
Parent Report of Services Used and Services Needed

	<u>Services Used</u>
Financial support	79%
Information about child	69%
Information about services	60%
Medical and health services	74%
Educational services for child	64%
Parent education and counseling	73%
Respite care and other services	16%
Contacts with other foster families	70%
Newsletter	54%
Reimbursement	41%

	<u>Services Needed</u>
Financial support	6%
Information about child	17%
Information about services	6%
Medical and health services	4%
Educational services for child	3%
Parent education and counseling	3%
Respite care and other services	11%
Contacts with other foster families	3%
Newsletter	0%
Reimbursement	3%

Several points stand out. Most families used services available to them. For the services needed most often, information about the child and respite care stood out. However, from discussions about ways to improve the program, families offered the following suggestions about services:

- Most of the families said they need more clothes and food, particularly as the children get older and outgrow their clothes or their eating habits change with maturity.
- They mentioned that they would like to be asked more about what they need. Too often, the agency assumed that they knew what families need or wanted without families having the opportunity to express their needs or wants
- They would like periodically to have some exchange sessions with other foster families. The meetings are too structured and for the benefit of the agency, not the families.
- Some foster families also mentioned that they would like respite care so that someone could care for the children while the family is on vacation.
- Some of the foster families would like to have a choice about the age of the child they foster before a placement decision is made.

- Many of the foster children who live in the villages have no running water. One idea for further supporting families would be to go there and talk to them about personal hygiene within the context of the current situation.
- A number of families in the villages remarked about the logistic difficulties of attending meetings in Bistrita since they did not have a car and traveling means negotiating buses and trains with small children. They suggested helping families build local networks with other village families for support and advice.
- Regarding foster family meetings, some families report that it would be better if they wouldn't have to bring their child with them. We were told that the foster parents are asked to bring the children with them only when the biological parents come to visit the child. Some families are confused about when they can leave the children at home.
- Some of the families feel that there are too many questions about the negative aspects of the child.

Several issues related to the adoption of the children in foster care occurred. They are highlighted below:

- Most of the time, foster families are given very short notice regarding the child leaving for adoption. They need more time (at least few days) to prepare the child for his or her new life. In one case, the foster family had medical information that the social worker did not take with the child. In several other cases, the child had a Lifebook and it was left with the foster family. Overall, the best practices approach for adoption has not been followed with these foster families, compromising the best interest of the child.
- The foster families whose children were adopted asked if they could get information about the child after the child is adopted. Currently, they can get the information only if the adoptive family agrees. They are willing and interested in being a resource for the adoptive family and maintaining contact with the family and the former foster child. While this is not always possible, the willingness of families to continue to be a resource should be maximized in the best interest of the child.
- Some foster parents are interested and willing to adopt the children they have in foster care. It is the same issue in the United States--many foster families have a higher life standard than most birth families. The foster families feel it would be impossible for them to adopt, either because of policy barriers or financial resources. The ability of some of these families to provide permanency for the children in their care must be a matter of public policy priority.

Summary

It is clear that excellent progress is being made with regard to foster care in Romania. All the foster families like to talk about their children and could easily find strengths in their children. Most of the children are developmentally appropriate and have no health problems or sensory difficulties. Parents report good parent-child relations, few have behavior concerns, and the foster placements are very stable. Most Romanian foster families have positive attitudes about their children and are committed to fostering their children.

This section summarizes the answers to the questions posed initially in this report, drawing from the analysis of the data and the team's observations.

What problems/issues are families facing related to fostering or to the foster children?

Problems or issues were not pronounced. Families identified some stressors—the school was a source of stress and a number of families would benefit from a social worker that could advocate for the child and work with the rural school.

A number of the families had Roma children who were “passing” for Romanian children. In some cases, the children were too young to understand any distinction and were not dark skinned. In other cases, the children were older but were encouraged by the families to not talk about their ethnicity. This might present a dilemma for children who have a plan to return to their birth family if they have no knowledge about their origins. We were concerned that the failure to acknowledge this reality was sending a message of shame or embarrassment that the children may internalize and affect their self-esteem. Finally, the failure to acknowledge that the children were Roma allows the community to continue the belief about Roma and Roma children when most of these children would defy conventional attitudes.

The major issue facing families during the time of the study was that they had not been paid and there was no information about when they would be paid. Several weeks after we returned we were told that the families had finally been paid but there was concern about future payments. Families rely on foster care payments to meet expenses. The surest way of undermining the foster care program is to fail to pay the families on time. Families should be paid before social workers or administrators are paid in the event that there is a delay.

Finally, there needs to be a permanency plan for each child and the foster family needs to know the plan. Many families have no knowledge about the plans for the children or, in the case of adoption, the practices were poorly executed. There needs to be a system of permanency planning for children and standards of adoption that are followed by social workers and agencies.

What post placement resources have they used? What post placement services would families like to have?

Most families used services available to them. For the services needed most often, information about the child and respite care stood out. In addition, a number of the children would benefit from speech therapy and some would benefit from physical therapy and/or occupational therapy. None of these services were available to the children. While only a few families have children with severe emotional and behavioral problems, the fact is that these children need psychological and perhaps psychiatric assistance to maximize their growth and development.

Different services need to be developed to strengthen and support children and foster families, particularly as children get older and different issues arise. Most families were incredulous that

this can happen in Romania, but for the long-term development of the child welfare system, this will be essential.

What is the stability of these placements? What are indicators of success/failure in these placements?

There are several indicators of success. Parent-child relations are extremely positive. Families evaluated the impact of foster placement on the family in very positive terms. However, some families may not have been well prepared for foster parenting or the foster care experience. As such, some families had entertained thoughts of ending their foster care placements. Fortunately, only a few families explicitly expressed these thoughts. Overall, these placements are quite stable and successful.

How could the foster care program be improved?

More families need to be funded and recruited to meet the demands for placement of children who cannot reside with their birth families. In addition, recruitment and family preparation activities need to be oriented towards assisting families in making social connections with each other and building networks of informal social support. While not all families want social contact with other foster families, a substantial percent of families either had social contact—which they evaluated as helpful—or wanted social contact with other foster families, particularly those that lived close to them.

The children and their families benefit from the development of a life book as part of the program (Wheeler, 1978; Aust, 1981). The life book is a scrapbook that contains photos and other mementoes, drawings, and memories that form the child's life experiences. Included in the life book should be a placement genogram (Groze, Young & Corcran-Rumppe, 1991; McMillen & Groze, 1994). The placement genogram is a diagramming technique that traces the child's placement history, starting from birth, and records pertinent information about each placement. For instance, the date of abandonment, the dates the child was moved to various placements, and relationships with significant caretakers might be documented on the placement genogram. When children are older, it can be used to help children connect and integrate their past to their present.

On an administrative level, there is need for improvement in the Management Information System (MIS). There is a need for documentation of visits and records about monitoring of families after the placement. Many families reported infrequent visits, and in one case a family had not been visited by a social worker for five months. The lack of visits places children who are already vulnerable more at-risk if the placement is not going well.

We suggest that a foster parent advisory board may be helpful for several reasons. Families need a voice and they can be helpful. Parents can assist in recruiting and marketing foster care to other Romanian families. Foster parents have a different type of credibility in the community than do social workers--they can be a great asset in locating other families for fostering children. In addition, families know their own service needs as well as the service needs of other families

in their communities—they can advise the agency on programs, to be developed, that will strengthen and support families.

Foster care needs to have a program evaluation built into its operation. This project offers pilot data that can be used in the design of other efforts to evaluate foster care in Romania. The measures used here were helpful in understanding some of the child developmental and behavioral issues. Better measures for development need to be employed in future projects. We also recommend measures about birth family and birth family history, foster family functioning and foster family support networks be incorporated in future projects.

Evaluation of foster care would also benefit from stronger research designs. In particular, it would be help to have measures about the birth family, birth family history, children's health, development and behavior at the time of entrance into care at the orphanage or an institution. It would also be helpful to have measures of foster family functioning before placement. Then, ongoing measures of children and foster families at 3, 6 and 12 month intervals would document changes over time. Also, if all children who enter out-of-home care are assessed, since not all of them enter foster care, child measures could be compared for children in institutions and children in foster care.

This project was a good pilot study of the issues in Romania's new foster care system. We learned a great deal from the families but there is still much to learn.

REFERENCES

Achenbach T: Manual for the child behavior checklist/4-18 and 1991 profile. Burlington, VT: University of Vermont, Department of Psychiatry; 1991.

Achenbach T, Edelbrock C: Manual for the child behavior checklist. Burlington, VT: University of Vermont, Department of Psychiatry; 1983.

Aust, P. H. (1981). Using the Life Story Book in Treatment of Children in Placement. Child Welfare, LX(8):535-560.

Cermak , S. & Groza, V. (1998). Sensory Processing Problems in Post-Institutionalized Children: Implications for Social Work. Child and Adolescent Social Work Journal, 15(1):5-37.

Cowger, C. D. (1994). Assessing Client Strengths: Clinical Assessment for Client Empowerment. Social Work, 39(3):262-268.

DeJong, P., & Miller, S. D. (1995). How to Interview for Client Strengths. Social Work, 40(6):729-736.

Goldstein, H. (1992). Victors or Victims: Contrasting Views of Clients in Social Work Practice. In Saleebey, D. (Ed.). The strengths perspective in social work practice. New York: Longman, (pp. 18-38).

Groza, V., Ileana, D., & Irwin, I. (1999). A Peacock or a Crow? Stories, Interviews and Commentaries on Romanian Adoptions. South Euclid, OH: Willes e-press.

Groza, V., & Bucharest Research Team. (1999). A follow up study of Romanian families who adopted Romanian children. Prepared for Holt International Children's Services, Eugene, Oregon and Bucharest, Romania.

Groze, V., Young, J., & Corcran-Rumppe, K. (1991). Post Adoption Resources for Training, Networking and Evaluation Services (PARTNERS): Working with Special Needs Adoptive Families in Stress. Prepared with Four Oaks, Inc., Cedar Rapids, Iowa, for the Department of Health and Human Services, Adoption Opportunities, Washington, D. C.

Marcenko, M. O. & Smith, L. K. (1991). Post adoption needs of families adopting children with developmental disabilities. Children and Youth Services Review, 13, 413-424.

McMillen, J. C., & Groze, V. (1994). Using Placement Genograms in Child Welfare Practice. Child Welfare, LXXII(4):307-318.

Poertner, J., & Ronnau, J. (1992). A strengths Approach to Children with Emotional Disabilities. In Saleebey, D. (Ed.). The strengths perspective in social work practice. New York: Longman, (pp. 111-121).

Rosenthal, J. A., Groze, V., & Morgan, J. (1996). "Services for Families Adopting Children via Public Child Welfare Agencies: Use, Helpfulness, and Need." Children and Youth Services Review, 18(2):163-182.

Saleebey, D. (Ed.). (1992a). The strengths perspective in social work practice. New York: Longman.

Saleebey, D. (1992b). Introduction: Power to the people. In Saleebey, D. (Ed.). The strengths perspective in social work practice. New York: Longman, (pp. 3-17).

Saleebey, D. (1992c). Conclusion: Possibilities of and Problems with the Strengths Perspective. In Saleebey, D. (Ed.). The strengths perspective in social work practice. New York: Longman, (pp. 169-179).

Wheeler, C. (1978). Where Am I Going? Making a Life Story Book. Juneau, AK: Winking Owl Press, cited in Aust, P. H. (1981). Using the Life Story Book in Treatment of Children in Placement. Child Welfare, LX, 8: 535-560.

APPENDICES

Interview Letter

May 2001

Dear Foster Parent,

For the last few years, several hundred Romanian children have been fostered by Romanians. We would like you to take part in an interview about your foster care experience. Your comments will help us understand the joys and difficulties you have experienced.

This evaluation is being conducted by Dr. Victor Groza of Case Western Reserve University. He has conducted extensive research in adoption, and has been working in Romania since 1991.

Romanian Children's Relief/ Fundatia Inocenti will contact you within 2-3 weeks of this letter to set up an appointment in your home at your convenience for an interview. The interview takes about 60 to 90 minutes to complete. It is about child development, family activities, and foster care. Either parent can be interviewed.

Please help out. The opinions of foster parents provide the best information in understanding the foster care experience and planning services for families and children. Results will have relevance for both the United States and Romania. Understanding the issues faced by foster families from Romania allows us to focus on problems that we share in common with other countries, and explore common solutions. There are no known risks for participating in the project. There are no concrete benefits for your participation in the project except that your information may help other families or children in the future.

Confidentiality is important in foster care research. *All responses are confidential.* Individual responses will not be released to anyone; they will be combined with responses from other families. Also, you should know that your participation is voluntary. You do not have to participate. You may stop answering questions at any time. Participation or refusal will not have an effect on any current or future services with Romanian Children's Relief/ Fundatia Inocenti.

Feel free to contact Dr. Groza at the Fundatia Inocenti office in Bistritia at 063/ 236 368 if you have questions now. If you have questions later, you may contact him in the United States at 216-368-6682. If you would like to talk to someone other than the researcher about: (1) concerns regarding this study, (2) research participant rights, (3) research-related injuries, or (4) other human subjects issues, please contact Case Western Reserve University's Office of Research Administration at 216-368-4510 or write Case Western Reserve University, 10900 Euclid Avenue, Cleveland, OH 44106-7015.

Thank you for your time and help. This letter is for your records.

Victor Groza
Case Western Reserve University

Eileen McHenry, Executive Director
Romanian Children's Relief/ Fundatia Inocenti

Code # _____
(for tracking purposes only)

QUESTIONNAIRE FOR FOSTER PARENTS OF ROMANIAN CHILDREN

1. What is today's date? _____ / _____
month year
2. What is your relationship to the child? (check one)
 1. (foster) Mother
 2. (foster) Father
3. What is your foster child's sex? (check one)
 1. Male
 2. Female
4. What is your foster child's month and year of birth?
_____ / _____
month year
5. What was the month and year of foster placement (the month and year your child came into your home)?
_____ / _____
month year
6. How many other children (adopted, biological, step, foster, or other) currently live in your home?

7. How many children joined your family after this child? _____
8. Was this child in an institution or orphanage (excluding a maternity hospital) before foster placement?
 1. Yes---> for how long? ____years ____months
 2. No

How would you evaluate the overall quality of this placement? (check one)

1. Excellent
2. Good
3. Fair
4. Poor
- Don't really know

What was the staff-to-child ratio at this facility? _____ staff to _____ children

10. Was this child in a maternity hospital before foster placement?

1. Yes---> for how long? ____years ____months
2. No

How would you evaluate the overall quality of this placement? (check one)

1. Excellent
2. Good
3. Fair
4. Poor
- Don't really know

What was the staff-to-child ratio at this facility? ____staff to ____ children

11. Was this child in a family before foster placement?

1. Yes---> for how long? ____years ____months
2. No

How would you evaluate the overall quality of this placement?

1. Excellent
2. Good
3. Fair
4. Poor
- Don't really know

12. Please tell us where you child was living during the following time periods:

Time Periods	Family	Maternity Hospital	Orphanage	Hospital	Institution	Other
0-1 months						
1-6 months						
6-12 months						
12-24 months						
24-36 months						
36+ months						

13. What is your child's ethnicity/race?

1. Romanian
2. Hungarian
3. Gypsy
4. Turkish
5. Other (specify) _____

14. If your child has problems or handicaps, have they changed this last year?

- yes
- no

If so, what has improved?

What has remained the same?

What has gotten worse?

15. Does this foster child have any of the following problems or handicaps? CHECK ALL THAT APPLY.

A. Blind or vision impaired (excluding minor vision problems requiring the use of glasses)

B. Deaf or hearing impaired

C. Physical handicap (specify) _____

D. Mental retardation or handicap

- mild
- moderate
- profound

E. Developmental delays/disabilities

- Delayed fine motor skills _____ Now _____ At Placement
- Delayed gross motor skills _____ Now _____ At Placement
- Delayed language skills _____ Now _____ At Placement
- Delayed social skills _____ Now _____ At Placement

F. Learning disabilities (specify) _____

G. Behavior concerns

At Placement

Now

- _____ wets the bed
- _____ no bladder control during the day
- _____ hits self
- _____ rocks self
- _____ always frightened or anxious
- _____ inconsolable when upset

- _____ wets the bed
- _____ no bladder control during the day
- _____ hits self
- _____ rocks self
- _____ always frightened or anxious
- _____ inconsolable when upset

Please

describe:

H. Other difficulties

At Placement

Now

_____ over-sensitive to touch, movement,
sights or sounds
_____ under-reactive to stimulation or pain
_____ activity level is too high for his/her age
_____ activity level is too low for his/her age

_____ over-sensitive to tough, movement,
sights or sounds
_____ under-reactive to stimulation or pain
_____ activity level is too high for his/her age
_____ activity level is too low for his/her age

Please

describe:

I. No problems

16. Does your foster child attend school?

- Yes
- No

If no, why not? _____

17. Is your child enrolled in any special education classes?

- Yes
- No

Are your child's classes

1. Entirely special education classes
2. Mostly special education classes
3. Mostly "regular" classes
4. Entirely "regular" classes (i.e. no special education)

18. What grade is your foster child in?

- day care
 - number of hours per day? _____
 - number of days per week? _____
- preschool
- grade school

19. How do you and your foster child get along?

1. Very well
2. Fairly well
3. Not so well
4. Very poorly

20. How often do you and your foster child enjoy spending time together?

1. Just about every day
2. About two or three times a week
3. About once a week
4. About once a month
5. Less than once a month or not at all

21. How would you rate the communication between you and your child?

1. Excellent
2. Good
3. Fair
4. Poor

22. Do you trust your child?

1. Yes, very much so
2. Yes, for the most part
3. Not sure
4. No

23. Do you feel respected by your child?

1. Yes, very much so
2. Yes, for the most part
3. Not sure
4. No

24. Do you feel close to your child?

1. Yes, very much so
2. Yes, for the most part
3. Not sure
4. No

25. Are your foster child's problems and/or handicaps, if any,

1. More serious than described to you by the social worker(s)
2. About as described
3. Less serious than described

Are your foster child's health problems, if any,

1. More serious than described to you by the social worker(s)
2. About as described
3. Less serious than described

26. Overall, has the impact of this child's placement on your family been

1. Very positive
2. Mostly positive
3. Mixed: positives and negatives about equal
4. Mostly negative
5. Very negative

27. How old are you? _____ years old

28. What is your marital status?

1. ___ Married, first marriage
2. ___ Married, second or later marriage
3. ___ Separated/divorced
4. ___ Widowed
5. ___ Single
6. ___ Living with partner but not legally married

29. Estimate of family income from all sources for the past year: _____

30. How old is your spouse/partner? _____ years old

31. Since placement, have you or your spouse been in contact with other foster parents?

1. Yes

2. No

If yes, was this helpful?

- _____very
_____somewhat
_____not really

During the past year, overall, has the foster care experience been

1. Smoother than you expected
2. About as you expected
3. Had more "ups and downs" than you expected

33. How often do you think of ending the foster placement?

1. Frequently
2. Most of the time
3. Not very often
4. Never

In your own words, what single service was most needed but was not provided or was provided in such a way that it did not meet child's or family's needs?

What single thing, if done differently, would have been most helpful in this foster placement?

Services for foster families are listed below. For each service, respond to the following question by placing the appropriate number from the response choices in the spaces provided.

Think about parents who want to foster a child with characteristics and needs similar to those of your child. Overall, how important is each service for this family?

- 1 = Essential
- 2 = Very important
- 3 = Somewhat important
- 4 = Not important

_____ **Financial support** – foster care payment

_____ **Information about child** - on experiences prior to foster care as well as on current health, educational and social needs

_____ **Information about services** - information about and help in locating needed services such as therapy, support groups, medical care, educational services, etc.

_____ **Medical and health services** - ongoing medical and dental care as well as specialized care to meet child’s needs (medical care for disability, physical therapy, mental health services, and so on)

_____ **Educational services for child** - ongoing and specialized educational and academic services.

_____ **Parent education and counseling** about foster care, including behavior management skills, helping children adjust to new family, dealing with a handicap, stresses and rewards of foster care, planning for child’s future, etc.

_____ **Respite care and other “helping” services** - some time away from child as well with parenting tasks such as transportation, in-home nurse care, day care, etc.

_____ **Contacts and other foster families** - foster parent support groups as well as informal contacts with families who have foster children

_____ **Training/newsletter** --training offered for those involved in the foster care system and monthly newsletters sent by mail to the foster parents

_____ **Reimbursement**-- transportation reimbursement for travel to the monthly foster parent meetings

Which of these services did you use?

- | | |
|------------------------------------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> Financial support | <input type="checkbox"/> Educational services for child |
| <input type="checkbox"/> Information about child | <input type="checkbox"/> Parent education and counseling |
| <input type="checkbox"/> Information about services | <input type="checkbox"/> Respite care and other “helping services” |
| <input type="checkbox"/> Medical and health services | <input type="checkbox"/> Contacts with other foster families |
| <input type="checkbox"/> Training/newsletter | |
| <input type="checkbox"/> Reimbursement | |

Which did you need but did not get?

- Financial support
- Information about child
- Information about services
- Medical and health services
- Training/newsletter
- Reimbursement
- Educational services for child
- Parent education and counseling
- Respite care and other "helping services"
- Contacts with other foster families

Care era raportul numeric personal – copil in aceasta unitate? _____ persoane la _____ copii

9. Acest copil a stat internat in maternitate, sau spital, inainte de plasament?

- Da _____ Cat timp? _____ ani _____ luni
 Nu

Cum ati evalua, in general, calitatea acestui serviciu? (bifati o singura casuta)

- Excelenta
 Buna
 Satisfacatoare
 Proasta
 Nu stiu

Care era raportul numeric personal – copil in aceasta unitate? _____ persoane la _____ copii

10. A stat acest copil intr-o familie inainte de plasament?

- Da _____ Cat timp? _____ ani _____ luni
 Nu

Cum ati evalua, in general, calitatea acestui plasament? (bifati o singura casuta)

- Excelenta
 Buna
 Satisfacatoare
 Proasta
 Nu stiu

11. Spuneti-ne, va rog, unde a locuit copilul dvs in urmatoarele perioade de timp:

Perioadele de timp	Familie	Maternitate	Orfelinat	Spital	Institutie	Altele
0 – 1 luni						
1 – 6 luni						
6 – 12 luni						
12 – 24 luni						
24 – 36 luni						
36+ luni						

12. Care este etnia/rasa copilului dvs?

- Romana
- Maghiara
- Rroma
- Turca
- Altele (specificati) _____
- Nu stiu

13. In cazul in care copilul dvs are probleme sau handicapuri, s-au schimbat acestea in ultimul an?

- Da
- Nu

Daca da, ce s-a imbunatatit?

Ce a ramas neschimbat?

Ce s-a inrautatit?

14. Sufera acest copil de vreuna din urmatoarele probleme sau handicapuri? BIFATI TOATE CASUTELE CARE SE APLICA CAZULUI DVS.

- Orbire sau deficiente de vedere (exceptand problemele minore de vedere care necesita folosirea ochelarilor)
- Surditate sau deficiente de auz
- Handicap fizic (specificati) _____
- Retardare sau handicap mental
 - Usor
 - Moderat
 - Profund
- intarzieri / deficiente in dezvoltare
- _____ la data plasamentului abilitati motorii fine intarziate _____ acum
- abilitati motorii generale intarziate _____ acum _____ la data plasamentului