elaborated further:
1. Tensions and disagreements among the adults providing the service;
2. Intervention at community level that needed to be more timely;
3. Birth parents were not receiving the help and support that they needed to address the problems that led to the child being placed in care;
4. The absence of much needed services such as pre-assessment and crises intervention out-of-home child care and shortage of placements for troubled adolescents;
5. Unsatisfactory Contact and Supervised Access Visits;
6. The need to improve the legal framework.

_**Tensions and disagreements among the adults providing the service**_

The responses of some of the adult stakeholders highlighted perceived shortcomings of some foster carers and professionals. In their view, such shortcomings were hindering good short-term and long-term outcomes.

One perspective implied that some foster carers were not bringing about the desired level of good outcomes for children. One of the main causes given for this concern was that some foster carers did not cooperate enough with all the social services sectors involved in the care of the child and/or they did not fully understand the role of foster care. This perspective was not shared by the foster care team members who generally spoke very favourably of foster carers. The reasons for these misgivings about foster carers varied. There were concerns regarding the compliance of foster carers with the eligibility requirements set out in the law. They included a perceived lack of an in-house psychological assessment of the suitability of the prospective foster carer. This assessment was seen as important because some professionals believed that not all foster carers understood the nature of foster care. This lack of understanding was viewed as one of the causes of suffering on the side of the foster carers themselves, on the side of the birth family and on the side of the children. There were also related doubts raised about whether the initial training of foster carers was thorough and comprehensive enough.

Linked to the concern regarding the mind frame of some foster carers, there was explicit and implicit reference to the way in which some foster carers and professionals tended to conceptualise the nature of fostering as more akin to that of adoption. They explained how they believed that this led to conflicting goals and was impeding the necessary cooperation that was needed in order to meet the children’s needs.

On the other hand, there was also explicit and implicit reference to some professionals in the field who were not viewed as sufficiently supportive of the work that was being done by foster carers. It was claimed that in some cases this lack of support was accompanied by an undervaluation of the work done by foster carers.

The emotional charge of some scenarios of conflicting conceptualisations of the requirements of foster care was described as a factor that was causing tensions, rival undercurrents and friction within the system. Such responses indicate that there was a certain amount of disagreement concerning why the system was not working as well as it could have. These responses also suggested that there were signs of burnout that resulted from frustrations over different viewpoints regarding what was in the best interest of the child. As noted above, these factors also had an adverse effect on the
optimum running of the service.

Some professionals and foster carers feared that some of the more important disagreements among the adults involved in the care of the children were reducing the chances of having a sufficient pool of foster carers.

The case studies below present articulations of the uncertainty expressed by some foster carers.

*Case Studies One and Two: Disagreements between persons formulating the care plan and carers implementing them*

In case study one, the foster carer (FC6) who has fostered many children over the years said that she was reaching breaking point over how little her contribution or her say in the formulation of the care plan of the child counted. She claimed that she was the person who was with the child 24/7 and so she knew the needs of the young child whom she had fostered since the child was a baby. She expressed her frustration:


“If the situation is not going to change, there will be no more foster carers. And I assure you that many remain foster carers because of the children they have fostered. Otherwise they would have given up. And if we tell them to take the children back, we would destroy the children. I cannot say that there are positive aspects that encourage us to remain foster carers. We believed things would get better, I had high hopes about this. Especially so in the beginning when it was rumoured that a new children’s law was being drafted, meetings were held, but all of a sudden everything stopped. And the Board as presently constituted is destroying us. We feel that we are being valued at less than zero.”

The Bill that she was referring to was the Child Protection Act (Out-of-Home Care), 2014 (which is in the form of a Bill before Parliament awaiting second reading). Many other stakeholders were also keen to have the Bill pass through the necessary stages to become law. Like this foster carer, what they valued in this proposed legislation was a better opportunity to further safeguard the rights of the child. In this view, permanent fostering and shared parental responsibility would provide more options to meet the different and individual needs of children. They agreed that the Bill paved the way for making these opportunities a reality. Many of the stakeholders were very critical of a system that, in their opinion, did not adequately respect the right of the child to stability
and security. They were very concerned about children who had been taken into care as babies or toddlers and remained in care indefinitely without being assured of being able to remain in what had become their de facto family. They pointed out how some children needed to know that they would not be separated from those who have become their psychological or de facto parents, those with whom they have formed their primary attachments and who they considered to be their ‘mummies’ and ‘daddies’. Case Study Two concerning foster carer 2 is an example of this as will be seen below.

Foster carer 6 was also very emphatic about her disapproval of the way contact was stipulated. She described her reservations about one of the sittings she attended at the Advisory Board:


“The Chairperson of the Board repeated the same phrase to me for half an hour: ‘the important thing is that the children meet their birth parents.’ She repeated it so many times that I could not take any more. I could not bring myself to respond. That is all she told me. No, I do not attend the sittings of the Board to be told that children should meet their birth parents. I appear before the Board to explain the progress that the child has made and to discuss what is in their best interest. Not what is in the interest of the parents. The birth parents have made their life, they are adults.”

She was implying that such situations concerned an issue of conflicting rights. She viewed the Board’s position as prioritising the right of the birth family to have its family ties protected over the best interests of the child. The reason for this was that, in her opinion, once the fostered child did not want to attend contact visits, then the child’s wishes needed to be taken into account. She described the extremes that the child went through in order not to go and meet her birth mother and how troubled she was for days after attending SAVs. There were other foster carers in a similar position. Case Study Two is a case in point.

Case Study Two concerns another foster carer (FC2) who had also been fostering a young child since she was a baby. She gave an account of an animated Advisory Board sitting. She had explained to the Board how worried and upset she was about what she considered to be serious and disturbing harmful events that had happened to her fostered child during a supervised access visit. She said that she had articulated an anticipation of the danger during the previous Advisory Board sitting. She had implied that if her concerns had been taken seriously, the harm that the child had suffered could have been avoided. This implication resulted in a strong verbal chastisement by the Chairperson. She described what she considered to be a disparaging and distrustful attitude that was adopted by the Board in her regard. She also expressed other worrying concerns:

“You meet these Advisory Board people who take very important decisions
about the child that you are fostering, about once every six to eight months, and they are always, like it is always hurried. … We are 24/7 with this child, and you end up being treated like that! It is not very encouraging. It doesn’t recognise the efforts that you are putting into being a foster carer and trying to do your job well.” (FC2)

Her sentiments echoed the misgivings of foster carer (FC6), but her reservations about the Advisory Board system were more far-reaching:

“There are serious problems … even the way decisions are taken. Whatever we say as foster parents, I feel is completely devalued in a variety of contexts. So, I think there are serious problems in the decision making which goes on at different points of these children’s lives, but even at the end point. Because the Advisory Board decisions are kind of the end point. A social worker might recommend something which the Advisory Board may say no to. But if a decision is taken at Advisory Board level, nobody will say no to that. The Minister usually just rubber stamps the decisions of the Board… You need to have a strong body there at Advisory Board level.”

The views of other foster carers

What the above demonstrates is that in some cases, there was a deep and unresolved disagreement between two very significant areas of contributors to the wellbeing of the child: the Advisory Board responsible for the care plan of the child and the foster carer responsible for the day-to-day implementation of that plan. It is important to note that these cases were the ones that were most critical of the system. Other foster carers did make passing mention of examples where they disagreed with decisions taken by the Advisory Board concerning the child’s care plan. For example, some foster carers felt distressed regarding the Advisory Board’s choice of education pathways for the respective adolescents they were fostering (FC4, FC12, FC15). When their concerns were not taken on board, they considered it a serious matter.

Some other foster carers were not critical of the Advisory Board as such, but were dissatisfied with the system for other reasons. They felt frustrated at a system that did not allow for a speedy and suitably empowered decision-making process. They expressed that this was leaving them in long periods of uncertainty in some areas of the upbringing of their fostered children (FC11, FC14). These concerns regarded serious matters that affected the potential of the child to enjoy the normality of social, family and personal life that the child’s peers enjoyed. The examples that they gave varied. However, they all involved foster carers who had had responsibility for the care of the child for many years and were not granted the opportunity to take certain important decisions that are normally needed to be taken by parents. So where decisions, such as, taking holidays together abroad were concerned, they needed consent from the Minister if the child was under a care order. They opined that this was a pedantic and time-consuming process that went first through the Advisory Board who then had to seek the consent of the Minister. They knew that the Minister would seek the advice of the Advisory Board. They also referred to critical areas such as the choice of religion, where the system was subject to the existing legal parameters (FC11). Here too there
was mention of the need to have a legal structure that allows for more normality in the lives of children who are in the care system for very long or for most of their childhood. They explained the additional hardships that this entailed for the children who were prevented from enjoying a level of normality that came close to that of their peers (FC14). Some had pinned their hopes on the abovementioned proposed Bill that they hoped would presumably address these concerns. The more knowledgeable welcomed the Bill’s inclusion of the option of the court to authorise the person caring for the child to carry out ordinary and extraordinary acts of administration like travelling with the child outside Malta and promoting a religion to the child. On the other hand, some foster carers expressed that they were satisfied with the system and that it was providing what they needed to carry out their work (FC15, FC16, FC17). Foster carer 15 was Gozitan and expressed contentment about the fact that the Advisory Board sittings were also taking place in Gozo. He and his wife were also pleased that contact with the birth family was going well.

Initially they had experienced problems with contact because the child did not wish for contact with her birth mother. However, the foster carers and the social services had worked well together and the child was now actually looking forward to contact with her birth family. Foster Carer 17 expressed warm gratitude for a service that allowed him to look after his granddaughter while his daughter was having problems connected with substance abuse. He considered that the fostering of his granddaughter was helping the whole family to deal with the problems that substance abuse had brought about. He had hopes that the social services go on helping the family in their efforts to help his daughter overcome her substance abuse problem.

**Tensions and disagreements among the adults providing the service**

However, the adult respondents throughout the system acknowledged the tensions that were mentioned above. As stated above, one of the underlying causes cited for this tension was that there were different conceptions of the practical and ideal role of fostering that was generally applicable in the local system. In fact, the schisms ran deep and some of the most significant ones were most active within a context where the child had been in care for a long time. As shall be seen below, the responses also suggested that these tensions arose mainly as a result of some of the most commonly cited worrying areas of the system that included contact and permanency planning. It was also widely believed that these tensions found fertile ground in a system that did not provide for the regular allocation of a social worker to the birth family as soon as the child was taken into care. Nor did the system allocate adequate resources permitting timely work to be carried out with the birth family. They also indicate the need for a system that caters for better systematic and appropriate contact between the child and birth family with a view to reintegration where possible. If this is the case, then as they suggest, addressing these other issues mentioned above is needed if these worrying tensions are to be resolved. Some of these latter issues are addressed separately below.

**Intervention at community level needs to be more timely**

Some of the professionals claimed that in Malta, focused attention was given to a case *at a very late stage* in the development of a crisis. It also meant that the children were not receiving the services
when they could be most effective, that is, when they were still at the stage of fastest development. It was stated that sometimes, when the welfare services did intervene they only took some of the children into care and left the others with their birth family. It was noted that it was still sometimes the case that out-of-home care was found for the younger children and only these were taken into care. The older children and the adolescents might have to be left in the birth family even though they may be the most vulnerable. It was regretted that this was happening because it was still more difficult to find out-of-home care for children older than the age of 9.

The social services also lacked the resources needed to carry out the required work. It was also noted that there was a serious lack of adequate placements. This meant that even younger children were sometimes left in less than ideal home settings for a longer period of time than was considered optimal. Consequently, the difficulties that the birth family had been encountering would have become too huge to make reintegration with birth family likely. Currently, this led to foster placements lasting very long and thus giving rise to expectations of permanency as the general practice in fostering. However this permanency remained fragile in the absence of statutory permanent fostering.

It was also noted that in long drawn out contact with the social services, families could spend a long period in situations that were detrimental to the wellbeing of the child. Thus the family could get the wrong impression that the situation did not seriously require intervention. This sometimes meant that when a care order was eventually issued, birth parents felt wronged. Consequently, they would be more inclined to bitterly oppose the social services and the care given by the foster carer.

**Birth parents are not receiving the help and support that they need to address the problems that led to the child being placed in care**

Many professionals concurred on the seriousness of this major concern that is linked to the above. They pointed out that there are no statutory provisions to ensure that the birth family uses the services of a social worker in order to help address the problems that led to the child being placed in care. In actual practice, what this suggests is that once the child is taken out of the family, there may be no more urgent pressure on the services to address the problems that led to taking the child into care. Professionals opined that at present the birth parent could choose not to accept the services of a social worker when the child was taken into care. They felt the need to have more effective measures to ensure the birth family’s compliance with the advice/recommendations of a family social worker. They pointed out that statutory strength by itself would not however solve the present difficulties. Besides statutory institutional backing, the social workers would also need to have the right approach to engage with the birth parents. The fact that the birth family was not automatically

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44 The reasoning behind the feelings of injustice ran something like this: “The social services have been very familiar with our family situation for a number of years. Nothing has changed over the last years. So why have they taken the children away? If we had been doing anything seriously wrong, they would have taken our children away long ago. We have done nothing to deserve this.”

45 It was noted that as the social services have an unreasonably large workload, they may feel compelled to turn their attention to more pressing cases that involve children who might still be at risk.
assigned a social worker also meant that, in practice, the already overburdened LAC social worker had to monitor the family situation and also liaise with the family in all matters connected with the child’s needs. This dual role led to many difficulties including the social worker at times being perceived as prioritising the rights/needs of birth families. The social service professionals pointed out that this situation placed strains and tensions on the system. They are categorised below into three points:

First, once a child is taken into care the general policy is to maintain contact between the child and the birth family unless this is contraindicated. If the problems of the birth parents are not addressed, then the risk is that the contact with the child will be less beneficial to the child. The foster carers frequently complained about the detrimental effect that unsuitable contact with the birth family could have on the child. They complained that the child was frequently very disturbed for a few days after contact with the birth family.

The unsettling effect that such contact can have on the child was independently corroborated by the response from other professionals such as education professionals who observe this phenomenon in the context of the child’s behaviour at school.

Second, the child’s social worker at LAC is also expected to liaise and be in touch with the birth parents. The LAC social workers already have a large caseload of children in out-of-home care and are thus seriously impeded in their efforts to build the important relationships of trust with the child and with the foster carers. In other words, the LAC social workers do not have the necessary time for regular contact with the child and also for sufficient contact with the foster carer. It was considered vital for the social worker to build a relationship of trust with both the child and the foster carer.

Third, foster carers do not always understand that the LAC social worker represents the interests of the child. Given the broad responsibilities of the LAC social workers, some foster carers believed that the LAC social worker is the social worker of both the child and the birth parent/s. They considered this to be unfair on the child and on the foster carers. They complained that the loyalty of the social worker becomes divided between the child and the birth parents. They thought that it was often the case that the interests of the child could thus become secondary to the interests of the birth parents. In most cases the birth parents did not have their own social worker.

The birth parents themselves, in some cases, articulated how distressed they felt about their social problems that contributed to the prevention of family reunification. One of the fathers explained that he was registered unemployed and had accommodation problems. He could not afford a home that could accommodate his daughter who was fostered. His other daughter was living with him. He expressed how distressed the siblings were at being separated and described how they tried to keep surreptitious online contact with each other.

He also referred to the situation of the mother of the children. The mother used to have addiction problems and had not been allowed contact with their daughters. He said that the mother’s situation had since improved. However, there had been no changes made re contact and he suggested that her situation had not been reassessed. Both he and the mother of his children felt insufficiently supported by the social welfare services. Not only was he not assigned a social worker to monitor and assess his situation, he also found it very difficult to get in touch with the social worker of the daughter who lived with him. He also did not know the name of the social worker of the daughter
who had been placed in foster care. So he had absolutely no contact with her. This also meant that he was not involved in her care plan review.

The siblings were very close in age. However, one was living with him and he could only meet the other during SAVs. He claimed that no one had explained to him why there was this distinction and this was very disturbing to him. He further claimed that he had no explanation for why the siblings were not allowed contact and this led him to believe that the foster carer had prevented the fostered child from meeting any of her siblings or half siblings. Whatever the case, his response suggested that if he had been given adequate support as a birth parent, he would have better understood his situation. As things stood, his distrust of the welfare services was further fuelled by the fact that he did not have a social worker. This also increased the tension and distrust that existed between him and the foster carer who he suspected was fostering his daughter because of the attractive financial package that came with specialised foster care. His attitude was one of total distrust of the welfare service that did not look after the needs of birth families and did not make any serious attempts at the potential family reunification that he believed in.

A young mother who had been in care herself also described a situation regarding a lack of support. She explained how vulnerable and poor she had been when she had first moved out of long-term residential care at the age of 17. She had not been sufficiently supported and had not received aftercare even though she was pregnant soon after moving out of care. She admitted that her subsequent poverty, homelessness and addiction problems had not been seriously addressed. In fact, she had lost hope of family reunification for two main reasons:

- She was still poor and unemployed. Even though she had recently been given social housing after a personal effort at lobbying for assistance, she still did not have the means to furnish the flat in a way that would allow her children to sleep over.
- Her children had now been in care for too long and had bonded with the foster carer who was very hostile towards her. Her hostility was reflected in the attitude of the children who did not want to return to her and who had been openly aggressive with her.

In fact, taking all the responses into consideration, this concern regarding unsupported birth parents is one of the most significant and important. This suggests that there is a very serious lacuna in the social welfare services. Such a lacuna places the State at risk of not being in compliance with the best interests of the child and also of violating the rights of the child, the foster family and the birth family as incorporated in Article 8 of the European Convention on Human Rights (ECHR).

Compliance to the ECHR is understood to mean that there is evidence that the social workers are committed to maintaining ‘regular contact’ with the birth parent (ECHR, B. v. Romania (no 2) 1285/03 Judgment 19.2.2013). Social services are considered to have a ‘positive’ duty to go on monitoring the birth family’s situation and to help to address the problems that led to the children being taken into care. Time and again, over the past decades, the judgments of the ECHR relating to children who have been taken into care have reiterated the fundamental principle underlying the ‘positive’ duty of the social services:

“The positive duty to take measures to facilitate family reunification as soon as reasonably feasible will begin to weigh on the responsible authorities with progressively increasing force as from the commencement of the period of
care, subject always to its being balanced against the duty to consider the best interests of the child.” (ECtHR, Case of K.A. v. Finland Application no. 27751/95 Judgment of 14 January 2003 Final 14/04/2003. See also R. v. Finland A. no 34141/96, ECtHR Judgment 30-5-2006)

The work carried out by the social services in this respect have been scrutinised in the European Court and found wanting if “the administrative authorities’ inaction” can be detected (ECtHR, R.M.S. v. Spain 28775/12 Judgment 18.6.2013 Section III). The importance to adhering to this principle and to doing serious, committed and timely work with birth parents to assist them in addressing their problems is evident from ECtHR assessments such as the following:

“93. On the facts of the case the Court cannot discern any serious and sustained effort on the part of the social welfare authority directed towards facilitating a possible family reunification such as could reasonably be expected for the purposes of Article 8 § 2 during the many years throughout which the boy was in care. The picture transpiring from the facts of the case is one of determination on the part of the local social welfare authority not to consider the reunification of the applicant and his son as a serious option, instead firmly proceeding from a presumption that the boy would be in need of long term public care by substitute carers.” (R. V. Finland, no. 34141/96, Judgment, 30/08/2006)

So the assignment of a social worker to assess, monitor and work with the birth family is crucial to address the child’s need for maintaining and improving the parent/child relationship, both for healthy attachment and for stability. This is because only regular assessments of the situation of the birth family can indicate whether family reunification is a ‘serious option.’ This means that:

“the positive obligations are not confined to ensuring that children can rejoin their parents or have contact with them but also extend to all the preparatory steps to be taken to that end. (see Kosmopoulou v. Grece, no. 60457/00, § 45, 5 February 2004, and Amanalchioai v. Romania, no. 4023/04, § 95, 26 May 2009).” (R.M.S. v. Spain – 28775/12 Judgment 18.6.2013 Section III).

Furthermore, the ECtHR has also decided in a number of cases that each State needs to be equipped with a ‘legal arsenal’ that buttresses the protection of the individual’s rights. To this end, the European Court has reiterated that each Contracting State ‘must equip itself with an adequate and sufficient legal arsenal to ensure compliance with the positive obligations imposed on it under Article 8 of the Convention’ (R.M.S. v. Spain – 28775/12 Judgment 18.6.2013 Section III). The components of the legal arsenal that the ECtHR is insisting upon need to be addressed in comprehensive legal reforms that provide for the necessary requirements of the statutory obligations mentioned above.

As shall be seen below, the concern regarding the need for legal reforms and for more resources committed towards the provision of adequate ongoing assessments, monitoring and support of the birth family is linked to contact and to permanency planning. This suggests that the common concern expressed by the full range of stakeholders in this respect is very valid and justified. It cannot be over-emphasised how much the outcomes of out-of-home care are highly dependent on this crucial element.
The absence of much needed services such as pre-assessment and crises intervention out-of-home child care and shortage of placements for troubled adolescents

Professionals pointed out that, regrettably, there was no crisis intervention centre or pre-assessment centre. Thus, in an emergency there was no time to assess the needs of the child in order to find a suitable placement. Neither was there any time to prepare the child for the move. They explained that the child was generally traumatised by a crisis that necessitated rapid, unplanned intervention. They added that this also meant that there was no time to prepare any other children that may belong to the foster family for the placement. This sometimes resulted in the child being placed in the first placement available and not in the most suitable one for the child. It also meant that sometimes the child needed to be moved but could not be moved because there was no other place available. These issues are highlighted in the case study below.

Cases highlighting lack of placements for adolescents

Foster carer 6 had described how she had wanted to foster a baby because she was childless. However, she had accepted to foster two adolescent boys whose previous placement had broken down and who had no other suitable placement to go to. Their behaviour had proved to be too much for her to cope with and she had asked to have the placement terminated. It was only after some months that the boys were moved. She described the situation that followed:


…L-Advisory Board kien f’Settembru u damu disa’ xur wara mhux sitta, ghax ma hawnx assolutament fejn ipoġġu dawn it-tfal. Kellhom problema enormi, u aktar ma jkunu kbar, akbar il-problema. St. Patrick’s ma kienx hemm post, San Ġużepp ma kienx hemm.


“Finally after more than six months, they moved out of the house. I had informed the social worker that I wanted them out by June 30th, the end of the scholastic term, as I did not wish to remain in the same situation throughout summer.

…The Advisory Board sitting was in September and they were with me for nine months not six because there was nowhere else to place them. They (the social services) had an enormous problem and the older the children were, the bigger the problem. There was no place for them at St. Patrick’s or at St Joseph.
Just imagine, one of them ended up at Suret il-Bniedem Home. He should not have been there as that is a place for adult males. And he was only 16. This is a problem because even at St. Patrick’s they only keep them till they are 16, so it made no sense taking him there. He is still a teenager, unemployed and he cannot afford to live independently. It was a big problem.”

The above case highlighted that at the time there was insufficient suitable provision of out-of-home care for troubled older children. Professionals stated that beyond the age of four or five, it was even very difficult to find placements in foster care. However, it was pointed out that since then, the Specialised Fostering Service had been set up to help to address this issue and the situation has improved.

Another foster carer described how a child she had previously fostered had been placed again with her after a number of placement breakdowns in out-of-home child care and in an adult women’s shelter. However, when the child had been in her care for a short period of time, the situation escalated into a crisis

“That was the moment when my husband said, no, we have to call the police, we cannot do this any longer, and the child had insisted that she wanted to leave our place immediately, so we tried to call 179 emergency number at Appoqg which doesn’t work, which never works. In all times with Appoqg, if you need them you never get anybody. (She had explained that she had lost her cellphone where she had stored the contact number of her foster care unit social worker). It’s a big, big, big drawback for foster parents or for anybody who is involved with children. So the little child had a phone number of her LAC social worker. She called that lady and that lady, I do not know how but somehow she got through to Appoqg, maybe through a private number I do not know, but we got a phone call back from the person who was running 179 that night like at 10pm. He listened to the girl, to her story and he said alright, he was going to work on the case, going to try and find a place for her now but it will be difficult and emmm, well, we didn’t kick her out so for us she could still have stayed but then she wanted to leave, and Appoqg tried to find a solution which just took ages. So after two, I think nearly one and a half hours the police woman and police man stayed with us and they said that now they have to go back to the police station because they might have other calls that night. So, they asked one of us to accompany them to the police station.” (FC12)

This incident had a very traumatising effect on the foster carer who was still evidently very upset and hurt by the whole episode. She had felt helpless without the availability of much-needed assistance:

“What we need is a crisis centre, with psychologists there 24 hours, where the children can go, where we can go, a crisis centre… that should be very important.” (FC12)

Foster carers were highly critical of a system that inappropriately placed some adolescents in adult shelters. They gave worrying accounts of episodes of unrest that some of their fostered children had experienced in adult shelters.
Contact and Supervised Access Visits

Even though SAVs are not the only means of contact, as already indicated, contact with birth families was mainly mentioned in relation to supervised access visits (SAVs). It was widely indicated that, at policy level, the prevailing position was that contact was to be promoted unless it was directly not in the best interests of the child’s welfare. The misgivings about SAVs were high on the agenda of many stakeholders. However, the concerns about the way that SAVs were being conducted stemmed from very different sources.

On the one hand, there were professionals who were working in the field and who appreciated the need for an improvement of the service in order for it to better serve the important purpose which it should be serving in the life of the child. They all highlighted that, where appropriate, the child’s contact time with the birth family should be equipped to offer the following benefits:

- Safe and quality family time for adults and children as required by Article 8 of the ECHR;
- An opportunity for parents to exercise and improve their parenting style under the scrutiny of professionals;
- The healthy development of a child’s identity even when parents are not committed;
- The provision of information to relevant persons that is needed for them to address any trauma/emotional turmoil that the child may experience prior, during or after SAVs;
- The provision of information that is needed to inform the child’s care plan;
- The provision of information that is needed to inform the social service agency about any changes/improvements in the conditions of the birth family is provided;
- Providing a transitional and facilitative stage in the process of family reintegration.

They also agreed on the following points:

- The current practice of using supervisors who were not required to be professionals and who were paid on an hourly basis was unsuitable to provide the abovementioned potential benefits of SAVs;
- Ideally the service would benefit from the employment of a sufficient number of full-time professionals who would facilitate the service by being equipped with the knowledge and skills required to perform all of the above-mentioned objectives of SAVs. These professionals would be in a better position to make optimal use of the time that the children spent with their families;
- The current location for SAVs in the offices at Appoţţ was totally unsuitable. SAVs required a family-style setting that included facilities for quality family time and opportunities for fun or practical activities such as sharing a meal;
- Drivers should be employed so that the child’s safety could be protected. SAV supervisors should not have to drive themselves when they commute with the child to and from SAVs;
- Having drivers would also mean that the supervisor could use the commuting time to communicate with the child.

They did not entertain much hope in seeing the above needs being met as they were conscious of the financial costs that this would entail. However, one professional suggested the following in order to keep costs to the minimum required:
• A split between the qualification requirements of supervisors of court-mandated SAVs in the cases of family breakup and SAVs for children in out-of-home care;
• The employment of a pool of full time social workers to take on supervision of access would mean that the Agency could save on the cost of the current social workers needed to coordinate the SAV service;
• The availability of the out-of-home family-friendly facility to all other SAVs;
• The use of readily available suitable public buildings for SAVs that had outdoor recreational space.

There were some other concerns raised by some of the professionals. They pointed out that some children were torn by feelings of divided loyalty when caught up between loyalty to the foster family and loyalty to the birth family. They also underscored that current practice may be placing too much emphasis on face-to-face contact. They pointed out that there was not enough use of other kinds of contact that may be more beneficial in some cases.

There was a different type of concern that was voiced by only some of the professionals. This related to the position adopted by some foster carers in matters connected to SAVs. They described deep disagreements between some foster carers and professionals who were responsible for formulating the child’s care plan regarding SAVs. Their main concerns were:

• Some foster carers transmit their own emotional anxieties about SAVs onto the children and this may negatively influence the outcomes of SAVs;
• Some foster carers expose their fostered children to their own condescending attitude towards the life-style of birth parents;
• Some foster carers do not cooperate at all regarding the logistics of the meetings;
• Some foster carers do not understand that SAVs are beneficial for the child and they object to SAVs as being harmful for the child;
• Some foster carers object to SAVs on the grounds that they have to deal with the troubled behaviour that children may exhibit for a few days before as well as after SAVs. They also interpret the troubled behavior as an indication of harm and believe that SAVs should be reduced or stopped;
• Some foster carers object to the behavior of birth parents with the children and with the kind of “parenting” that goes on during SAVs which they claim is not beneficial for the child;
• Some foster carers do not understand that the child may be distressed after an SAV because they are having to face painful issues, or because the child is torn between her birth parents and her foster carer;
• Some foster carers jump to conclusions because they would rather not allow the children any contact with birth parents;
• Some foster carers are a bit hostile and their feedback regarding SAVs is negative. The feedback from the social worker regarding the same SAV is often different;
• There was a lack of opportunity for the SAV service staff to form positive relationships with foster carers throughout their journey of service provision. The journey started with the training that the foster carers received.

On the other hand, professionals praised the work of other foster carers. They described foster carers as going out of their way to facilitate contact for the sake of the child even when parents
showed a lack of commitment. They extolled the beneficial effects of foster carers who tried to deal positively with the disturbed behaviour or regression that a child may experience as a result of emotional struggles surrounding contact. They described how, instead of seeking to reduce contact, some did their best to ‘normalise it’ by speaking to the child about their emotions and giving additional support to the child. They also favourably viewed the fact that some foster carers encouraged family involvement in the lives of their children. These foster carers cooperated with the logistics of SAVs and they devoted their time to the service. They mentioned cases when some foster carers also supported the birth family after the child was reintegrated into the birth family.

They explained that all cases were different and such cooperation depended on much more than the disposition of the foster carer and of the birth family. However, the extreme diversity of the cases encountered gives a clear indication of the need to have a service that allows for the close and continuous scrutiny that a case-by-case policy approach requires. It also means that there is a need for enough resources to allow the time for relationships of trust to be formed between the adults who are responsible for the care of the child.

While there was a degree of overlap, foster carers had a different set of concerns about SAVs. Their concerns were also very serious. They suggested that problems surrounding SAVs stemmed from a lack of sufficient services addressing their own needs and also the contact needs of the child and of the birth family. Subsequently they expressed ongoing concern about the manner in which SAVs were detrimentally affecting the wellbeing of the child. Some of the reasons given were:

- Lack of sufficient psychological preparation of the child. The child is sometimes not ready to have contact with the biological parents. Readiness of the child to be in touch with the birth family should remain a paramount principle. However, children are often forced to attend SAVs;
- Lack of readiness of some biological parents to be in touch with the child;
- Lack of sufficient services for the birth parents to help them address issues that might result in harming the child;
- Not used as quality time;
- Lack of professionally trained supervisors who could use the time to enhance parenting skills of the parents and to help to build positive relationships;
- The child was not well supported before, during and after SAVs;
- The foster carer was not provided with the necessary support, guidance or information in order to be in a better position to address the child’s needs;
- The foster carer’s accounts of what happened during SAVs were met with scepticism by the child’s social worker. These accounts were based on what the foster carer learnt about the SAVs from the child;
- No follow-up with child or with birth parent to address issues that might arise;
- The supervisors meet with the birth parents during SAVs and may be afraid of making negative reports about the behaviour of the parents because they fear for their own safety.

Some of the above concerns are evident in the following section.
‘What worries us about SAVs’

Some foster carers spoke at length about what they considered to be the emotional harm to which some children are exposed during SAVs. Foster carer 2 spoke disparagingly of the unsettling effects that some SAV episodes had on her fostered child. The child had formed a deep and stable attachment to her foster family with whom she had lived since she was a toddler:

“The system is abusive in itself and this is, em, it is very concerning for us. Even, for example, if you bring up a concern as a foster carer, for example, about SAVs, that the child during SAVs is still being told ‘Some more time, and you will come back with us. It is I who am your real mother. It is I who loves you’ … And referring to us as people who haven’t given birth to her, when she is just a child. She had come home after an SAV and she said, ‘You are not mummy. My mother told me I cannot call you mummy because not you delivered me... I was never in your tummy…’ When the child had started calling me mummy after about six months of full-time placement with us. And it had come from her. At no point had we said ‘listen, now you can start calling me mummy’.” (FC2)

Foster carer 2 explained how her main concern was that this kind of episode made the child feel very insecure. The child was afraid of not belonging to her foster family. She was afraid of the risk of being moved out of what to her was her family. She reiterated time and again that the child needed to have reassurance that her stability would not be shattered. She explained how episodes like the above had detrimental effects on the emotional security of the child:

“Going in for these SAVs and being told all these things against us, obviously upsets the child and then her behaviour after that will be demonstrating a lot of insecurity. She keeps asking us continuously whether we love her. Even if, for example, we discipline her, she says ‘but will I be able to remain here?’ She thinks that we are going to reject her because she misbehaved, for example. It makes her very insecure, these visits.” (FC2)

The above-mentioned social welfare policy emphasises on contact added grievance to this situation even though, in principle, this foster carer did not oppose all contact. However, she did not agree with the recommendations of the Advisory Board and of the social worker regarding increasing the frequency of the visits:

“At no point am I saying, ‘these visits should stop’. But even, for example, you get these hints like ‘this cannot go on for ever, that she visits once every four weeks, we will have to increase these visits at some point.’ …So it’s like, I would agree that visits should be increased if, for example, the plan is to go back at some point. And I would agree that visits should be increased if they are benefitting her, putting her more at peace, giving her more security, allowing her to embrace both families, for example. Had she been receiving the same messages that she received from us. So we really make sure that we give her the opportunity to form a complete identity. So we talk about her natural family, we talk about her siblings, her parents, em… But if the visits,
the way they are done now in Malta, the people who are supervising the visits are not well trained at all. And the visits are ending up to be traumatic for the child. Then I am not saying they should be stopped completely, she should never see her parents or anything like that. But why go about pushing foster carers, and like, stressing them out saying that the visits have got to increase? Because if the child herself is at no point asking for them to be increased… So it must be enough for her to cope with.” (FC2)

Foster carer 2 also gave some detailed insight into the kind of tensions that could arise during and after SAVs. It is quoted in some detail as it suggests that attention both to more serious matters and to detail is important in matters surrounding contact:

“Even the way SAVs are carried out, they come and pick up the child and they come and drop the child off as if they are dropping off a sack of potatoes. They do not even say, for example, the visit went well. For example, when you take her out of the car or when they ring the bell and you go out to open the door, they can at the very least say ‘it was alright, there were no problems.’ For example, the last SAV session which our child went to, nothing really major, I think, came up. All I get to know is through the child. When she came, she was really upset, crying, hitting us, and it was because, she said ‘my mother shouted at me.’ And I asked ‘Why. What happened?’ and she said ‘Because my hair was well done as you had done it for me and my mother wanted to, kept on and on wanting to undo it and to redo it in the style that she wanted to do it herself. And I did not feel like having her tug at my hair, and I did not let her do it.’ Then she shouted at me and said ‘Oh just go away, you are always the same.’ I am not saying that the mother… or that this is a major sin on the mother’s part, no. There are situations when I behaved like that with the child. I am not going to hide the facts. If you, sort of… no one is a saint. I mean, I am not suggesting that the mother had done something serious. But for the child, it was upsetting. So why wasn’t I told after the SAV ‘listen, this came up and the child was upset’? Why did I have to get to know through the child? And also, let us take this example, for example, that is not extraordinary. If this happens with me, I have all the time, once the child is with me, to make it up and to clarify things with her on an emotional level as well. And I could say, for example ‘Earlier on, I lost my temper. I am sorry. I should not have lost my temper like that.’ I speak to the girl on this level, on this emotional level. Sort of ‘How are you feeling now?’ and she says ‘Oh, it is all right’ or ‘I got offended’ and I say ‘Are you still feeling upset?’ and, sort of, ‘what can we do so that you can feel better?’ The problem is that in the SAV session the mother had very little time to do this and maybe she does not have the skills to do this, to make peace with the child again which, I believe, is the adult’s responsibility. And it is important to provide an opportunity to make peace again and not to sweep things under the carpet or forget about them. Given, the mother I think does not have the skills to do it. But the SAV supervisor should have done it so that the child, coming back to the foster carers, would not have been so upset. She would have felt ‘it is okay with mummy again’… also us
foster carers. Why are we treated like that? Information about what happened in the session is not given to us. How can we be expected to pick up the pieces then and be supportive to the child?” (FC2)

In her view, the service was not giving enough consideration to the child’s best interests. Other foster carers in similar positions had also made this observation. In all cases, the children were young, between 5 and 7 years old. They had also been fostered in the same family for some years since they were babies. These were the foster carers who were most distressed by the children’s resistance to attend SAVs and their disturbed behaviour following the SAV session.

The concerns of a foster carer (FC6) also show her lack of faith in the SAV system. In her view, disproportional consideration was being given to the interest of the birth parents and SAV supervisors were perceived as supporting the birth family’s interest. She said:


Suppost tara lil ommok u tiġi n-nanna u tiġi z-zija, u l-partner tal-mummy…. Nghidulhom, nirrapurtaw, u s-session ta’ wara jerġghu, u dat-tifel/tifla jiġi d-dar imbella. ‘Għax il-friend tal-mummy, in-nanna, il-friend tad-daddy…” Din mhix terapija ta’ ġid ghat-tfal.” (FC6)

“We need to provide better protection for these children in every way and even during SAV sessions. I am sorry to have to say this but the SAV supervisors become friendly with the birth parents. The supervisor is there to see what is happening and what is being said to the child. And the way that SAV reports are made is not satisfactory. Why should we not be informed about what occurred during the visit? We are the ones facing the consequences. Photos are taken, and this goes against the rules. And some people attend when they should not.

The child should be meeting with her mother and she meets her grandmother, her aunt, her mother’s partner… We flag this up but the following session the same thing occurs and the child comes home bewildered ‘Because mummy’s friend, my grandmother, daddy’s friend…” This is not therapeutic for the child.”

Some other foster carers did not mention any issues concerning SAVs. One foster carer said that she felt comfortable with the manner in which SAVs were conducted. In her case, her fostered child was about 11 years old and looked forward mostly to meeting his siblings. Keeping up the sibling bond was important to him and mattered more than meeting with his mother who had abandoned him and hardly ever turned up for SAVs. Her fostered son felt secure in his foster home and did not feel threatened by SAVs.

The responses of birth families introduced yet another angle from which to view contact arrangements. Their concerns were as follows:
• That a father is allowed to bring up one of his daughters in his own home and not even allowed to have any form of contact with his other daughter who is very close in age. It was suspected that the foster carer was preventing contact arrangements. The foster carer did not even approve of the siblings having contact;
• The birth family is not in a position to win over the favour of the child during SAVs because the birth family is too poor to be able to buy nice presents for the child or to provide a luxury home;
• The foster family’s attitude towards the birth family is very negative and this attitude is reflected during SAVs;
• Foster carers play on the feelings of the children to gain advantage over birth parents. This makes the children resent contact and also makes them feel angry at birth parents for hurting their foster carers.

One professional aptly pointed out the irony of the situation. It was ironical that unsupported birth parents associated the social services with the mechanism that took their child away and some foster carers associated the LAC and SAV services with the interests of the birth parents. The latter foster carers viewed the birth family as a threat to the wellbeing of the children that they fostered. All of the above indicates that there was a lack of trust among the adults responsible for the care of the children. This was causing avoidable harm to the children.

The whole raison d’être of fostering was scrutinised by a professional who was not directly involved in service delivery. She raised pertinent questions:

“I think SAVs are only warranted in a tiny number of cases. In fact, how many children benefit and how many parents benefit through visiting with their children or parents in such an artificial setting? Why would you need supervised access? It is because you do not trust the child and the parent in each other’s presence. So what are you doing to improve that arrangement? If you are not helping the parent to respond in a more positive way why do you need contact for only a limited time? Having a third person present is artificial.

People do not talk in the same way. You need to work on the reason why supervision is required. Children are still considered property of the parents so it is considered the parent’s right to have contact with the child rather than the reverse. The Board needs to come away from that point of view. The Board is not there for the parents but for the child. So if it is not a good time to have contact we need to work on the parents’ engagement with the child.” (IND1)

The majority of the respondents pointed to a recognised need of reform of the system that can minimise the hardships that the children go through. One respondent pointed out that benefits were already being reaped from some recent improvements to the system such as in-house training of supervisors. An indication of better outcomes that was mentioned was a reduction in supervisor turnover. We were also informed that a revised set of guidelines was just being drawn up for the sector. It remains to be seen what impact these reforms will have.

However, it can be seen that what is required is more than piecemeal improvements. The full professionalisation of the supervisor workforce is needed. Apart from the benefits already mentioned
above, there are additional benefits of a suitably-qualified professional SAV service:

- Supervisors could utilise the contact time spent to help in the implementation and formulation of a plan to improve parenting skills of the birth family;
- Supervisors can contribute to the implementation and formulation of the child’s care plan that needs to sensitively address the child’s needs surrounding contact;
- Supervisors can contribute to a professional assessment of what additional or specialised support the children, the birth family and the foster carers may need within the context of SAVs.

This also highlighted the potential negative consequences of other lacunae in the fostering system that have an impact on SAVs. Some of these have already been highlighted. For example, one of these is the lack of ongoing birth family statutory support. However, the response relating to SAVs helped to further contextualise recurring concerns. For example, it sheds more light on potential detrimental effects of situations when the difficulties of birth families have lasted for years. They highlight the children’s emotional uncertainty that such situations can induce. Foster carers also gave accounts of how children were harmed when the parent was absent from the life of the child for long intervals and then suddenly reappeared and demanded contact. This absence resulted from various reasons such as mental health reasons, drug use and poor parenting skills. The overall responses suggest that if these issues were addressed in a timely manner and the birth parent were to have the timely professional services that were required, then the quality of the contact could be improved. Some professionals foregrounded the need for more effective permanency planning when work done with the birth family indicated that family reintegration was not advisable.

Professionals also pointed out that more consideration was due regarding what kind of contact was required. In this respect, reference was made to the study by Galea Seychell (2011) which deals specifically with ‘contact’.

This also reveals that some foster carers do not feel adequately supported. It also gives further evidence that foster carers feel that they are undervalued. They worried when their potential contribution to the ongoing assessment of the needs of the child was not given enough weight. They claimed that their contributions were based on their knowledge of the children who were in their care 24/7. Their concerns were corroborated by the professionals’ misgivings about foster carers. These responses cast doubt on an important aspect of the foster care system. It was generally believed by professionals and foster carers alike that foster care should be much more than providing basic care for a child. It is also about connecting with the child and building a relationship of trust. If this is the case, then the views of the foster carers are to be valued as a valid contribution towards assessing the needs of the child. If their views are not given enough weight, then it means that they do not enjoy the trust that should come with their role.

The above also touches deeply on a key concern about the lack of permanency planning that can really meet the holistic developmental needs of the child. This issue was particularly highlighted in the cases of children in long-term placements who found SAVs very emotionally disturbing. The responses indicated that younger children who had been placed with a foster carer and who felt securely attached to what had become their psychological (foster) ‘parent’ needed the reassurance of a secure placement arrangement. This issue is addressed below within the context of the legal framework.
**The need to improve the legal framework**

One of the main reasons given for some of the concerns mentioned above was the lack of an adequate legal structure that can safeguard the interests of the child to enjoy stability and permanency. Professionals were critical of the current practice and legal framework that did not prevent very drawn out periods of uncertainty for the children, the birth parents and the foster carers.

Two professional analysts expressed concerns about misconceptions about the role of fostering as it is defined in the law. This led to false hopes among well-intentioned long-term foster carers regarding the duration of the placement. One of the analysts was very critical of the whole system that allows for long drawn-out foster placements:

“From the child’s point of view, I completely understand that to the child, if the child is 24/7 with someone over a period of years, ostensibly that person is a parent… [and] the foster carers’ views about their role do not necessarily overlap with the way in which the law views them. And this causes lots of problems for the child, long-term. But I also question the advisability of placing a child in foster care for eight years. Because if you need to place a child in foster care for eight years then there is something very wrong with the relationship between the child and the birth family… again I sincerely question why we should have a six-year foster placement. That is the issue and that creates a lot of the confusion for the child. This is not healthy and gives rise to the extra expectations of the carer and the resentment on the part of the parent.” (IND2)

Other respondents were also concerned by the fact that periods of uncertainty often lasted over many years of childhood during which the child could not feel secure in a family. They described how the child was thus left wavering between remaining in the foster family and being returned to the birth family. They expressed the need for legal provisions that ensured time-limited care plans and concurrent plans for permanency.

More stable pathways through care could be realised either through the child’s timely reintegration with the birth family or else through permanent fostering or adoption should reintegration within the birth family not be possible. There was general agreement among professionals that legal measures removing the child ‘permanently’ from the birth family should only be exercised following increased provision of intensive family support and early intervention support for families experiencing difficulties. They concurred that this support should include sufficient resources to provide for strategies for reunification.

The response of one of the foster carers describes in some detail how the current system could harm a long-term fostered child by not meeting the child’s expressed needs for stability:

“So, even if, for example, in our case, for example we say ‘but are we going to keep reviewing this child’s case to see whether she will go back home, like Board sitting after Board sitting?’ Isn’t anyone going to take a decision for this child to have a permanent placement soon and say ‘listen, these parents had many years of social work intervention before the care order was issued, the child had not even been born. X years have passed from when the care order
was issued and we are still at the same place with the same issues. So will we be reviewing this child’s case every six to eight months to see if she is to go back there? Is nobody going to say to this child at some point ‘listen Mary, you will continue to live your childhood with Mr and Mrs X. So, put your mind at rest. That is your place?’ Once again, when the child is giving a clear message that this is where she wants to stay. Because, if you have a child who keeps saying that she wants to go back home, then that is a different story, maybe. You do not necessarily give in to the wish if it is not in his or her interest. But if you have a child who is telling you ‘I want to remain in this placement for the rest of my childhood’, why not put the child’s mind at rest?” (FC 2)

Open adoption was one of the other available options mentioned to address the tensions surrounding long drawn-out periods of uncertainty in out-of-home care. However, it was also mentioned that as adoption was only suitable in a limited number of cases, other permanency options needed to be available. To this end, many respondents considered that one of the most suitable pathways could be the permanent fostering option that is envisaged in the proposed Bill.

**Current Child Law**

Some of the professionals and the two independent professionals who spoke about current child law agreed that The Children and Young Persons (Care Orders) Act required revision as it did not address some important issues relating to the taking of the child into care. All the respondents who made reference to the legal status of children in care emphasised that all children in care – whether under a care order or on a ‘voluntary’ basis – deserve exactly the same legal safeguards. They underscored that the current system places children who are not under a care order at a disadvantage where the provision of services are concerned.

Even though the Foster Care Act was welcomed as a step forward in the regularisation of fostering in Malta, it was considered to be insufficient in some respects. One of the main concerns mentioned was that while the Act covered the administrative and monitoring aspects of the system, it did not sufficiently address the day-to-day process of fostering. Some professionals considered it problematic that the Foster Care Act spoke in general terms about foster care addressing the ‘best interest’ of the child without specifying further what ‘best interest’ entails. One of the professionals pointed out that this could give rise to different and changing interpretations of foster care by different professionals who may not all have the same idea about what foster care should entail. It was emphasised that the State owes more to children taken into care than just what is legally stipulated in the current local child law framework. Two of the academics agreed that the legal obligations of the State towards all children in care needed to be specified in more detail. It was agreed that this could be done by fleshing out the concept of best interest in a manner that can better ensure that the quality of care is not generalised but is related to the specific needs of the individual child.

Another consequence of the current Foster Care Act was highlighted. It was thought that the manner in which the Act was being implemented did not meet the needs of the child regarding important issues such as the matching of the foster carer to the particular child being fostered. The example that was given illustrates this point:
“For example, foster carers from a certain socio-economic class foster a child from a very different environment and send the child to a private school… Here you take a child out of an environment and place the child in such a different one even for a temporary period and you know the child is going to return to an environment that can never give him education in a private school and such expectations are different and sometimes the foster carers do not want the child to return to a former environment which they think is inferior in a socio-economic sense. It places children in an untenable situation. Children need matching.

There is also the issue of having siblings placed in different homes in different areas. That makes it difficult for the siblings to keep contact.” (IND1)

The voice of the child

Two of the independent professionals were very concerned about the lack of adequate legally stipulated avenues that the children currently had to have their voice heard in decisions taken by the Advisory Board regarding their care plan. They pointed out that the recent Child Protection Bill proposes that the taking of a child into care and the subsequent regular reviews are all situated within a court setting. Being a court setting, children would thus have automatic access to legal representation, plus the appointment of a guardian ad litem. Thus the child would have a better opportunity of participation and representation during all proceedings, including appeals.

With regard to the current situation regarding SAVs, this was also found wanting by the above two professionals. It was pointed out that even in this regard the child had no real access to an impartial hearing and no opportunity for an appeal if the child was not in agreement with important decisions that were taken regarding the care plan. The whole decision-making chain was elaborated upon in order to point out that, as it stood, it was in violation of a child’s basic rights.

“So if a child did not want to attend SAVs, the child’s views were heard by the Advisory Board. The Board is constituted to advise the Minister who is responsible for the child. So the child should be able to have direct access to the Minister, who is his ‘parent’, but the child has to go through the Board to get to the Minister. And the Board takes it upon itself to decide for the child what is in the best interest of that child… What gives them the right to decide what the child is saying is not in his best interest so it does not get to the Minister? Although if it did get to the Minister, who would he rely on? The Advisory Board to give him advice. The Board listens to the child and makes a decision in the best interests of the child and there is no way of appealing the decision or contesting the decision. The new Bill as it is currently before Parliament is that the default position should be that children should have the right to legal advice, a child advocate and a guardian ad litem who should automatically be appointed. If the child chooses not to exercise the right to have a child advocate no problem, but the guardian ad litem must then confer with the child’s advocate on the child’s behalf. So there is a complete avenue for the child to speak to a decision-maker and if the child does not like
what the decision-maker is deciding, the child can also appeal because that is what courts are about. This is a system which we do not have. The system has been criticised by the ECtHR who looked at the decision of MD vs Malta and criticised the fact that there is no appeal mechanism. The MD case is about it being an administrative set-up.” (IND2)

They agreed that the present Advisory Board should be replaced and that there should be a proper review system, scrutinising decisions related to children. It was cited as a matter of serious concern that the key bodies related to the scrutiny of care such as the Advisory Board and the Central Authority were all part of the same Ministry. The concern related to a potential lack of transparency and it was suggested that more impartiality could be assured if the bodies that were meant to be scrutinising the policies did not fall under the same Ministry. It was suggested that it would benefit the child more to have a regulatory body that was not answerable to the same Ministry.

They voiced a concern about the need for the child to have a correct concept of the implications of being fostered. They pointed out how this could have an impact on how the child felt both in the short and long term. This concern suggests that it is not clear from the present legislation who bears the ultimate responsibility to explain to the child the implications surrounding the placing of a child in care. They pointed out that if this concern is not addressed, then it will remain difficult to see how the child’s meaningful participation in matters concerning the child could be ensured.

**Shared parenting**

Shared parenting was one of the concepts that was mentioned by some professionals as being a welcome addition to the repertoire of avenues open to meet the individual and particular needs of some children. Its potential benefits for all the main actors concerned in foster care were extolled:

“The concept of shared parenting makes sense legally and makes sense in practice as well. Legally we do not have a system of shared parenting in Malta. It is one of the proposals in the new Bill. This is not about substituting parenting; it is about sharing out parental responsibility… and we don’t sell foster care as sharing at all. It is someone taking over, not helping out. The Law is partly to blame because of the concept of only a parent being able to carry out parental authority, but it really should be different by saying that we all have a stake in exercising that responsibility. The teacher in school, to an extent, has a responsibility for the child in her care which is not parental responsibility but it is helping out the parent because it is contributing towards the child’s wellbeing. And I personally see the foster carer as helping in exercising this parental responsibility. And this notion of shared parenting is suggested within the Bill. Because I think the new mindset needs to be brought in. It would help foster care be more palatable, not just foster care, even residential care, anyone taking the care of children has a joint responsibility.” (IND2)

A further potential benefit of introducing this other avenue within the care system was that it would go further in meeting the very different needs of the individual child. Linked to this need for a
variety of avenues was an insistence on the need to stop thinking of children as a homogenous group but to think instead of the particular, individual child. This avenue would also be welcome for its potential far-reaching benefits for some cases. If more birth parents were to think of fostering as a form of assistance to raise their children, it could help counterbalance the negative idea that birth parents may have of fostering as a ‘punishment’ that was inflicted on them.

Specialised foster care for children in conflict with the law

A suggestion was made regarding the introduction of specialised foster care in the case of children in conflict with the law. It was pointed out that this system works very well abroad, with very good outcomes for children who stand to benefit from a one-to-one relationship that provides individualised attention. It was emphasised that this could provide a better pathway to the social reintegration of the child than either prison or Mount Carmel. This system could offer a personalised second chance to children in conflict with the law.

Migrant children

Some professionals stated that one other area where the system in Malta needed improvement was that concerning migrant children. They regretted that the formalisation and development of social work services that was rapidly taking place, was omitting a small, but steadily growing and increasingly vulnerable population of migrants. Most of these migrants were either asylum seekers who have been granted protection or asylum seekers who failed their asylum application, but were not in detention. Attention was drawn to anecdotal accounts of children of these migrants who are fostered informally. This type of fostering went unmonitored even though there was anecdotal evidence that both the Agency for the Welfare of Asylum Seekers (AWAS) and Appoğğ were aware that this type of informal fostering was going on in Malta. Certain organisations working with these migrants such as the Jesuit Refugee Service Malta, the United Nations High Commissioner for Refugees and the International Organisation of Migration have evidence of these practices.

One of the concerns is that not enough is known officially about the informal ‘fostering’ of the children of migrant families. It appears that the social services only get involved in some cases such as when the migrant birth parent(s) could not manage to take their children back when they were ready for family re-integration. These cases often surfaced with migrants who qualify for refugee resettlement to another country.

The system was thus criticised for not offering the same protection and scrutiny to the fostering of migrant children as it does to children of Maltese nationality. The professionals were shocked at the possibility of this practice. The response of one respondent expressed the gravity of such a situation:

“We monitor foster carers to see whether they are fit persons to foster. Why don’t we apply the same principles to migrant children? It is very worrying that the child is living with a family that may not necessarily provide a home that can provide care for this particular child and that there is no care plan for the child. And I am not sure the foster carers are trained for cultural sensitivity
where fostering migrant children is concerned. They also need training to respond to the trauma they have been through. And that can have serious ripple effects on the foster carers themselves.” (A2)

There was agreement among our interviewees that fostering arrangements should not negatively affect migrant families and children. They also pointed out a hitherto untapped avenue, which is that there could be an availability of refugee families who wish to become foster carers. Our interviewees pointed out many innovative ways of providing fostering services to migrant children. The main issues mentioned were:

- The ambiguous roles of AWAS and Appoğg in providing the necessary care for migrant children. Although AWAS is responsible for accommodation of refugee and some migrant groups, it is not a welfare organisation like Appoğg;
- The importance of regularisation of informal fostering to contain abuse;
- Unfortunately, informal fostering is taking the place of childcare. The biggest need there is among refugee families is that of childcare and this is not being met. As a result, migrant families, out of desperation, end up in informal fostering arrangements and children unnecessarily separated from their birth family;
- The availability of foster care for migrant children. It was questioned whether migrant families are aware of the foster care service. Such a service is required in some cases such as that of mental health problems;
- The specific needs of unaccompanied minors. Fostering would also be a desirable option for some unaccompanied migrant minors. Unaccompanied migrant minors are currently placed in a specialised children’s home for unaccompanied minors, or sometimes pending a placement they are accommodated in one of the migrant open centres. The following points were mentioned:
  - Their care plan should look into possible fostering or even adoptive arrangements;
  - There should be a financial incentive to support foster carers beyond the age of 18 years (at least until 21 years);
  - Just as with other children with specialised needs, given the additional difficulties there should be incentives to encourage, specifically, the fostering of migrant children;
  - This group forms part of a larger ‘children in need’ group and this should be made clear in the public discourse.

- The issues brought about by refugee resettlement. The process for refugee resettlement generally takes around two years in total. It includes interviews first with UNHCR, then with IOM and then usually with the U.S. being the resettlement country (which also includes their own security check):
  - The migrants are interviewed together as a family, and it is assumed by the authorities in charge that the parents have the custody of the child even if the child has been fostered for many years;
  - Other informal carers – meaningful carers – are also contacted by phone. UNHCR staff explain resettlement to the informal carers. They do not assume that the migrant parents will have explained the details. UNHCR staff ask the informal carers for comments and information about the relationship. The aim of this contact is to
establish what kind of a relationship there has been with the children and whether anything triggers suspicion of something that could affect the children;
- UNHCR use the BID or BIA assessment – that is, the ‘best interests determination’ or ‘best interests assessment’ when taking any decisions on refugee resettlement which involve children;
- The onus of responsibility is on the parents to break the news to the children and prepare them for resettlement.

4.3 Other recommendations

Apart from the recommendations that were mentioned above when addressing the previous research questions, there were a few other specific recommendations that did not fall directly under the above areas of discussion. They are listed here:

- Better and more specialised training of social workers;
- Accredited training of foster carers (both at admission and ongoing professional development);
- Immediate assistance to be easily accessible and available before and during time of crisis;
- The availability of more psychological services;
- A more humane manner of taking children into care in emergencies;
- Better general and financial support of foster carers;
- A major reduction in the caseload of LAC social workers;
- Addressing factors that lead to the frequent changes in the child’s social worker;
- The granting of the same family-friendly financial packages, tax rebates and employment benefits to foster carers as that available for birth and adoptive parents;
- After-care services available for fostered children and for foster carers.

4.4 Concluding remarks

The overall picture that emerges is one of complex stories of the different valid contributions made by each individual adult involved in the care of the children. The foster carers interviewed displayed love and generosity. Their responses suggested that they had a valid and important contribution to make where improvements of the system were concerned. Those who were fostering children at the time of the interviews were keen to contribute towards the short-term and the long-term best interests of the children. All but one of the foster carers whose fostered children had either grown out of care or whose placements had broken down were still taking an active part in the wellbeing of the adolescents they had fostered. Some described how the fostered children who grew out of the care system still required the support of their foster carers until they felt that they could live independently. They described how the adolescents also appreciated the support system that young adults need when they too start to have families of their own. With regards to placement breakdowns, the foster carers recounted how they welcomed the young persons back into the family when they returned for the love, the security, the understanding and the support that they had enjoyed in their foster family.

The birth families felt unsupported within the welfare system. They did not entertain much hope at achieving the family reintegration that they longed for. Their responses corroborated the call
for more services to support birth families that was frequently articulated by a wide range of stakeholders. There was general agreement that ultimately it was the children who suffered as a result of this underdeveloped area of service. This also had negative repercussions on the quality of SAVs that were not considered to be as professional as almost all stakeholders, including SAV supervisors themselves, wished them to be.

The social workers, as well as the other welfare agency professionals, displayed a high level of professionalism and commitment amid high caseloads and risk of burnout. They displayed a professional and sensitive grasp of the essentials of the situations. However, they were also conscious of the fact that their workload did not allow them to carry out their work as they knew that it needed to be done. Together with other professionals in the field, they were articulate in mentioning what further resources, structures and legal provisions were badly needed in order to provide a better service. A common concern that was shared by the wider field of stakeholders was the need for more collaboration between stakeholders that mattered in the lives of the children and the social services.

To a certain extent, the picture that emerges is also fragmented. This is because the different perspectives emerge from stakeholders who are viewing the landscape from their ‘niche’ point of view. The findings suggest that divergent viewpoints could be impeding the service from making better use of the limited resources available. However, the overall agreement was far more significant than these differences. It calls for a substantial reassessment of the current legal, structural, and human resources available for the sector with a view to increase and improve upon what is currently available.
CHAPTER 5: OVERALL CONCLUSIONS

An important contribution of this study is that it has given central attention to the voice of children and young persons who are experiencing or have experienced foster care in Malta. This study has also been concerned with the views of a spectrum of adult stakeholders. In this chapter, we are not summarising what the respondents have said. As the essence of their contribution is in the detail, no summary can do justice to the contribution made by respondents. However, taken as a whole, the responses suggest that in general, even though many children are receiving a good and loving upbringing in foster care, there is no room for complacency about service provision. The responses suggest that there is so much more that, as a nation, we should be doing for children in our care who are “entitled to special protection and assistance provided by the State” (UNCRC, Art 20 §1).

The empirical findings have indicated where Malta could and should be doing better within the system of foster care. There is a remarkable consistency between what the respondents’ contributions suggest, what the Guidelines suggest and what the Committee specifically recommends regarding areas of concern in its 2013 concluding observations on Malta’s Second Periodic Report. Put together, these separate sources of recommendations could serve as an impetus to push forward with the required legislative, administrative and policy improvements.

Family environment and alternative care

The fundamental right of the child to family life and to good alternative care is clearly stated in the UNCRC. Within this context, the State has the duty to support the children’s birth families, their foster carers, their social workers and the relevant agencies. In fact, one of the specific purposes of the Guidelines is to ‘set out desirable orientations for policy and practice’ that, inter alia, seek to “support efforts to keep children in, or return them to, the care of their family or, failing this, to find another appropriate and permanent solution…” (2a).

(A) Birth families

The Guidelines stress the importance of directing efforts at support services for families. With reference to family environment in general, in its 2013 Concluding Recommendations the Committee stated that “support services for families are still insufficient” (par 43). It this respect, the Committee recommends that Malta “intensify its efforts to render appropriate assistance to parents and legal guardians in the performance of their child-rearing responsibilities with timely responses at the local level…” (par 44).

The child and adult respondents were in general agreement with this requirement and with the related requirement of ongoing support for birth families once the child had been placed in care. They also highlighted the adverse consequences of the lack of timely monitoring and of adequate support of the children’s birth parents while the children were in care. One of the factors that was mentioned and that could help the situation was the statutory appointment of a social worker to the
birth family when the child was placed in care as is proposed in the 2014 Child Protection Bill.\footnote{Child Protection Act (Out of Home Care) 2014. One respondent also underscored other potential benefits included in this Bill with regards to birth families of children who may be at risk. These were the inclusion of the possibility of treatment orders and the possibility of removal orders. These statutory provisions were considered to be in the best interests of the child.} This concern was seen as one of the crucial and far-reaching shortcomings of the service provided to children in care. The responses suggested that the suffering that this caused the children was evident in many ways.

Stakeholders who also desired to see more preventive work with at-risk families suggested ‘timely responses’ to at-risk families. Policy makers stressed that timely intervention and support was crucial for two main reasons among others. One reason was that the later the intervention and support, the more the problems were allowed to escalate. The other reason given was that the longer the children lived in families with severe problems, the more difficult it became to address their needs. The children may also have missed out on receiving appropriate care at the time when they were developing most rapidly. Thus their development may be very adversely affected. Late intervention also made it more difficult to find a suitable and potentially long-term placement should this be required.

Monitoring and supporting the birth family when the child was taken into care was also generally considered an essential element in permanency planning. It was underscored that permanency planning was as essential to the short-term as well as to the long-term wellbeing of the child. This concern was in line with the requirements of Article 20 of the UNCRC. Article 20 stipulates the requirements regarding the alternative care that the State is obliged to provide children deprived of their family environment. Among these, it includes that “when considering solutions, due regard shall be paid to the desirability of continuity in a child’s upbringing”. (UNCRC 20 §3)\footnote{Professionals pointed out that the manner in which individual children’s needs for permanency should be addressed will vary according to many factors. These different factors and circumstances include, inter alia, the children’s age, the age at which they have been taken into care, the length of time they have been in a foster family and the emotional ties that they have built both with their birth family and/or their foster family.} This aspect is further fleshed out in the Guidelines:

“to support the child and the family for his/her possible return to the family, his/her situation should be assessed by a duly designated individual or team with access to multidisciplinary advice, in consultation with the different actors involved (the child, the family, the alternative caregiver), so as to decide whether the reintegration of the child in the family is possible and in the best interests of the child, which steps this would involve and under whose supervision” (Par 48).

Respondents noted that it may be the case that when a child has been in a foster family since infancy and for a number of years, reintegration with the birth family may not be in the best interests of a child. It was stated that this was particularly the case either when the problems of the birth family had not been resolved in a timely manner and/or when meaningful contact with the birth family
had not been regular and well managed. A case of two fostered children was mentioned by their birth family. The birth family members expressed that they knew that their children had formed such a strong family bond with the foster family that the children had emphatically expressed that they did not want to be reintegrated with the birth family. The children had been separated from their birth family at birth and the birth family members claimed that they had not received enough support to overcome their social and addiction problems. Some service providers also expressed concern about how far some cases of family reintegration were in the best interests of the child. The ECtHR has reiterated that after a “considerable” period of time has elapsed since a child has been in out-of-home care, the best interests of children may be not to be taken away from their de facto family (see K.A. v. Finland, no. 27751/95 § 138, January 2003). The ECtHR has repeatedly stated that in some cases, this consideration may override the family reunification rights of birth parents. However, in circumstances similar to the K.A. v Finland judgment cited above, the court may still conclude that the birth parents’ rights under Article 8 of the Convention have been violated. In the latter case, the parents’ rights were found to be violated as a result of the authorities’ failure to take sufficient steps towards a possible reunification of the applicants’ family. The ECtHR scrutinised how much the social services had foreseen physical reunification of the family and what measures aimed at such reunification had carried out by the Finnish social services. Consequently, The Grand Chamber, like the Chamber, “found a violation of Article 8 by reason of the failure of the Finnish child welfare authorities to pay sufficient heed to the possible reunification of the applicants’ family when implementing the care measures” (ibid. par 204).

The Guidelines state that options to reintegrate children in their birth families should be ‘a key part of a care review process’ (ibid. p. 15). Among the guidelines provided regarding what national policy should include in this respect, the Guidelines also specify that policy should “ensure that the decision to reunify a child with his/her family leads to a planned and gradual process during which the family is provided with relevant support?” (ibid.).

Some respondents believed that the proposed 2014 Child Protection Bill would provide an improved legislative framework that also gave more statutory strength to timely and intensive interventions that could facilitate family reintegration where possible and advisable. It could also help in the concurrent planning of long-term alternative care that would be necessary if family reintegration was not advisable or possible. In this respect, it was suggested that permanent fostering and open adoption could provide the child who cannot return to the birth family with the stability that the child’s wellbeing required.

More support and monitoring of the family was also considered to be one of the provisions necessary for the improvement of a child’s contact visits with the birth family. In addition, it was also generally considered that a much more adequately resourced monitoring and support of supervised access visits was necessary. In fact, for various reasons, the current system and conceptualisation of contact with birth family was found wanting by both the adults and the children. The older children appreciated contact with and knowledge of the birth family even though this knowledge

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40 Here again, the appointment of a social worker for the birth family, treatment orders and removal orders were considered as important legal provisions that were provided for in the 2014 Child Protection Bill.
or contact could be disturbing. It was strongly indicated by both the child and the adult respondents that a more robust support system was required in this area of service.

They also agreed that more human and financial resources were needed to provide professional services to help and support the child, the birth parent and the foster carer to adequately address issues related to contact visits.

In this regard the adult respondents suggested that professional, fulltime supervisors should supervise the service. In order to allow the children to have the opportunity of quality family time with their birth families, it was also considered essential that SAVs were conducted in a suitable and family-friendly environment. All the respondents who referred to the importance of the right venue were in agreement about this point including those respondents who were carrying out the SAVs.

Furthermore, professionals underscored the importance of determining the type of contact according to the best interests of each individual child. In this respect, it was pointed out that this could vary with the individual child’s changing needs over time. This suggests that regular and well-informed reviews of the children’s contact needs are required. It also underscores the importance of the consideration of the particular purpose of SAVs in the context of the individual child’s best interests. The data also draws attention to the difficulties of addressing the multiple and complex emotional needs of children, birth parents and foster carers in the context of SAVs. It underscores the need to have a well-resourced service that is equipped to provide a professional service that can support contact between children in care and their families when this contact is in their best interest.

(B) Foster Carers

The Committee called upon Malta to ‘further strengthen its national system for foster care and ensure the provision of adequate funding and support for foster families’ (2013, 46c). The children and young persons interviewed indicated that they appreciated the key contribution that foster care can provide in their lives. In fact, some children called for an increase in the supply of foster carers who would be willing to foster older children. However, some of the children also emphasised the importance of increasing the support for foster carers. They explained that this support was necessary for the foster carers to enable them to be in a better position to provide the children with the support that they required. Those providing the service agreed that more resources were needed to meet the needs of the service. However, the data indicated that the service was doing its best with the resources provided. Monthly support group meetings for foster carers and for children were provided by the welfare services. Ongoing training was provided and training conferences were organised on relevant subjects such as attachment, contact and child behaviour. Psychological services, family therapy and the services of a paediatrician were available. Nevertheless, the responses of the children and of the adults also indicated that these services were not sufficient to cover the full range of needs of the children within the different age groups. They recommended that the foster carers should be provided with the necessary human and financial resources required to adequately care for and support the children.

It was a matter of concern that the full demand for foster care was not being met despite the regular recruitment campaigns. A holistic approach to this concern was suggested. This included a more comprehensive legislative framework that addressed the current lacunae with regards to
the professional services provided by foster carers, support for the birth and the foster families and more provisions for permanency planning. It was also suggested that there should be a more generous package of incentives that can attract and keep quality foster carers. The overall response recommended that every effort should be made to ensure that foster care remains a positive and therapeutic experience that all those children who require it can benefit from.

(C) Increasing the resources of the welfare agencies

The Committee stated that Malta should ‘Provide all the necessary human, technical and financial resources required for improving the situation of children in alternative care placements’ (CRC, 2013, 5e). It also stated that in so doing, Malta should take ‘into full account the Guidelines for the Alternative Care of Children’ (CRC, 2013, 5f). The functioning of the whole system of alternative care is reliant on a well-functioning welfare agency. As stated above, it was evident that those working in the social welfare system were doing their best with the resources that they were provided with. However, both the children and the adults agreed that the inadequate amount of support that the children could receive from the welfare agency, given the resources, was one of the key areas of concern. Some children described how they felt abandoned by the welfare service at periods of their lives when they badly needed support. Their responses were consistent with that of key professionals who indicated that the social care agency service providers were over-burdened with large caseloads. The professionals also regretted how, in some cases, the multiple roles that they were carrying out were preventing them from achieving their optimal level of service. In fact this concern was in line with some of the children’s expressed wish to establish a better relationship with their social workers. This situation was one of the matters of concern that was addressed by the Committee. With reference to children deprived of a family environment, the Committee called upon Malta to “increase the number of social workers to ensure that the individual needs of each child can be effectively addressed” (CRC, 2013, 46b).

The responses suggested that while the younger children’s needs for services were generally catered for, there were not enough resources to address the requirements of older children in the case of intensified need. It was mainly at those critical moments when the children most needed the timely services of specialised professionals or of specialised services that the system was lacking resources. In this respect, the responses indicated that more resources were required in order to provide individual and round-the-clock support. This included the need for a crisis intervention centre and of out-of-home child care provision for troubled adolescents whose placements have broken down. In the latter cases, there were various references to some of the adolescents having

49 Policy makers, members of NGOs and professionals recommended that more consideration should be given to introduce more family-friendly measures for foster carers in line with the needs of persons who are caring for children on a day-to-day basis. They suggested that foster carers should be eligible to benefit from the same family-friendly measures as parents with regards to, for example, employment conditions. They also suggested that foster carers should be eligible to benefit from the free childcare services for their fostered children even if the foster carer is not in employment. Further suggestions included that foster carers should also be eligible for relevant fiscal benefits and could be further incentivised by tax rebates.
to be placed in adult shelters when no alternative placements were available. This latter point was not picked up by the Committee that expressed concern that “the availability of alternatives to institutional care remains insufficient, with continuing placements of children in institutions, which are not in the best interests of the child, due to insufficient foster-care capacity” (ibid, 45). Had the Committee been aware of adolescents sometimes being placed temporarily in adult shelters it is not unreasonable to assume that it would have additionally expressed concern at this situation.

The above indicated an awareness of the threats to the child’s development that arise from the shortcomings of the system. Furthermore, the view was expressed that social workers, paediatricians, psychologists, family therapists, frontline care givers, pedagogues and other professionals all had an important role to play in the constant assessment of the child’s needs. It was also noted that an ongoing assessment and monitoring of a comprehensive care plan should be overseen by a competent statutory body.

The data also highlighted the need for the provision of services and support for adolescents who have grown out of care but who have not yet reached an age when they are ready for independent living. Many of the fostered adolescents who had grown out of care had either continued to receive the care and support of their foster family or had returned to the foster family if the placement had previously broken down. There was general agreement that children require support in their transition to independent living. The Guidelines specify that:

“Principles in the present Guidelines are also applicable, as appropriate, to young persons already in alternative care and who need continuing care or support for a transitional period after reaching the age of majority under applicable law” (Par. 27).

The Maltese 2009 National Standards for Out-of-Home Child Care also dedicate a full section to this period of development of young adults.50 However, for the 2009 standards to be fully implemented, the necessary budgetary, legal and policy measures need to be in place.

The voice of the child

Article 12 (1) of the UNCRC provides that “States Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child…” Furthermore, it also provides that “the child shall in particular be provided the opportunity to be heard in any judicial and administrative proceedings affecting the child, either directly, or through a representative or an appropriate body…” (ibid, Par 2). This fundamental right of the child to be heard and taken seriously constitutes one of the cornerstones of the UNCRC. In fact the CRC has stated that the provisions of Article 12 constitute one of the four general principles underlying the Convention.51 Article 3 contains another of the four general principles. It provides that the best

50 The 2009 Standards cover the following three standard areas: Standard Area 1: Decision-making and admission process Standard Area 2: Care-taking process Standard Area 3: Leaving-care process.
51 The other three underling principles are the right to life and development (Art 6), the right to non-discrimination (Art 2) and the primary consideration of the child’s best interests (Art 3).
interests of the child should be the primary consideration in decisions that may affect the child. When considered together, these Articles provide for a decision-making process that empowers the child to make his/her views meaningfully heard when consideration of the child’s best interests is concerned. However, some children expressed that they felt disempowered in a complex system that did not allow them a voice; they did not feel that their views and their real needs were taken enough into consideration in important decisions concerning their lives including decisions taken by the Advisory Board. Some also complained about the long periods of waiting for decisions to be taken regarding matters that were of concern to them. This indicated that, with regards to the views of the child and the best interests of the child, the system was not seen to adequately or systematically implement a rights-based approach. The child and young adult respondents recommended that the current decision-making mechanisms that included the Advisory Board be improved and be made more child-friendly. This would include the more regular availability of the child’s social worker to allow for sufficient and timely, meaningful communication with the child. Importantly, it would give the social worker a better opportunity to produce a more comprehensive report that was also based on more frequent contact with the child. In this manner, the Board could take a truly informed decision. For criticism of the decisions of the Board was primarily based on the impression given to some foster carers and some children, that the Board based its decisions on insufficient knowledge of the complete factual situation. Some adolescent respondents also recommended that the decisions taken about the child should be taken in consultation with persons such as their care givers, who were well-informed about the child’s day-to-day life. One of these respondents was also insistent that the logistics of the decision-making sittings that children attended should respect the needs of the child.52

Some of the child respondents and some of the foster carers complained about another aspect of the decision-making process. These complaints were all made in the context of long-term foster placements. They referred to situations where they required approval by the decision-making mechanisms for what they considered to be part and parcel of normal family life such as taking a trip abroad together. In this respect, they also referred to more far-reaching decisions such as the choice of religion of the fostered child. As a solution to these concerns, the adults referred to the 2014 Child Protection Bill that made provisions regarding permanent foster care and for circumstances under which foster carers may become responsible for extraordinary decision-making regarding some matters such as the ones mentioned above.

Many of the adult respondents did not make reference to the importance of a system that empowered the child to participate in the decision-making process. However, some of the adult respondents underscored the importance of the voice of the child in the care system. They stressed the need for a system that listens to the child and that allows for judicial review of important decisions affecting children’s lives. Such a system would be in line with the relevant European Court of Human Rights case law. It was recommended that children should have automatic access to representation in the decision-making process and to a fully effective, child-friendly, decision-making system.

52 In this respect, this respondent had expressed deep concern about having to miss out on much-needed school attendance in order to attend Advisory Board sittings.
The best interests of the child

The central importance of best interests principle (UNCRC Art 3) has already been mentioned. It was mentioned as one of the four fundamental overarching rights cutting across the whole of the UNCRC. Two of the respondents stated that there was a need for a clearer statutory articulation of what is required in order to consistently meet the best interests of the child in alternative care. It was pointed out that without such an explicit fleshing out of the best interests principle within child law, this principle might be open to different interpretations and this could be very detrimental to the wellbeing of the child. This recommendation is in conformity with the Committee’s 2013 concluding observations to Malta’s 2nd Periodic Report that calls for a better integration and application of this principle across “all legislative, administrative and judicial proceedings and all policies, programmes and projects relevant to and with an impact on children, particularly those deprived of a family environment, asylum seeking, refugee and/or in immigration detention…” (Par 31).

The best interests principle thus places obligations on decision-makers to consistently take into consideration how a decision will impact children’s lives and to ensure that children’s best interests remain at the level of a ‘primary consideration’ in the relevant final decisions taken. It also means that the same obligations are placed on budget and law and policy makers in all matters that impact on the best interests of the child particularly those children who are in care and/or who are asylum seeking, refugee and/or in immigration detention.

Non-discrimination

The principle of non-discrimination as provided for in Article 2 of the UNCRC is another of the four guiding principles of the UNCRC that are crucial to a full implementation of the Convention. The adult respondents were all in agreement in their reference to the principle of non-discrimination. They referred to the situation pertaining to anecdotal evidence of informal fostering of non-Maltese nationals, specifically migrant children. They regretted that these children did not enjoy the same array of services and safeguards that were available for Maltese children in out-of-home care. They recommended that all children without exception should enjoy the same protection provided by the State. Also children who are in out-of-home care on a voluntary basis should be entitled to the same services and safeguards as those under care order.

In the 2013 concluding observations of the second periodic report of Malta, the Committee made special reference to the situation regarding asylum-seeking and refugee children in Malta. With regards to factors and difficulties that were impeding the implementation of the Convention, the Committee recognised that the ‘substantial number of persons seeing asylum and/or refugee status’ had a negative impact on the implementation of the rights enshrined in the Convention (Par 7). In this context, special reference was made to children in an asylum and/or refugee-seeking situation. The above indicates that further efforts need to be made to ensure that a repertoire of services are available to all children in Malta irrespective of their status or nationality.

A further concern was expressed concerning the opportunities available for the care of children who are in trouble with the law and who could be deprived of their liberty. In this respect it was strongly suggested that specialised fostering for children in trouble with the law be introduced. It was pointed out that this kind of intensive, alternative care was providing good results in the
countries that provided this service. This recommendation was in line with the Committee’s 2013 Concluding Recommendations that Malta “introduce(s) alternatives to deprivation of liberty and diversion possibilities, to avoid the prejudicial effects of deprivation of liberty” (Par 66e).

**Behaviour management**

One adolescent respondent regretted that periods of stress had led to her previous foster carer’s behaviour management tactics that included smacking and verbal abuse. Another adolescent also made a fleeting condemnation of the smacking that she had experienced in a previous placement that had broken down. Both of these respondents recommended that more support and monitoring needs to be provided with respect to foster carers.

The Committee’s 2013 recommendation to enact legislation to explicitly prohibit corporal punishment has since been taken on board. Under Maltese law, all forms of corporal punishment are prohibited, as clearly stated in the Criminal Code and punishable by law. However, the data suggests that more resources are required to provide the necessary 24/7 support of all placements particularly during periods of stress.

**Reduction of social stigma**

Many of the children, some of the foster carers, some policymakers and other stakeholders referred to the suffering that children have to endure whenever they are singled out in school because of their social status. Fostered children did not like to feel different from other children and suffered stigma when their peers at school realised that they were in care. For this reason, they strongly resented being called over the school’s loudspeaker system to go and meet a social worker who had called to have a meeting with them. The same applied to any other occasions which singled them out. Various stakeholders recommended that the policies and procedures of social services and of the schools should be more sensitive to the manners in which some children can suffer discrimination and stigma.

**The contribution of this study**

To conclude, this study has followed other fruitful research done in and around the field of fostering. What characterises this study is the intensity with which the voice of the child was sought. This voice was complemented by the contribution of the spectrum of stakeholders who matter most in the care of the child who is deprived of family care. This study was underpinned by a belief that a rights-based approach in this field is necessary to nurture protection and empowerment principles that retain the child’s dignity as its core. By drawing on children’s rights and using a mixed qualitative approach, the study is rich both in empirical detail and ‘deep knowledge’, as well as being policy relevant. The policy recommendations that the Commissioner for Children has drawn from this study have been based on this approach.
It is envisaged that this work will contribute to the current lively debates in the sector. However, not all the recent public debates have been characterised by the desired level of professionalism. In fact, some aspects of the debates in the local media have contributed to further divisions in a sector that has already been marked by the ill consequences of sometimes irreconcilable conceptualisations of the very core meaning of foster care. It is our view that public debates should respect the manner in which fostered children themselves would like their position to be featured, namely with the same status and in the same position as other children living within birth families. It should therefore be sensitive to the voice and the feelings of the child. It should aim to be conciliatory. We are doing no favours to the child if we picture the child as an object of concern or pity. Every child should be portrayed as a dignified holder of rights.
CHAPTER 6: THE COMMISSIONER’S RECOMMENDATIONS

In the light of the foregoing, the Commissioner puts forward the following recommendations. They are set within an overall approach to children’s rights that starts from the conviction that all children are citizens now. Furthermore, there is a pressing urgency to fulfil our obligations towards realising conformity towards what is owed to them as stipulated in the UNCRC.

Permanency planning

The Preamble to the UNCRC recognises that the ‘full and harmonious’ developmental rights of children are best met within a family environment. Furthermore, Article 20 stipulates the requirements regarding the alternative care that the State is obliged to provide children deprived of their family environment. Among these, Article 20 (3) includes that ‘when considering solutions, due regard shall be paid to the desirability of continuity in a child’s upbringing.’ Children’s need for permanence and for a sense of belonging to a caring family should be addressed in a timely manner when children cannot live with their birth parents (temporarily or permanently). It is expected that the State addresses this fundamental need for permanence and stability. The manner in which individual children’s needs for permanency should be addressed will vary according to many factors. These different factors and circumstances include, inter alia, the children’s age, the age at which they have been taken into care, the length of time they have been in a foster family and the emotional ties that they have built both with their birth family and/or their foster family. Statutory strength needs to be given to concurrent policies that address two main possible pathways:

- Family reintegration
  - A social worker needs to be assigned to the birth family as soon as a child is placed in care (whether under care order or on a voluntary basis);
  - Treatment orders need to be given statutory strength;
  - In line with the UN Guidelines for the Alternative Care of Children (Par 48), to “support the child and the family for his/her possible return to the family, his/her situation should be assessed by a duly designated individual or team with access to multidisciplinary advice, in consultation with the different actors involved (the child, the family, the alternative caregiver), so as to decide whether the reintegration of the child in the family is possible and in the best interests of the child, which steps this would involve and under whose supervision.”

- Permanent alternative care
  - Adoption;
  - Open adoption;
  - Permanent foster care;
  - Specialised group home care.
Adequate budget allocations

The UNCRC stipulates that ‘With regard to economic, social and cultural rights, States Parties shall undertake such measures to the maximum extent of their available resources’ (Article 4). The obligation of the State to meet the fundamental right of the child to family life and to good alternative care involves supporting all those who are responsible for the life and development of the child. This includes, inter alia, their birth families, their foster carers, their social workers and the relevant agencies. To perform this duty, sufficient resources and budget allocations should be made to meet the following:

- monitoring and supporting the birth family. This includes the support given by welfare services to the birth family to address problems related to the care and development of their children:
  - Before the child is taken into care;
  - While the child is in care;
  - If and when the child returns to the birth family.

- human and material resources required by the welfare services in order to provide good alternative care. These include:
  - a well-trained and well-supported LAC staff with a realistic workload. This should allow the child’s social worker to keep up meaningful contact with the child and with persons who play a significant role in the care of the child.
  - well-trained and well-supported social workers within the foster care teams with a realistic workload. This should allow them to:
    - monitor and support foster carers competently and efficiently;
    - intensify support during potential periods of increased demands made on foster carers when the children are going through the transitional development between childhood and adolescence; and
    - intensify support if needed during periods of emotional upheavals such as those that may arise regarding contact with the birth family.
  - a sufficient number of foster carers to meet the different needs and circumstances of children in need of alternative care. These foster carers should be provided with accredited training both initial and ongoing. They should also be provided with the human and financial resources required to care for and support the children.
  - a fully professionalised SAV service. This includes:
    - a sufficient number of professional supervisors who have the relevant qualifications;
    - a Children’s House that mirrors a home environment where the children and their birth family members can benefit from the experience of quality family time;
    - the allocation of drivers to carry out the duties related to the children’s commuting requirement;
    - professional services to help and support the child, the birth parent and the foster carer to adequately address issues related to contact visits.
    - the setting up of an efficient crisis intervention centre and pre-assessment centre;
    - the provision of well-resourced after-care services to children who have been fostered and to foster carers who provide after-care.
The voice of the child

The participation rights of the child as outlined in Article 12 form one of the cornerstones of the UNCRC. The State is obliged to have the proper mechanisms in place to facilitate the participation of children in the decision-making process regarding matters that are of major importance to their lives. However, the children who were interviewed expressed the view that they did not consider that the current mechanism was giving them a voice or was meeting their needs to live as normal a life as possible. In particular the following need to be addressed:

- The decision-making process involving administrative structures such as the Children and Young Persons Advisory Board needs to be revised. In line with prevalent international case-law, children have a right to have a system that allows for judicial review of important decisions affecting their lives. They should have automatic access to representation in the decision-making process and to a fully effective, child-friendly, decision-making system.
- The decision-making process should be more child-friendly and easier for the child to navigate. This includes that:
  - the child is empowered and supported;
  - the child feels that decisions are taken by persons who are well informed about the child’s day-to-day life;
  - the logistics respect the child’s expressed needs such as the need not to miss school attendance;
  - the persons providing the day-to-day care are delegated certain decision-making powers that can help ‘normalise’ family life in cases of long term care.
- In line with what has been stated above, the workload of the child’s social worker should allow for sufficient and timely meaningful communication with the child. No child should feel that contact with the child’s social worker only occurs prior to the Children and Young Persons Advisory Board meetings.

The best interests of the child

The best interests principle (Article 3) is another of the fundamental overarching rights cutting across the whole of the UNCRC. Therefore there needs to be a clearer statutory articulation of what is required in order to consistently meet the best interests of the child in alternative care. This needs to be in conformity with the CRC’s 2013 concluding observations to Malta’s 2nd Periodic Report. In the report, the CRC urges Malta to undertake certain specific measures. The following recommendations are extracted from the 2013 CRC report and specify that Malta is urged to:

- strengthen its efforts to ensure that the principle of the best interests of the child is widely known and appropriately integrated and consistently applied:
  - in all legislative, administrative and judicial proceedings;
  - in all policies, programmes and projects relevant to and with an impact on children, particularly:
    - those deprived of a family environment;
    - those who are asylum seeking, refugee and/or in immigration detention.
- develop procedures and criteria to provide guidance for determining the best interests of the child in every area, and to disseminate them to public and private social welfare institutions,
courts of law, administrative authorities and legislative bodies;

- base the legal reasoning of all judicial and administrative judgments and decisions on the best interests principle. (CRC/C/MLT/CO/2, 2013, Par 31)

These recommendations have a very broad application that includes all the relevant areas of policy and practice related to theFSWS, the DSWs, the Family Court, The Children and Young Persons Advisory Board and the Fostering Board.

**Non-discrimination**

Article 2 (1) of the UNCRC stipulates that ‘States Parties shall respect and ensure the rights set forth in the present Convention to each child within their jurisdiction without discrimination of any kind…’ In the light of the anecdotal evidence of informal fostering of non-Maltese nationals, the situation pertaining to migrant and asylum seeking children needs to be fully investigated and addressed. In particular:

- There should be no discrimination regarding the availability of welfare agency services to address children’s needs;
- The same repertoire of services needs to be made available to non-Maltese nationals as those provided for Maltese nationals.

Some children suffer as a result of stigma in schools that is displayed by some of their peers or the families of some of their peers. In order to reduce the incidence of stigma, the social care services and the education system could:

- Ensure that policies and procedures are sensitive to the reality of children being singled out as in need of social care services;
- Provide sensitive support to children in care who feel that they are being discriminated against by their peers or who are suffering as a result of social stigma.

**Meaningful behaviour**

In order to provide the appropriate conditions for all children to reach their potential as stipulated by the UNCRC, a more positive and holistic approach to ‘meaningful behaviour’ is required. The system can benefit from a more adequate investment into specific resources dedicated to addressing the complex needs of adolescents during periods of potential emotional upheavals and ‘meaningful’ behaviour. One such period may arise as a result of stress experienced during early adolescence or during the transitional period of development from childhood to adolescence. The following recommendations include some of the measures that are required in this respect:

- Foster carers are to receive further and accredited training regarding behaviour that is often labelled as ‘challenging’ behaviour;
- Foster carers are to receive sufficient timely support that includes the 24/7 availability of a social worker when needed in order to further avoid placement breakdown;
- Clearer guidelines need to be established, supported and followed regarding behaviour management. These guidelines should follow the stipulations of Par 95 of the 2009 UN
Guidelines for the Alternative Care of Children;
- Foster carers are supported on an ongoing basis to follow the above-mentioned guidelines that, inter alia, cover the various forms of physical or psychological violence;
- A well-resourced 24/7 crises intervention centre is required to provide timely support;
- A three-tier therapeutic intervention service needs to be set up. This service should provide a range of services that should include residential, semi-residential and non-residential services in order to meet the different and changing needs of children and young persons.

**Appointed Boards and Central Authority**

The role of appointed Boards and the Central Authority is key in the provision of appropriate foster care for children. This role needs greater appreciation and awareness among the various stakeholders. Therefore the following is being suggested:

- the availability and promotion of both user-friendly and child-friendly electronic and hard-format material outlining the functions and procedures of these bodies;
- the availability and promotion of this material in Maltese, in English and in a variety of appropriate formats;
- the material should be professionally designed to attract and retain the attention of those who require the information.

Furthermore, the transparency and accountability of Appointed Boards and Central Authorities need to be ensured. In this respect it is recommended that:

- clear guidelines be established for the procedures and substantive decisions of Appointed Boards and the Central Authority in order to ensure consistency;
- entities carrying out the functions that are currently the responsibility of the above-mentioned bodies should not be accountable to the same Ministry so as to further ensure transparency and accountability.

**Action Plan**

A Children’s Policy and Action Plan needs to be adopted to establish an overarching holistic strategy in the field. In this respect, it is recommended that the Children’s Policy and Action Plan should:

- be the result of a full stakeholder consultation;
- take into account local developments as well as international initiatives.

**Legislative review**

The 2014 Child Protection Bill that is still in line to be debated at second reading in Parliament needs to be enacted as law as quickly as possible. In line with the above, it is recommended that:

- the 2014 Child Protection Bill retains the momentum required to be enacted as law;
- the key, relevant legislative enactments in the field, namely the Fostering Act, the Adoption Act
and the Children and Young Persons (Care Orders) Act are professionally reviewed and updated as necessary for consistency with emerging child law and present applicability.

**Eligibility to family-friendly measures and fiscal incentives**

Consideration should be given to introduce measures to create adequate family-friendly measures for foster carers who are caring for children on a day-to-day basis. It is thus being recommended that foster carers:

- are eligible to benefit from the same family-friendly measures as parents with regards to, for example, employment conditions;
- are eligible to benefit from the free childcare services for their fostered children even if the foster carer is not in employment;
- are eligible for relevant fiscal benefits;
- are further incentivised by tax rebates.

**Concluding thoughts**

The 2013 CRC report on Malta reiterated the role of the Commissioner for Children in the improvement of children’s lives in Malta. The above recommendations form part of my contribution in this endeavour with regards to the lives of children deprived of family care. In this respect, my role included the raising of awareness of these children’s rights, advocating for the full inclusion of these rights in Malta’s legal and administrative structures and the monitoring of children’s services. Furthermore, as underscored by the same CRC report, this initiative is in line with my ongoing efforts to give children a voice.
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