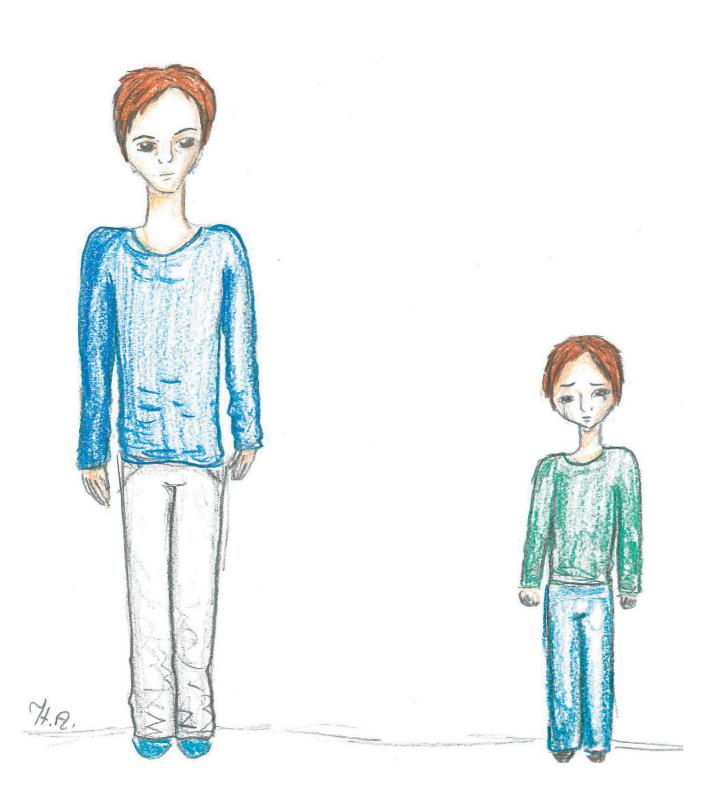
# WHO WOULD HELP OUR FAMILY?



REPORT ON THE DEVELOPMENT PROJECT SUPPORTING AND REUNITING CHILDREN PLACED IN CARE AND THEIR FAMILIES



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# WHO WOULD HELP OUR FAMILY?

Report on the development project Supporting and reuniting children placed in care and their families

Sonja Vanhanen 2014

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#### **1 INTRODUCTION**

"I strongly feel that I have been neglected as a parent. I haven't been given the chance to prove that I can do better. There have been suspicions of substance abuse, and once I have got past those concerns, they have come up with new reasons. I have heard many times that, where possible, the aim is to eventually have the children return home after being placed in care. But I have never felt that there is any hope of that happening." – Emma, mother of a placed child

"My family is so perfect, it really is. I don't know why I had to come here. I've spent a total of five years at these foster homes, and I still don't know why." – Eero, Emma's son

Pursuant to the Finnish Child Welfare Act, placing municipalities and foster care service providers are required to support and promote the child's contact with his or her own family. The law also requires continuous assessment of reuniting the family and the implementation of measures to promote reuniting the family. (CWA 2007, Sections 30, 54) The United Nations Convention on the Rights of the Child also states that a child's development is best achieved in a family environment, and that the family has the right to receive the necessary protection and assistance in the performance of its responsibilities in society. According to the Convention, parents have the primary responsibility for the child, and the best interests of the child will be their basic concern. (UN 1989, Article 18) Although the Convention on the Rights of the Child has been in effect in Finland since 1991, and the Child Welfare Act since 2008, the opportunities of foster care service providers and placing municipalities to support the family have proved to be quite limited, and, depending on the financial situation of the municipalities concerned, the spirit of the law is not always realised.

At SOS Children's Villages, the objective of cooperating with families as closely as possible is taken seriously, but in the current service framework, active work with families has been a challenge. SOS Children's Village Association Finland has a long history as a provider of publicly supported family based care services. The core of the service is long-term placement, and the focus of the service is on the services needed by the child.

The service selection has been expanded to cover various preventative measures, or open care, in addition to foster care, with family rehabilitation one of the most significant among these. Preventative measures and foster care differ significantly with respect to family unity. During preventative measures, the focus is on the home, interaction between family members and supporting parenthood, whereas when placement of the child begins, the focus shifts from the home to foster care, and the role of family members changes. The parents' involvement in the work is then inevitably reduced. (Pitkänen 2011, 21.) In principle, the starting points and objectives are the same for both preventative measures and placing a child in care. Both interventions are required when the child's safe development and health are considered to be endangered by a reason related to parenthood or the child's daily life. (see Miller & Törrönen, 2010; CWA Sections 34, 40) The objective is always to provide stable circumstances for the child and to protect his or her development. When the objectives for all of the measures are so similar, one wonders why the services offered, namely preventative measures and foster care, are so different.

The active development of preventative measures has led to the discovery of many effective methods to help families, which has raised the question of whether we could do more to also support the families of children placed in care.

The answer to this question is far from simple. When a child is placed in care and removed from family circumstances that may have been chaotic for an extended period of time, and the rehabilitation of the parents appears difficult, the duration of the child's placement can be quite long. The child's attachment to his or her own parents can be insecure. Care must be taken to ensure that the child has the opportunity to form a secure attachment relationship with an adult. In this scenario, the SOS parent assumes a central role and the child is cared for in relation to the SOS parent.

When the problems in the birth family are substantial and the SOS parent has a strong role, how do we facilitate productive work with the family and strengthen the family as a whole? What is the significance to the relationship between the child and the parent, and the unity of the family, of having another parent, an SOS parent, parallel to the birth parent? Can a child form multiple simultaneous attachment relationships? A child placed in care has many meaningful human relationships, the value of which must not be trivialised at any stage of the child's life cycle. As interventions, preventative measures are fairly unequivocal from the perspective of human relationships, as the child's most important attachment relationships are all in one family system. This may not be the case for a child placed in care. For this reason, work with families must be carefully tailored to each child's individual life situation.

Sometimes it turns out that, despite all support measures taken, the child's own family is not the right place for him or her to live, and placement continues until the child reaches independence. Even in these cases, attempts should be made during placement to maintain/ build a relationship between the child and his or her family that provides support when the child starts to become independent. If the parents can be supported in improving their own life circumstances, such as overcoming substance abuse or mental health problems, children can also discover alternatives for their own future and their confidence in their own resources can grow. When implemented on a foundation of good cooperation, foster care can empower the parents and promote their rehabilitation, and their rehabilitation in turn has a positive effect on the child's wellbeing. Optimally, this can achieve a positive spiral that improves the entire family's wellbeing despite the fact that they cannot live together. (Pitkänen 2011, 42; Saarikallio-Torp et al. 2010, 237-238).

During placement it is important for all parties involved to recognise that placement alone, moving the child from one physical location to another, does not resolve the family's problems. What can resolve their problems, however, is what is done to promote the interests of the family during placement. This introduction began with the example of the confusing life situation of a boy named Eero. What has been done to promote the interests of Eero's family? Why must Eero and her mother both live in a state of uncertainty?

## 2 THE STATUS OF THE CHILD AND THE FAMILY IN FINNISH CHILD PROTECTION

Child welfare is an essential component of the basic structures of society. When the family is assumed to be the primary environment for the child to grow and develop in, and the parents have far-reaching responsibility for the child, there must be a system to support those parents whose capacity to bear this responsibility is limited.

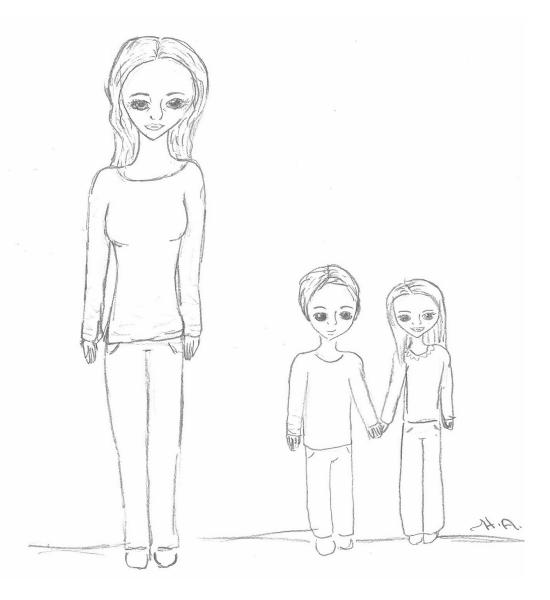
The starting point in Finnish child protection is a child-focused and family-centric approach. Sometimes this means temporary assistance to help with an acute problem, sometimes it means that the family is supported throughout childhood, and, as a last resort, it can mean placing a child in care. Being a customer of child protection services does not mean that the family is socially marginalised. Normal life crises affect many families and there is an obvious need to provide more effectively and at greater scale. (Bardy 2009)

#### 2.1 CHILD PROTECTION SERVICES

Child protection services are roughly divided into preventative measures and foster care services. For some reason, the demand for foster care services has increased considerably over the last decade. This suggests that a growing number of families are in an underprivileged social position. (Saarikallio-Torp et al. 2010, 236) It is difficult to analyse whether the increase in the number of children placed in care after the 1990s recession is a result of cutbacks in basic services, or some other reasons. Regardless, there has been a response to this trend, including the reform of the Child Welfare Act in 2008.

After the introduction of the new Child Welfare Act, efforts have been made to increase the supply of open care services and to offer families tailored open care services well before the need for foster care arises. Both municipal and private sector operators have become active in the field of open care. There is a wide range of services: support families, family support centres, family therapy, family rehabilitation, open care placements, etc. The stronger significance of the family brought about by the new Child Welfare Act is reflected in many ways. The goal of reuniting the family is emphasised more, and the need for foster care is continuously reassessed.

When the focus of child protection services is on the interests of the child, emphasising a family-centric approach is a welcome direction. When parents, with the help of open care services, can experience successes in parenthood, the experiences serve a rehabilitative function for both the parents and the child. Even if the decision at the end of family rehabilitation is to place the child in care, the chances of successful placement are much better after open care services than if no active efforts are made to promote the wellbeing of the family as a whole prior to placing the child in care. (Hyytinen 2009)



#### 2.1.1 Successful aspects of the services

An undeniable advantage of open care services compared to foster care services is that the family can be helped as a whole, and services can be designed to support the entire family rather than its individual members. Open care services are also voluntary for the family, which means that all of the family members may have a different level of motivation to make changes compared to processes involving placing the child in care.

When providing services, it is important to emphasise customer-orientation in services and the engagement of the customer family in its situation. Positive changes occur in positive helper-customer relationships and such a relationship can only be formed when the family members can feel accepted in their present life situation. Self-respect and self-acceptance can be called into question when the family encounters difficulties and it appears that these difficulties cannot be overcome without external assistance. Working with a family that is under such stress requires particular sensitivity to acceptance to help the family also achieve self-acceptance and thereby make positive changes to its situation. When the family's belief in a positive change grows as its self-respect increases, they also build greater potential to achieve the goals they set for themselves. (Pesonen 2006, 155-167)

According to parents, a committed and responsible social worker plays a key role in the success of foster care services. When parents trust that the child's placement process will proceed in a manner that takes the child's best interests into account, they find it easier to accept the placement. Furthermore, parents consider successful placement of the child to play a key role in their own rehabilitation. When they have confidence in the child's foster care place, they can focus on improving their own wellbeing during the child's placement. (Pitkänen 2011) Pursuant to the Child Welfare Act, a client plan must be drawn up for the parent of a child placed in care (CWA, Section 30). The plan describes the parent's life situation, strengths and resources, views with respect to the child, and goals with respect to foster care and keeping in contact with the child. A further aim is to make it clear to the parent what is expected of him or her, and how his or her own rehabilitation will be supported. The plan also sets out multidisciplinary support around the family, i.e. the various parties involved and the division of responsibilities between them. Parents for whom a client plan has been drawn up have perceived it as a positive addition to foster care services. (Pitkänen 2011, 62-63) One challenge in practical work is that many municipalities do not have a foster care worker to provide support to parents and prepare a client plan for them.

#### 2.1.2 Deficiencies in the services

SOS Children's Villages have for long understood the importance to the integrity of the child's identity of the child having a connection to his or her roots. For this reason, our care model has increasingly emphasised maintaining contact with the family, ever since the 1980s. (Pohls 2012, 136-137) However, due to the limited resources available for activating the network of family members and close relatives, improving family interaction and supporting parenthood, much has depended on the extent to which the parents themselves are active and cooperative. This is a challenge faced not only by SOS Children's Villages, but foster care in general. Parents talk about this experience in a study by Miia Pitkänen (2011). The parents' perception is that their role as customers during foster care is unclear, and they do not know what is expected of them. Parents themselves should be able to take the initiative and assume an active role in figuring things out if they want to exercise any influence in the decisions that are made, but this has been difficult for many. In a stressed or crisis-ridden life situation, they may lack the resources to take the initiative. The parents would therefore need the kind of support and guidance that they are currently often left without. Parents then wonder why the intensive work preceding the child's placement in care is dramatically reduced, or terminated altogether, after placement. (Pitkänen 2011, 52-59).

ing from the early stages of preventative measures. Families feel that they do not receive timely assistance. Parents have often asked for help in a situation that has not yet escalated to major distress, but they have not been offered services at that time. Later, once they have become customers of child welfare services, the services offered based on a professional estimate have often been perceived as being forced on them, and putting the blame on the parent. According to the parents, crisis assistance is missing. Missing support in situations when the child is placed in care, in particular, is perceived to be a major problem. In such life situations it is common that problems in many areas of life have become accumulated and the parent's resources for dealing with a new crisis, in the form of the child being placed in care, are limited, as is his or her ability to actively seek assistance or support for him or herself. (Pitkänen 2011, 49-67)

Parents have considerable uncertainty regarding child welfare services and the assistance they could potentially receive from child welfare workers. Parents are not aware of what services are available to them, nor do they know who to ask. They want social workers to be more active with respect to the parents of the child. Of the parents interviewed by Pitkänen, many were under the impression that their issues were not the responsibility of the social worker in question, and some had even been told so in no uncertain terms. Another problem perceived in the cooperation has been frequent changes in social workers, making the social worker just a face in a meeting and preventing the formation of a genuine customer relationship. (Pitkänen 2011)

We assume that similar phenomena also occur in the context of the services provided by SOS Children's Villages. For example, SOS Children's Villages is rarely defined a clear role with respect to family work in negotiations on client plans. Relationships with the families of children placed in care are gradually formed through day-to-day work. The effectiveness of cooperation largely depends on how active and cooperative the parent is, what type of interaction he or she is capable of having with the foster parent, and how much time the social worker or mentor at the SOS Children's Village can spend on building cooperation. SOS Children's Villages also have limited resources, and the first priority is placed on the child's needs, with the needs of the family being secondary in importance.

There are deficiencies in child protection services start-

### **3 SOS CHILDREN'S VILLAGE**

The traditional care model used by SOS Children's Villages has a strong basis in family based care, and this foundation naturally affects the perspective from which the work is approached today. The history of SOS Children's Villages began in Central Europe after the Second World War. An Austrian named Hermann Gmeiner recognised the large number of orphans traumatised by the war and wanted to help them, as he felt that children who lack the security and support of the family are in the most vulnerable position of all. He wanted to find an alternative to institutional care, believing that children benefit when the community that cares for them resembles a family. Based on these ideas, Gmeiner established the first SOS Children's Village in the village of Imst in Tyrol, Austria. (Gmeiner 1982)

Internationalisation began quickly, as war-torn Europe had a tremendous need for arranging care for orphaned children. Gmeiner's ideas were first introduced to Finland by Kaija Laitinen, a student who, with the help of friends, began to spread awareness of the concept from 1961 onwards. The activity was small in scale until Albin Gebhard, a retired Vyborg-based businessman, became interested in it. With his significant support, SOS Children's Village Association, Finland, was founded in 1962 and the first children's village was established in 1966. The operations have since grown to encompass six SOS Children's Villages and one Youth Facility. (Pohls 2011)

After the turn of the century, SOS Children's Villages have developed in a more professional direction. The association now has its own therapists and other experts, and the personnel at its sites are more highly educated than before. Social workers are also an integral part of the personnel at each site. In 2009, the association published the SOS Children's Village Manual to harmonise practices between sites and ensure the consistency of its services.

## 3.1 FAMILY WORK AT SOS CHILDREN'S VILLAGES

In the early stages of the SOS Children's Village movement, the role of the parent was largely played by the SOS mother. The mother had to be a young unmarried woman who was prepared to dedicate herself entirely to caring for the abandoned or orphaned children entrusted to her care. In the early years, there were no SOS fathers, and in the Finnish field of child protection, questions were raised regarding the SOS Children's Village view of the mother being a more significant parent than the father. Critics argued that the operating principles of SOS Children's Village were, in part, too old-fashioned to be applied to Finnish society. (Pohls 2011, 31-35)

Over the decades, the operating principles of SOS Children's Village have frequently changed and adapted in response to the needs of child protection. The work has also become significantly more professional, and the education of employees is now emphasised. In addition to SOS parents and their substitutes, there are now also mentors and social workers. Broader expertise has also facilitated an increase in family work. Since the late 1980s, SOS Children's Village has recognised the significance to the child's wellbeing of work done with the birth family and engaged in conscious efforts to maintain contact between children and their families. (Pohls 2011)

In 1998, SOS Children's Village invested in family work by launching a four-year project titled "Investigating the crisis of a child being placed in care", which was aimed at highlighting the experiences of birth parents and SOS Children's Village employees with respect to cooperation during placement. In a survey conducted during the project, parents described the shock caused by the child being placed in care and their preconceptions regarding family based care. After placement had continued for a longer period of time, some of the parents began to recognise the positive aspects of SOS Children's Village and were happy about their child's wellbeing. However, approximately one third of the parents could never accept the child being placed in care, which naturally had an impact on their children's ability to settle in SOS Children's Village. The most significant wishes expressed by the parents included more frequent meetings with the child and better opportunities for participating in decisions concerning the child. The parents also said they did not receive the support they needed from the authorities or SOS Children's Village personnel to come to terms with their own crisis. The outcomes of the project included development of the child's placement process, documentation and an emphasis on the theme of shared parenthood as well as practical efforts to develop shared parenthood. (Koisti-Auer, no publication year) In interviews with children placed in SOS Children's Villages as part of a thesis by Vanhanen (2009), the children strongly expressed that the SOS parent is a person that is close to the child, valued, and important in daily life. However, the children indicated that their own parents were the "real" parents, with whom they have a very emotional bond. The challenge revealed by the interviews was finding a place for the parent in the child's daily life. There was an obvious conflict between the parent's large significance and small practical role. (Vanhanen 2009, 43-88)

In recent years, the work done with the families of the children has been developed at various sites, taking the provisions of the Child Welfare Act and the principles outlined in the SOS Children's Village Manual into account, but based on the specific circumstances of the site and the individual situation of each family. These development efforts have led to the creation of many good practices. Parents are invited to participate in various events, negotiations and meetings regarding the child. Most children also meet their own parents regularly, either at the parent's home or on the premises of the SOS Children's Village. Family work, family rehabilitation and family camps have also been implemented in individual situations. Family work can mean a mentor's support during a meeting between the child and the parent, conversations between a SOS Children's Village social worker and a parent, and so on. A Beardslee's family intervention has also been implemented for some families. In addition, some of the sites organise various joint events that the parents of the children are also invited to attend.

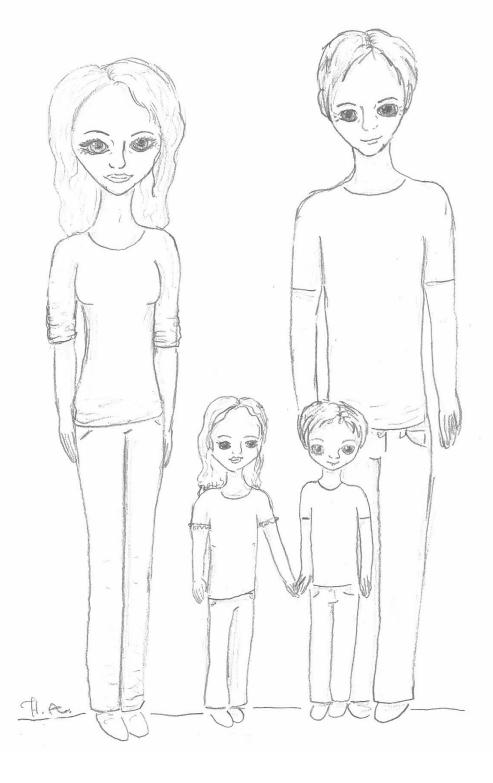
#### 3.2 OPEN CARE SERVICES

In recent years, the trend for many service providers in the field of child protection has been to expand their selection of open care services. Support family services and family rehabilitation, for example, have become important services that can even prevent the placement of the child in care. The aim is to offer support to families with babies, for instance, before the family situation escalates into a crisis. Family rehabilitation as an alternative to placing a baby in care is often a sensible option. (Heino 2009, 52-61)

SOS Children's Villages have also responded to the demand for open care services. The first SOS Children's Villages to provide open care services were the sites in Lapland and Punkaharju. Punkaharju SOS Children's Village was also the first to introduce family rehabilitation in 2010.

Family work and family rehabilitation has since been implemented at the SOS Children's Villages in Vihanti, Lapland, Tampere and Tapiola, as well as the SOS Children's Village Youth Facility. The SOS Children's Village in Kaarina has had the capacity to implement family rehabilitation from the beginning of 2014. In addition to family rehabilitation, all sites provide open care services in the form of family work, support family activities, open care camps and after care.

Providing services at multiple levels is appropriate when the situation of the child and the family is in flux. Despite the provision of open care services, it is possible that the family will have a need for foster care services. After the child is no longer placed in care, there may be a need for after care services. Having the family receive all services from the same organisation supports a long-term approach to the work, prevents the loss of information about the family, and thereby maximises the effectiveness of the assistance given.



#### 4 FAMILY

In order to discuss the family of a child placed in care, we first need to define what we mean by family. Family is formed for each individual based on their experiences, which makes a universal definition difficult, particularly in the case of a child placed in care.

A child placed in care may have many close relationships between an adult and the child, and no-one else can define what the meaning of these relationships is to the child. To the child, relationships with the family and other close persons are therefore not relationships he or she is simply dependent on or the object of. Instead, they are also open to negotiation by the child. As the subject, the child can define who his or her family members are. The child does not need to commit to an emotional relationship between all of these adults. Instead, the child can choose the ones that are the most important to him or her and cherish them as central emotional relationships. (Forsberg 2003, 91-93; Ritala-Koskinen 2003, 121-139)

This naturally does not mean that the child is fully independent in moving between relationships with family members and other close persons. The relationship with the birth parents is irreversible and affects the formation of the child's other emotional relationships throughout life, even if one of the parents is entirely absent from the child's life or the parent has only limited capacity to support the child. All early emotional relationships make the child dependent on their object.

In this report, we discuss the birth family as the child's family, while also recognising the relationships created within the foster family. In the analysis section, we also give children the opportunity to define their own family.

#### 4.1 THE FAMILY AS A SYSTEM

The family is a system comprised of individuals and the dyads and triads formed by them. Assessing the family as a system is useful because influencing one component of the system can achieve a change in the system as a whole. (Rundfors & Wrangsjö 1984; Kaikko & Friis 2009, 79-83)

When evaluating the functionality/dysfunctionality of a family, we must assess both its internal and external

functioning. Matters relevant to the evaluation include coherence, permanence and boundaries.

Coherence refers to the regularity and logic of interaction. Even a family that appears chaotic has coherence. However, coherence does not mean functionality, but rather refers to the characteristics by which the family in question can be identified.

By evaluating permanence, we can determine how the family copes with changes and how it defends its own

coherence. A certain degree of permanence is required for the family to remain together and its members to perceive it as secure. Excessive permanence makes it more difficult to adapt to changes, which is a risk to the family's functionality. A family can only remain stable if it is capable of continuous reorganisation. In providing care and assistance to families, it is important to note the extent to which the family is holding on to its permanence. Particularly when working with the families of children placed in care, change is something that is constantly talked about. The placement of the child in care itself is a tremendous change to the family structure, and all decisions that follow require adaptation.

Boundaries are the third factor that defines the family's existence. A family is an open system and to survive, it must be able to open and close its boundaries as the situation demands. Family members may come and go, but in order to maintain coherence, some boundaries must be drawn for family relationships.

If the family intensely closes its boundaries and has only few close relationships with relatives or friends, there is a risk of fatigue. A well-functioning social network requires commitment and affection from family members and setting boundaries effectively to allow relatives or other close persons within the private area to an appropriate degree. The network of relatives or other close persons can also be a disruptive factor to the family if the network is dysfunctional. In such cases, professional assistance (such as a therapist, social worker or child care worker) can fill gaps in the network. (Rundfors & Wrangsjö 1984, 41-58)

# 4.2 THE FAMILY OF A CHILD PLACED IN CARE AS A SYSTEM

The family of a child placed in foster care is an entity like any other family. However, the internal dynamics of the family involve exceptional characteristics that are affected by multiple factors.

The first factor that burdens such a family is the stress the family experienced before the child is placed in care. There is often more than one such stressor, and they affect multiple subsystems. The stressors accumulate and ultimately lead to neglect of the child's care, which results in the child's placement in foster care. These factors pose a significant hindrance to parenthood and responding to the child's basic needs. They also lead to the build-up of other problems around them. In our culture, we have a certain framework for what adequate or good parenthood means. When a parent strives for this ideal but his or her own problems are substantial, or his or her own lifestyle is far removed from the ideal, daily life becomes exhausting. The parent will constantly bounce between different expectations and roles, making his or her own place in terms of parenthood, the family or the social network difficult to discern. (Väyrynen 2006, 83-87)

When a family is referred to child welfare services and ultimately foster care, it is forced to open its boundaries, possibly against its will. The family can no longer define itself. Instead, its functionality and structure is assessed and regulated externally. The composition of the family may be changed, and the definition of the child's family may be extended to also include a foster family. Parenthood is an intimate matter, and subjecting it to evaluation by outsiders threatens the individual's identity. Self-respect and preserving one's own identity is challenging to a parent who feels labelled by the assistance system. It is typical that the parents' life situation deteriorates after the child is placed in care, with problems accumulating and intensifying, the relationship between the parents potentially breaking up and substance abuse increasing. (Väyrynen 2006, Kähkönen 1994)

After a child is placed in care, parenthood is characterised by sorrow and loss. In addition to feeling like he or she has lost the child, the parent also loses a substantial proportion of his or her self-respect and role as a parent. The parent may feel exposed and judged as an unfit parent, which shatters the concept of his or her parenthood. This feeling may be so crushing that the parent is unable to keep in contact with the child or other loved ones. Rebuilding the parental identity requires strength that the parent often lacks in such challenging circumstances. In particular, if the parent feels labelled, the label can become a self-fulfilling prophecy. The parent begins to see him- or herself through the prism of the problem that led to the child or children being placed in care and to which the parties providing assistance continuously pay attention, leading to the parent identifying herself as a drug mother, for instance. A person's identity formation is a social process. How a person is perceived inevitably affects the choices he or she makes and the life he or she builds. If a person's flaws as a parent and other difficulties are constantly brought up by those meant to help the parent, the problems can grow to become a larger part of the parent's identity than they were to begin with.

The family also faces fears related to drawing boundaries. What will the family become after an outsider assesses its functionality and makes decisions on the extent to which family members are allowed to interact, the physical distance between family members, and so on? (Väyrynen 2006, 87-105; Ojanen 2006, 126-130)

Although a child being placed in care often intensifies the parent's problems and thereby compromises family cohesion, the opposite is also possible. The role of a parent includes many different types of pressure, and the parent must look after the daily needs of the child. When parenthood becomes a burden due to other factors associated with the parent, the other stressors have a negative effect on parenthood and the pressures of parenthood undermine the parent's capacity for rehabilitation. The parent enters a downward spiral that can only be alleviated by the child being placed in care.

Only after the child is placed in care can the parent acknowledge his or her problems and begin the rehabilitation process. The child may be the only meaningful thing in the parent's life, which can make the child a great opportunity for rehabilitation. Many burdened parents have experienced neglect in their own childhood and want to spare their own children from similar experiences. The parent feels guilt for having burdened his or her child, which can feel paralysing and prevent change. However, when channelled correctly, guilt can be a feeling that supports change and the creation of something new. The need to be a good parent is often the most important motivation for rehabilitation for a person recovering from substance abuse, for example. The child gives the parent strength to make changes. This means that when the individuals get space to look after themselves, the family system as a whole can benefit, with the rehabilitation of the larger entity made possible by the rehabilitation of the individuals. (Sariola 2006, 157-163; Ruisniemi 2006, 170-177; Pitkänen 2011, 71-76.)

#### 4.3 THE BIRTH FAMILY

The family is the starting point for all of life's interaction and emotional experiences. It is within the family that a person experiences his or her first emotions, receives a response to these emotions and learns how others respond to interaction he or she initiates and how to interpret the expressed emotions and interaction of others. A family can sometimes drift into a situation in which society must protect the child from the birth family. This may make it seem that the family is not considered a significant environment with respect to the child's development. However, it is important to remember that even a family that is physically dispersed is still a meaningful unit. Whether the parents can look after the child's needs or not does not change the fact that they play a significant role in the child's growth and development.

#### 4.3.1 Early human relationships

The child's first caregivers, usually the biological mother and father, have a large impact on how the child learns to attach to other people throughout life. The very first months of life create the foundation for the child's attachment model. The parent's warmth and touch give the child a sense of security while also affecting his or her hormonal system and self-regulation. Children have temperamental characteristics at birth, and by taking these into consideration, the parent can affect the child's future development. The parent can balance and support the child's temperament or strengthen certain traits. Certain more difficult temperamental traits can make the parent feel hostile or frustrated or want to not give the child attention, which poses the risk of disturbing the attachment relationship. Conversely, when the parent balances the child's emotional states, responds to his or her needs in a timely manner and allows the child's needs, rather than the parent's needs, to guide parenting, the child forms a secure attachment relationship and a strong basic sense of trust that will be beneficial in subsequent human relationships. (Pulkkinen 2002, 16-18)

Many children placed in care exhibit signs of disrupted attachment. When a child is unable to create a healthy attachment relationship with an adult caregiver as described above, he or she has to use any means available to fight for survival. A typical outcome is unselective attachment, meaning that the child will cling to any adult, familiar or unfamiliar. An attachment disorder can also lead to the child being strongly inhibited, which is manifested in the child refusing to make eye contact with an adult or be held or comforted by an adult. Other symptoms include punitive or controlling behaviour towards the adult, self-destructive behaviour, aggression, disobedience, the lack of negotiation skills and hypervigilance. In general, a child suffering from an attachment disorder exhibits symptoms related to emotional development, cognitive development and

In order for the child to form intimate human relationships in the future, repairing the attachment disorder is often one of the most important goals of placement in care. The key during placement is that the child can form permanent human relationships and have trust in the continuity of human relationships. (Kalland 2011) According to Valkonen (1995), even in successful family placement, the risk is that the child's relationship with his or her own parents is severed and the child becomes estranged from them after placement. In such cases, the sense of abandonment can remain a painful issue even into adulthood. (Valkonen 1995) The manner in which the permanence and continuity of human relationships is realised in placing a child in care should be based on an individual assessment of the family situation. This can mean continued placement until adulthood with the birth parents supporting the child's development to the best of their abilities, but it can also mean the child returning to the birth family while the foster parents continue to play a role in his or her life.

#### 4.3.2 Parenthood

The child's need for parental care is quite unequivocal. A baby has comprehensive needs and requires intensive care almost constantly. Needs change as the child grows, but throughout childhood, it is important for the child to have 1-2 primary caregivers/parents to form an attachment with.

In the case of children placed in care, the parents have been unable to respond to all of the child's needs, and some of the parent's responsibilities are transferred to the foster care provider. We will now examine the different types of parenthood and how the placement of a child in care affects how parenthood is realised.

Biological parenthood is naturally the most permanent of all types of parenthood. It also has unquestionably the greatest significance to the child's development, regardless of what the relationship between the child and the parent is like. The parent that first cares for the child, typically the biological parent, has central significance to the development of the child's identity and the manner in which the child internalises the parent. This primary attachment relationship continues even if the external relationship is severed. (Ritala-Koskinen 2003, 130-131) This attachment relationship also acts as a template for what kinds of attachment relationships



the child can form later.

enthood changes drastically for the biological parent.

Psychological parenthood refers to how the child and his or her parents, and foster parents, perceive parenthood. A particularly important question is whom the child has strong emotional bonds with.

The oldest theories on psychological parenthood define the psychological parent as the one that is committed to being responsible for the child's needs, spends time with the child on a daily basis, and shares experiences and intimacy with the child. Permanence and continuity are important in parenthood, which is why the placement of a child into care should also last for an extended period of time and involve a focus on supporting the relationship between the foster parent and the child. (Goldstein et al. 1973)

Vinterhed et al. (1981) have criticised the aforementioned theory for making the assumption that a child placed in care is capable of forgetting the attachment relationship to his or her own parents and forming his or her identity separately from them. The emotional bonds the child has with the first caregivers are always strong, regardless of the quality of the attachment relationship subsequently formed between them. You must take into consideration the child's need to identify with his or her parents, as well as the fact that the development of the child's identity will always occur in relation to his or her parents. When placed in care, children lose a part of themselves and must go through a demanding process of separation and grieving before becoming attached to another caregiver, such as a foster parent. Separation from the parents means fragmentation between the external world and the internal development of the identity, a dissociation of the self. According to Vinterhed et al., psychological parenthood cannot be transferred from one person to another. Even if the child adapts well to life in a foster family and forms strong attachment relationships with the foster parents, the first parent will always hold a special position as the child's parent. (Vinterhed et al. 1981)

This does not mean that the foster parent cannot achieve a position in the child's life where he or she has important responsibilities as a parent, possibly more important than the biological parent. In the life of a child placed in care, the foster parent can be seen as the social parent. In practice, the social parent handles many parental responsibilities. The social parent must be actively involved in the child's daily life, which means that in cases of children placed in care, this aspect of parParenthood is an integral aspect of an individual's identity, which means that part of the identity must then be rebuilt. Our society has fairly clear cultural boundaries within which motherhood and fatherhood should fit. The parents of a child placed in care must therefore ask themselves what the parent's role is when you cannot raise your own child. In order for the child to live in a balanced environment, the parent should be able to share part of his or her social parenthood with the foster parent. The parents interviewed by Pitkänen mainly felt they had been able to accept their new role as a parent. They had been able to give the foster care place space in raising the child and considered the primary responsibility for raising the child to lie where the child spends the majority of his or her time. However, it was important to the interviewed parents that major guidelines with respect to how the child is raised are agreed with the child's own parents. The interviewees also described challenges related to their own rights as parents, and role in the child's life, being narrowed down. Some of the parents felt that foster parents had occasionally crossed the line of what was appropriate for their role, causing offence to the parent. (Ruisniemi 2006, 165-170; Pitkänen 2011, 77-81)

In practice, during foster care it is not necessarily sensible to argue over who is the child's psychological or social parent. What is more important is for the parents and foster parents to find the right way to share parenthood. In optimally effective cooperation, there is room for all concerned to be a parent, and through mutual respect, the parents can find a way to carry out their role as a parent within the limits set by the prevailing circumstances.

However, Pitkänen does point out that the biological parents tend to perceive the concept of "sharing" as problematic in the context of parenthood. Parents do not see parenthood as something that can be shared with another person. Parenthood in relation to the child is private and emotional, and the role of a parent exists parallel to professional foster care. The interviewed parents who had accepted the child's placement in care and realistically understood their own limitations in the role of a parent considered it natural to be a parent in parallel with foster care. The term "parallel parenthood" is therefore appropriate in describing the parents' relationship with the foster parents. (Pitkänen 2011, 88-112)

### **5 PROJECT IMPLEMENTATION**

The development project "Who would help our family? Supporting and reuniting children placed in care and their families" was launched by SOS Children's Village in January 2013. The project investigated the experiences of children placed in care and their parents on interactions with the family and the support provided to the family during the child's placement. The goal of the project is to develop SOS Children's Village's working methods in supporting families during children's placement in care and the reuniting of the family.

A working group was assembled to implement the project, comprised of Anna-Liisa Koisti-Auer, Child Protection Manager at SOS Children's Villages Finland; Hillevi Westman, psychologist; Heli Tiainen, family worker at SOS Children's Village Tapiola; Elisa Muurinen, social worker at SOS Children's Village Tampere; Tarja Merilehti, special-assistance worker at SOS Children's Village Punkaharju; Riina Lahtinen, mentor at the SOS Children's Village Youth Facility; and Suvi Seikkula, special-assistance worker at SOS Children's Village Lapland. The Project Manager was Sonja Vanhanen, social worker at SOS Children's Village Kaarina.

In winter-spring 2013, Vanhanen collected background theories for the project, which were commented on by the working group during the spring. In summer and early autumn 2013, Vanhanen interviewed children that had been placed in SOS Children's Villages and their parents. The material from the interviews was analysed in autumn 2013.

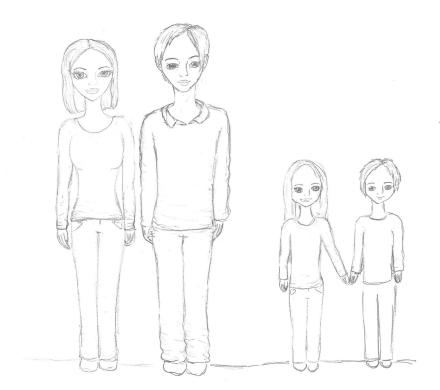
## 5.1 INTERVIEWS WITH CHILDREN AND PARENTS

We decided to collect information on the subject of the study through interviews, as we considered the experiences of individual customers to be the most essential information we needed. The customer's experience can only be reached by meeting and interviewing the customer. In the interviews, we sought answers to the following questions:

- 1. What is the family of the child placed in care like?
  - How has the family changed during the child's placement in care?
- 2. Has SOS Children's Village supported the child's family, and if yes, how?
  - Has parenthood been supported, and if yes, how?
  - Has the potential objective of reuniting the family been taken into consideration, or have efforts been made to make it possible?
- 3. What support measures are needed based on the interview data? How could SOS Children's Villages more effectively support the children's birth families?

The goal of the interviews was to reach the subjective experiences of children and parents, and the stories of their own lives. We allowed the interviewees to generate their stories themselves by asking questions that are as neutral and open as possible, and we aimed to avoid setting a hypothesis for what kinds of stories we expected to hear. The interview frameworks (Appendix 3) were deliberately left quite loose, and the interviewees were, to a certain extent, allowed to take the interview in the direction they wanted. With some interviewees, this led to fairly rambling answers, but the rambling often revealed information that would not have necessarily been reached directly with the questions outlined in the interview framework, which suggests that the chosen method was the right way to conduct the interviews.

When interviewing children, there is the risk that an interview alone produces fairly limited information. To shed more light on the subjects' experiences, two additional tools were used: a network map (Appendix 1) and "Important Things in Life" cards by Pesäpuu ry (Appendix 2). (Perttula & Latomaa 2005, 135-141; Kvale & Brinkmann 2009, 161-162)



The analysis of the data primarily involved finding meanings, identifying recurring themes and focusing on themes highlighted by the interview subjects. We evaluated the experiences of the interview subjects to identify areas that we could influence by adopting new attitudes, allocating increased resources or implementing new working methods.

The opportunity to participate in interviews was offered to families whose child/children were/had previously been placed into care in an SOS Children's Village for at least six months, and the youngest age for an interviewed child was four years. In addition, the entire family had to be available for an interview in August-September 2013.

We found nine families to interview, comprised of a total of 12 parents and 12 children. The children of the interviewed families were /had previously been placed in care at five SOS Children's Villages: Kaarina, Tapiola, Punkaharju, Vihanti and Lapland.

The child/children of eight of the families were still placed in care at the time of the interview, while the children of one family had been returned home. In the case of one of the nine families, only the parents were interviewed. With the other families, one to three children participated in the interviews. The children were 5-14 years of age and the duration of their placement in care ranged from two to ten years. The circumstances behind the families having become customers of child protection services varied considerably, and the families did not share any significant common factors aside from having their children be placed in care in an SOS Children's Village.

This report includes a substantial number of direct quotes from interviews. To protect the interviewees' privacy, their names have been changed and any references to people and places in their answers have been removed or changed. Some quotes have also been modified to eliminate expressions that could reveal the interviewee's local dialect.

The data was collected by Project Manager Sonja Vanhanen through interviews with families at their homes, at SOS Children's Villages or elsewhere, such as in a car. The aim was to first interview the children and parents separately, followed by an interview with the entire family together. Due to insufficient time and other factors, an interview with the entire family was not arranged with five of the families. Finding families interested in participating in the interviews was easy, but some interviews had to be cancelled/ postponed due to challenging life circumstances and time pressures. In the interviews themselves, the families that participated were motivated and openly described their family's situation and their own experiences. For many of the children, the interview situation was clearly exciting, but most of them were able to relax during the interview and talk about their families in a very lively manner. The families were aware that the interviews can influence the services provided to families by SOS Children's Village, and many of the parents pointed out that this was why they considered it important to participate. The interviewees were not shy to express criticism towards SOS Children's Villages despite knowing that the interviewer represents the same organisation.

#### **5.2 DEVELOPMENT PERSPECTIVE**

The cornerstones of SOS Children's Village are the association's values and customer focus. The association is committed to developing its operations in innovative ways and, where necessary, questioning its operating models to better respond to its customers' needs. (SOS Children's Village Manual 2009, 6)

The objective of the development project is not simply to produce research on the subject matter, but rather, the primary purpose is to develop SOS Children's Village's services and harmonise operating processes to ensure consistency in the provision of services across sites. Despite the practical orientation of the study, the project is built on research-based theories and previous research on the subject. The theoretical background is an integral part of the project, as it provides a foundation for justifying and understanding development areas. (Engeström 1996; Jalava & Virtanen 1996)

In the early stage of the work, the focus is on our customers, meaning the families whose needs our services are currently catered towards. The information we collect from the families is highly relevant to our assessment of the effectiveness of our existing operating models. After analysing the data, we will proceed to the actual development stage, involving changes to our service structure to better meet the needs of families and the requirements of contemporary child protection. Development activities are an essential part of the operations of an effective and up-to-date organisation. While traditions are important, and even given special emphasis in our specific context, they must not stand in the way of the development of new operating methods.

In development activities, it is important to understand what is being developed. Social work always involves human interaction, and the work involves many ideals and beliefs that an organisation must have the courage to question and critically examine when engaging in development efforts. As such, the aim is not to develop a simple operating method or service component. Instead, the development work ultimately concerns something bigger. The aim is to create beliefs that can provide new and positive structure to those who work with the families. A common challenge in development activities is resistance to change. Work communities typically believe that the existing operating method is effective, and adapting to changes requires courage and the willingness to leave one's comfort zone.

For this reason, it is essential for effective development efforts to use a "bottom-up" approach. This means that the work is not directed by experts or the human resource management function. Instead, the persons who perform the practical work actively influence the development efforts, which creates motivation for initiating and maintaining change. (Seppänen-Järvelä1999, 59-71; Jalava & Virtanen 1996; Ruohotie 1997, 14)

The task of the project working group assembled from different SOS Children's Village sites is to facilitate change by presenting new innovations and different ways of thinking and operating. Our hope is that this report contributes to an increased understanding among those who work with children placed in care and their families, thereby influencing the staff members' attitudes, values and thinking.

### 6 WHAT DID THE INTERVIEWEES SAY?

We begin the analysis of the data by examining the views of the interviewed children regarding what human relationships are meaningful to them, and by describing the role of the children's families during placement in care.

This will be followed by a discussion of parenthood and the opportunities and challenges related to realising parenthood during the child's placement in care.

Then, we will examine the family as a whole and determine how the child's placement in care has affected family unity from the interviewed families' perspective.

Finally, we will analyse what, in light of the interview data, are the core issues that SOS Children's Village sites as foster care locations should focus on.

#### 6.1 THE FAMILY AND MEANINGFUL HUMAN RELATIONSHIPS OF THE CHILD PLACED IN CARE

The children's views of their own family were approached with the help of a network map (Appendix 1) and "Important Things in Life" cards by Pesäpuu ry (Appendix 2). The children took to these tools easily and provided diverse and colourful descriptions of the human relationships in their lives.

There were a total of 12 network maps. The number of people on the network maps ranged from four to 34.

The children were instructed to start drawing up the network map from the people that are closest to them. All but one of the children first marked their biological mother on the map, and most of them also put in their father. Mothers and fathers were the people closest to the children on all of the maps. After the parents, the children added their siblings, typically also very close to themselves on the map. The children did not indicate that they felt grown apart from their parents during foster care, but they did feel they grew apart from siblings who were placed in care elsewhere, lived with the parents, or were already of adult age, if there was not much contact with the siblings in question.

The children talked about their lives using the network maps and the "Important Things in Life" cards as follows:

"SV: Okay. You chose the card that says family. Did you choose it because it says 'family', or was it because of the picture on it?

*Tiina: the picture (picture shows a family seated around a dining table)* 

SV: Okay. What about the picture struck you as im-

#### portant?

*Tiina: I don't know. It has a nice thing going on, you know.* 

SV: Mm. What's nice about it?

Tiina: You know, 'cause it shows a family.

[...]

*SV:* Okay. Then you chose the card that says mum. Was that because of the picture too, or what were your thoughts on that one?

Tiina: Well, I'd say mum is important to me."

"SV: Can you explain why you chose that one (family card)

Mikko: Family is the most important thing of all! You know, it's fun to be with family and... family is the most important thing of all.

*SV:* Yeah. And then you chose... well, we pretty much have your family members here (other cards chosen)

Mikko: Sister (card) is important, really important, then there's play (card). Sometimes, there's this exciting climbing frame, it's really huge, I mean massive. So yeah, I like playing on it. My sister also comes and climbs with us sometimes and that's kind of fun.

SV: Do your parents play with you too?

Mikko: Sometimes they do. Like my dad, for example, we've had pillow fights. When he was here (SOS Children's Village meeting room), we had a pillow fight. I wasn't sleepy, I threw a pillow at him, and then we had a pillow fight.

*SV: Okay. That's nice, sounds like you have a fun family. What about encouragement (card), what does that mean?* 

Mikko: Well, when dad was teaching my sister to swim, we had to give her encouragement. Encouragement is important, you know, you got to tell 'em you can do it, you've got this, go on. You give that kind of encouragement. That's important." "Matti: I'll take five (cards). There's a lot of things that are important to our family. (...) So, I've got love, mum, dad, brother and sister.

[...]

SV: Can you say why you chose the one that says 'love'?

Matti: Because my dad never wants be apart from me and he'll always love me.

*SV: Okay. So you and your dad have a really good relationship.* 

Matti: Uh-huh. And the same with mum. And then I chose brother because I have a baby brother, he's almost one, I like him, he can walk pretty well already. He's adorable."

"Eero: The most important (cards) are play, mum, dad, health and of course limits. I mean, all of these are important, but I chose the most important ones.

*SV: Sure, we'll start with these. So what do you mean by 'play'?* 

*Eero: Well, you know, everyone at that house is playful. It's just so much fun to play there. It's such a nice place.* 

*SV: I see. What kinds of games do you play there, at mum's house?* 

*Eero: We play catch with my little sister, even though she's like a thousand times faster. But it's fun to try to catch her.*"

The members of the biological family formed the most central section of the children's networks. After family members, the network maps grew more diverse, with many children putting in their friends, while others added relatives. Four of the children marked relatives in the same sector as their own family. In total, ten of the network maps featured relatives that are not part of the immediate family, and the children described relatives as being close to them. Eight of the network maps featured friends. SOS Children's Village personnel were typically added to the map towards the end. Seven children stated their map was complete before any SOS Children's Village personnel had been marked on it. The interviewer then asked these children specifically whether there were any people in the SOS Children's Village that were important to them. One of the children indicated an SOS parent in the sector "family members". The child in question marked the SOS parent on the map right at the beginning of the exercise, which set this particular subject apart from all of the others. Seven children marked an SOS parent in the sector "Other close people". Four children did not mark an SOS parent on the map at all. Some of the children indicated that a substitute foster parent or SOS Children's Village mentor was close to them. Two children marked an SOS Children's Village staff member other than the SOS parent on the map.

The children described the SOS Children's Village staff members' placement on their networks as follows:

"SV: Well, what about the people at SOS Children's Village? Do they fit on the map?

[Tytti shakes her head]

SV: They don't?

Tytti: No.

*SV: Okay. Can you say what the reason is why they are not there?* 

*Tytti: Well, they don't, I don't want to, I don't know.* 

*SV: Okay. But you've been here for four years, right, haven't they become close to you at all?* 

*Tytti: Maybe a mentor, here on the outskirts [Tytti draws one mentor]* 

*SV: Okay. Is there a reason why the SOS parents aren't on the map?* 

*Tytti: Well, I don't like them. I don't know. I don't like living here. In this village, I mean. Or this home.* 

"SV: Okay. How about this village here, are there any adults here that are close to you?

Joni: Well, there's the SOS parent (Joni draws on the network map in the sector "Other close people")

*H: Yeah. So the SOS parent is part of the other close people, and not a family member, for example?* 

Joni: I guess."

#### 6.1.1 Parents

The parents clearly held a special position in the children's networks. The parents were perceived as the most important people in the children's lives even when they had been absent for long periods of time, or deceased. The children were asked to browse the "Important Things in Life" cards and pick out the ones that are important to their families, and the majority of the children picked out the cards depicting father and mother. The children's statements concerning their own parents were characterised by warmth and, in some of the interviews, a sense of longing. Many children considered the only downside of their own family to be the fact that they do not get to meet their parents more often, or live with them. One of the children wished that the parents could move to the SOS Children's Village to make it easier to keep in contact.

"SV: Okay. Is there anything you'd like to do with your parents but can't because you're here at SOS Children's Village?

Miska: It's just so annoying that I never get to move to mum's and dad's house.

[...]

Miska: Guess what? After one year, guess what?

SV: What?

Miska: It's pretty cool. I get to spend a night in the children's village meeting room with mum."

The children's relationships with their parents were also examined through the concept of home. The majority of the children perceived home to be where their own parents are, although some also perceived SOS Children's Village as home. "SV: So, Anna, do you feel like you are home when you are here (at the parents' house)?

Anna: Well, yeah, I don't consider SOS Children's Village to be a home. It doesn't feel like home at all.

SV: What makes it not feel like home?

Anna: There's other people there, my parents aren't there. So you're living with some random people."

"SV: Do you feel like you are visiting someone else's home when you go to your mum's house?

*Eero:* No. I go home. No doubt about it, that's when I go home. I'd say that this (SOS Children's Village) is the village and mum's house is my home.

SV: So that's how you see it.

Eero: Yeah.

SV: This place doesn't feel much like home?

*Eero: Well, it does feel like home, but to me, this feels like the village where I spend almost every night, and then mum's place, mum's house, is my home."* 

#### 6.2 PARENTHOOD

## 6.2.1 Parenthood in the early stage of placement

The early stage of placement in care was described as a very vulnerable stage with respect to the family and parenthood, particularly in the interviews with parents. The insufficiency, superficiality or failure of cooperation between SOS Children's Village and the parents left a strong imprint in the minds of the parents, and forming a cooperative relationship later was difficult. One family describes its experiences at the time when their child was transferred from the reception home to SOS Children's Village.

"Mauri: They removed the parents entirely from the picture (...) It is completely senseless. Are they trying to alienate the child from the parents or something?

Anna: Yeah. It is kind of strange, you don't get to see

(your parents) until like a month later.

*SV:* Yeah. Well, Anna, do you still remember how it felt when first your parents had been able to visit you every day (at the reception home) and then there was this long break?

Anna: It felt pretty odd.

SV: Did anyone explain to you why this was done?

Anna: I can't remember. I just went there, and then I was there. I don't know, I don't think anyone explained anything to me."

In the worst cases, the experiences of SOS Children's Village based on the first visit were intimidating and the parents felt their parenthood had been nullified. The parents quoted below said working with the SOS Children's Village was very difficult for the first six months, after which mutual trust began to grow. The parents nevertheless bemoaned the fact that the children had to live in a very conflicted situation to begin with:

"Tuuli: Our first visit was actually when we took our children there, we were driven there in a car with them, and nobody introduced us to anyone, you know. That was really quite awful.

SV: So nobody talked to you on the phone prior to this?

Tuuli: That's right, nobody did. And nobody introduced us to anyone. The social workers and the SOS parent talked to each other, but nobody said a word to us. We were a little, you know... we were just there, with the kids.

#### [...]

Tuuli: What was really awful at first was when we were out in the yard, and there were other SOS parents and children there, but nobody spoke to us at all. We were like, okay, guess we aren't welcome here (...) We felt like nobody was even saying hello, nothing at all. It made us feel like we were looked at as monsters or something. I actually said I don't want to go there again, that's how bad it was..."

Many interviewed parents indicated they felt like they were left alone when their child was placed in care. They felt the weight of great expectations on themselves in a situation where they were still processing their own crisis. For a person in a crisis, receiving instructions and cooperating with others can be difficult. Many of the parents said the practices of SOS Children's Village were difficult to understand, and that they had trouble finding their role as the parent of a child placed in care. They found it difficult to piece together what was expected of the parent and what boundaries were set for his or her role.

"Mia: I can't remember it very well, but I do recall that I did not accept it (SOS Children's Village) at all at first, being in pretty bad shape myself. It was all so new, having to give up the kids and all, so I didn't really... These days it's different. It feels a little funny just to think back to how I felt then.

SV: Do you remember who received you on those first visits? Who did you talk to?

Mia: I think it was the SOS parent. At first I didn't even understand the thing about phone call days. It was strange to me somehow. Later, I saw some documents stating that they were unable to reach the mother, but it's not that I didn't want to be reached, I just didn't understand how it worked. It was all quite confusing."

One challenging aspect in the early stage of placement in care was the rapid changes to the family boundaries, and adapting to these boundaries being opened. When a child is placed in care, the family quickly faces a situation where it is very difficult for it to draw its own boundaries. The families indicated it is difficult to determine what boundaries are defined externally and what aspects the family can still decide on its own. This was highlighted as particularly difficult in situations where the parents in the early stages had not accepted the child being placed in care. One key challenge to the parent was understanding and accepting the SOS parent's role in the child's life. The SOS parent is a person that the family has not voluntarily chosen as part of its own network. If constructive cooperation between the parent and the SOS parent fails to form, it was difficult for the parents to accept the SOS parent as part of the child's family or immediate social network. (Rundfors & Wrangsjö 1984)

The interviewees also recounted many positive experiences from the early stages of placement. These experiences had a long-lasting impact and gave the parents a sense of achievement. They allowed them to feel valuable as the child's parents, which was a new experience to some of the interviewees.

" SV: Did you feel welcome, or was it difficult to come here?

Maisa: I did feel welcome. It was really nice to come here. I first spoke with these people on the phone several times and, well, that person doesn't work here anymore, but the previous Village Manager was a really nice person. I had many phone conversations with that person. It's been really nice, you know, everything's always gone well with the people who work here, I've received information about the children and such, right from the start."

Below is a summary of the themes highlighted by the interviewees in relation to the early stage of placement.

- SOS Children's Village staff getting to know the parent before the child's placement in care begins
- Interacting in a manner that makes the parent feel valued
- Organising meetings without fuss, valuing the time the family spends together
- Staff keeping close contact with the parents in the early stage of the child's placement in care

- Expectations
- First meetings with staff feel oppressive/frightening
- Lack of clarity about the parent's role
- Unclear understanding of SOS Children's Village's practices
- Lack of support for processing the parent's crisis
- Low degree of contact with the child
- Children's perceptions of being abandoned

#### 6.2.2 Parenthood as placement continues

Many of the interviewed parents said it was difficult to rebuild the parental identity as a parent of a child placed in care. Both the children and the parents, practically across the board, indicated that the birth parent maintains the position as the psychological parent. As mentioned in the previous section, in the interviews with the children, the parents were characterised as the primary objects of attachment and fondness, as the people the children identified themselves with, as the "real" parents.

"SV: So who are the closest people to you?

Eero: Mum.

*SV: Okay. How close (to the centre of the network map) do we put her?* 

Eero: Let's put her somewhere in here.

SV: And who else is there?

Eero: My dad. He passed away."

"SV: What does this mean, who picked this one ("encouragement" card)?

Mikko: I did. Encouragement is always important. Mum and dad always encourage me to take up hobbies and stick with them, and about school, they encourage me to keep up the good work. (...) and they always care for me ("caring" card)."

The preservation of psychological parenthood was reflected in the language used by both the children and the parents when discussing parenthood. None of the children called the SOS parent mum/dad or foster mum/ foster dad. The terms used by the children were "the adult in the house", "the caregiver", or they referred to the SOS parent by first name. The parents also called the SOS parents by their first names and found it difficult to define their parenthood. The terms used included "the mother in the house" and "the person the child spends the most time with". One of the interviewed mothers said she did not know what she would do if the child began to call the SOS parent "mum". parents themselves, or what they would be like as parents if they were allowed to spend more time with their children. They described their strengths and weaknesses as parents in great detail and spoke at length about what they feel are important goals in raising a child. All of the parents bemoaned the fact that fulfilling their role as a parent was made more difficult in many ways due to the limited amount of time they get to spend with the child.

"SV: You specifically mentioned "notices things" as one of your strengths as a parent. What did you mean by that?

Pirjo: I meant giving children encouragement when they do something right. You know, if they take some cream from the fridge and then put the lid back on, I say 'Well done. It's good that you put the lid back on, so the cream won't get spilled' (...) You know, little things, kids really remember them. (...) It boosts their self-confidence, like 'Yeah I did it!'"

"Emma: First I have to grow and mature as a person myself, much more, so I don't feel bad about saying no, or if the child feels bad no matter how consistently you apply the rules, that's difficult for me. (...) So I should grow mentally some more, become a stronger person. That kind of thing has an impact on the child. That's a certain weakness that I have."

The parents felt that no-one had particularly helped them in processing the change in parenthood due to the child being placed in care, but most of them had themselves found ways to adapt to the situation. Many said they had made efforts to rehabilitate themselves. Their own rehabilitation and understanding their own situation was connected to accepting the child's placement in care and the new role as a parent.

The roles were accepted to some extent, not accepted to some. Some of the interviewed parents said they had grown accustomed to things that they, in reality, wanted to be different and could not accept, such as spending Christmas apart from the children, or having only minor participation in the child's schooling.

"SV: So what did you agree on about next Christmas?

The parents had clear ideas on what they are like as

Anne: Well, my child will come the same time as before.

#### SV: So your child will spend Christmas Eve there again?

Anne: Yeah, I thought that's the way it has to be, so I didn't even suggest otherwise."

"Mia: I'm a little (annoyed), but I guess in a way you are so used to it, you know, the SOS parent taking care of those things. It's so hard to get involved in it anymore. It does annoy me."

The change in the role of the parent appears to often involve a fear of being labelled. The parents felt that this label is created automatically when the child is taken into care, and they have a strong fear of any experiences that are perceived to strengthen this label. The parents only described incidental experiences of how this label had been strengthened in practice, and it seemed that the label primarily existed in the parents' own minds, and the content of the label was largely constructed based on what the parents themselves thought of the parents of children placed in care. In this light, support for the parents in processing their own crisis appears to have been insufficient, and the parents have had to form a concept of their own parenthood based on beliefs and fears.

"Emma: I wish they'd understand that our case is not a normal case, you know, somehow you are so afraid of how other people look at you, whether they wonder what that parent has done, is she an alcoholic or a drug addict, or why is her child here. That's one thing you become scared of, and there's this anger and bitterness in the background, because I'm neither an alcoholic nor a drug addict, yet this is the situation I am in. (...) You know, that they put me in the same category as the parents with whom it is impossible to have any kind of cooperation with, for example. We've even talked about that, they've said they appreciate that I can cooperate, because not everyone can.

*SV: I see. At SOS Children's Village, have you ever had the feeling that you are labelled (as the parent of a child placed in care)?* 

*Emma: Yeah, I have. You can't help but feel that way.* 

*SV*: Yeah. Is that because of something someone said, or is it just how you feel yourself?

Emma: I'm sure they are used to it all in their line of work, there's children coming here from all kinds of circumstances. But the way I see it, it's really just the idea of someone thinking about you, it's too much for me."

#### 6.2.2.1 The parent as a part of the child's daily life

In the interviews with the parents, parenthood was discussed with the help of a role map of parenthood, which led to many of the parents highlighting the role of the social parent (Vinterhed et al., 1981). Performing this role was perceived as important, and many interviewees said they hope to perform it to a greater extent. In foster care traditionally, a large part of social parenthood is transferred to the foster parent/SOS parent. Some of the parents said they have grown accustomed to the SOS parent handling the child's day-to-day things. Nevertheless, the parents hoped they could do more, thereby questioning this traditional structure.

Many of the parents already have the opportunity to participate in negotiations and meetings regarding the child; for example, in matters concerning physical and mental health care. Problems highlighted by the interviewees included the parent's minor role in matters related to the child's schooling and daily routines such as preparing food, getting dressed and maintaining a daily rhythm. The children also expressed wishes of sharing daily routines, such as having parents participate in their hobbies. One of the children indicated a wish to go to school in the city the birth parent lives in.

"Mia: Well, my middle child goes to therapy, so just yesterday we had a meeting that I participated in. So I have been involved to some extent.

*SV:* Yeah. What about school stuff? Have you met any teachers or anything like that?

Mia: Very infrequently. I think I met a teacher just once, in passing. I can't even remember which kid's teacher it was. I think if there had been involvement in school stuff right from the start, then it would be easier. I don't know. I'm pretty much out of the picture when it comes to this stuff."

The parents who only had the opportunity to spend a few hours at a time with their children considered social parenthood to be almost impossible for them, and were highly critical of the visitation arrangements. They hoped the visits would involve more opportunities to do ordinary things, such as play out in the yard, have breakfast together, visit relatives, and just be together.

The parents who felt they had the opportunity to be the social parent were very grateful for it. Parents who participated in meetings concerning the child considered it important to be involved in deciding on matters that affect their child. One of the interviewed parents was pleased that she had been able to agree with the SOS parent that she could buy the child the pair of trainers the child needed, with the SOS parent paying the parent the cost of the shoes from the SOS Children's Village's housekeeping funds. Preparing food for the child was highlighted as important, as was teaching day-to-day skills.

"Emma: Doctor's appointments, for example. There's been a larger group, you know, the doctor and a social worker from SOS Children's Village, and the SOS parent, and also the home nursing care service has been involved. My self-confidence has never been that good, so that kind of thing strengthens my sense of self as a parent. (...) Just now that Eero was transferred to SOS Children's Village. I'm included much more clearly as a mother than I previously was."

The parents' responses concerning social parenthood are summarised below.

- The opportunity to participate in meetings/negotiations concerning the child
- The opportunity to engage in dayto-day routine parenthood: prepare meals, buy clothes
- Joint decision-making with the SOS parent, even regarding minor issues
- The feeling that someone else is teaching your child routine life skills
- No opportunity to participate in the child's daily routines / meeting times being too short
- Low degree of participation in the child's school/hobbies

#### 6.2.2.2 Parallel parenthood

The success or failure of parallel parenthood (Pitkänen 2011, 88-90) was highlighted in all of the interviews with parents. In situations where the parents felt they had been respected as parents, they were able to trust the SOS parent and their own role of the parent was characterised as quite clear and accepted.

"Maria: When the boys came here, I noticed the difference in how the parent was treated. I was treated as their mother and with the dignity I deserve. I was considered an important person and I felt very important to my boys. I loved that I could spend our first full day here with the boys. The boys spent the night in the same place with me, which is something me and my boys had not had the opportunity to do for a couple of years.

#### [...]

*SV:* Can you explain what gave you that feeling of being valued as a mother and seen as someone important?

Maria: I don't know where it came from. The meetings were well organised, we got to be under the same roof, just us. That gave me the feeling that I am their mother and I get to be with my children. There was no-one else there, I was trusted, that felt good."

The mother quoted above, Maria, and the father of the children, Markus, said the cooperation with the SOS parent felt natural to them right from the beginning. In a separate interview, their child also stated that the SOS parent sees the birth parents as friends. The parents did wonder about some of the practices at the SOS Children's Village, such as the limits set for the children, but they said the staff are so professional and skilled that they trusted that they would make the right decisions. Mutual trust, the SOS parent's appreciative attitude towards the parents and the parents' appreciative attitude towards the SOS parent were key factors behind the success of the placement in question.

Another concrete example of successful parallel parenthood involved Christmas shopping.

"Tuuli: I know that when kids are placed in care, they are bought things and so on. Of course, it's nice to create a home-like feeling and all that. But we made it very clear to the SOS parent that we don't want expensive presents bought for our kids. We knew that we'd be getting the kids back home (there were plans to have the children return home), and we wouldn't have that kind of money to spend. (...) So the SOS parent checked with us before every birthday and Christmas. We decided together what presents would be bought. What the SOS parent would buy, and..."

In situations where parallel parenthood felt difficult for the parent, the children's interviews also described their difficult position between the parents and the SOS parents.

"Pirjo: I have a different world view than the SOS parents. How the kids have been raised, what they've been told about morals, the world, life, love, God. That's completely different. The SOS parents don't even understand those things. The things my kids have been raised with."

Pirjo shared several examples of situations in which communication between the SOS parents and herself was minimal, and the two parties did not have a sufficient understanding of the other's way of acting or thinking. The mother's values and world view were strongly in conflict with those of the SOS parents, which made the successful placement of the children very challenging. Pirjo's daughter describes her view of the situation:

"SV: In your opinion, have the adults ever tried to make an effort to get along better?

Tytti: A long time ago.

*SV: But not lately?* 

Tytti: No.

SV: What did they do back then?

*Tytti: They tried to talk and stuff, but it always turned into a shouting match.* 

SV: Okay. And there's not much discussion these days?

Tytti: Yeah, because they never meet."

Tytti's story about her placement in care is sad specifically because the SOS parents and her own mother could not find a way to share parenthood or act as parallel parents. Without also interviewing the SOS parents, we cannot determine what the reasons were behind the unsuccessful cooperation. What we do know, however, is what the consequences of unsuccessful cooperation are. In this case, it has led to the child's parent having a prolonged crisis with her own parenthood, difficulties in finding a way to act as a parent during placement, and trouble accepting her child's placement in care. The child describes her challenges, which include difficulties in accepting the placement and the foster care place, as well as difficulties in forming an attachment with

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or trusting her adult caregivers. The relationship with the mother comes across as solid and strong, although it also involves certain challenges.

This case is the strongest example in the interview data of problems created by unsuccessful parallel parenthood, but similar examples were also highlighted by other interviewed families.

The families' experiences concerning the success or failure of parallel parenthood are summarised below.

- The parent's trust in the SOS parent
- SOS Children's Village staff have time to talk with the parent
- The child feels that the SOS parent and his or her own parent accept each other
- Agreeing on things together

- Low degree of communication, or communication being intermittent
- The parent and SOS parent meeting only rarely
- Differences in world view between the parent and the SOS parent
- The parent's perception of being offended with regard to his or her own parenthood

#### 6.2.2.3 Being heard

The parents shared many of their experiences related to their position as customers of child protection services. The parents typically felt that their opinions held little weight in matters such as client plan negotiations. They also perceived their opportunities of influencing the child's placement process as minimal. The parents frequently indicated that they are able to participate in discussions and express their opinions, but their opinions do not ultimately matter. Criticism concerning the opportunities for being heard were expressed both towards the SOS Children's Village and towards the social worker responsible for the child's case. "Pauli: Sure, we get to speak our mind, but I think they've got all the basic things already settled. I don't think they can be changed even if they are open for discussion.

#### [...]

Riitta: It feels like these people are talking to each other, and we are just two outsiders there, listening to the discussion. (...) So many times I've left those meetings in a huff. Sometimes I feel like I don't want to go back there again." "Maria: I've often felt like I have to give up, that my opinion holds little weight in the big decisions."

"Tuuli: So we went for this chat. They speak in these terms that you use, you know. Not the kind of language a normal person can understand...

Vesa: I felt like I didn't understand everything that was going on. They'd ask you questions, but it kind of felt like they were trick questions. We had to think about what those words would mean in the language we use.

*Tuuli: They didn't speak the language of parenthood. They use this really formal language.*"

"Pirjo: The last meeting was a total disaster. To achieve anything I feel like I have to shout, use coercion and basically make myself an idiot. It's like okay, you can have that, but just go away and stop shouting. Don't speak like that anymore, don't be like that, don't aggravate people. Don't do all that and okay, you can have what you want."

The challenge perceived by the parents in the negotiation situations was that the other participants in the negotiation spoke "the same language", which put the parent on an unequal footing by comparison. The parents also indicated that the authorities did not consider their way of expressing their opinions appropriate, and therefore did not take the parent's message seriously. The parents seemed to hold the view that a family should fit in a certain mold, and fitting in that mold was difficult for them. Many of the interviewees indicated that they thought about not even going to the negotiations anymore because they felt uncomfortable with their role in those situations. Not being heard is also demoralising to the extent that the parents do not always have the energy to keep trying. Some of the children also described similar experiences of interview situations.

The interviewees also included families that felt like they had been heard. Commonly, the experience of being heard seemed to be linked to the SOS Children's Village staff (typically the SOS parent and social worker) and the social worker responsible for the child's case being perceived as people who genuinely tried to help the family and shared the parent's view of what is in the best interests of the child.

The families' responses concerning being heard are summarised below.

- The parent's opportunity to participate in meetings concerning the child
- Trust in SOS Children's Village
- Trust-based relationship with the SOS parent
- Shared view of the best interests of the child
- The perception of being an outsider in one's customer relationship
- In negotiations, the perception of not being in an equal position
- Being allowed to state your opinions, but not having any real influence
- Different language, different way of expressing oneself

#### 6.3 PRESERVING THE FAMILY

The families had diverse experiences of how the child's placement in care affected relationships between family members. The most typical experience was that the placement had a relatively small effect on the family. Both the children and the parents felt they remained close with each other and they found it difficult to describe what had changed about their relationship after placement in care.

However, some of the families felt that the family members had been driven apart and had fears about whether the family can ever feel cohesive again if the child's placement lasts for a long time. The parents felt that the child changes when they cannot raise him or her themselves, and felt that their home was a separate part of the child's world. The parents felt sad if the child felt like a guest when visiting his or her parents. This was the reason for many of the families hoping for long meetings, specifically at the parents' home. They felt that this was a way for the family to build unity.

Another category was formed by families that felt the family members had grown closer during the child's placement in care. One mother said the placement had given each family member space to become integrated, and both the mother in relation to each of the children, and the siblings in relation to each other, had found a new connection, leading to the family being more functional than before.

"SV: So, Anna, at any stage of placement, have you felt like your parents are distant?

Anna: Yeah, at least early on. It kind of felt like my parents were abandoning me. Abandoning me somewhere else, that's how it felt when I went there.

H: Okay. Has the way you felt changed since then?

Anna: It has, now that I get to meet my parents regularly.

[...]

*SV*: So, if in the early days you didn't see each other much, and now you meet more often, does that mean you've kind of rebuilt (the connection)?

Mauri: Kind of, yeah.

SV: Does the family feel cohesive to you now? Do you

#### feel like a family?

Mauri: It's still a little broken. I don't think it'll be restored, you know, if our child is not returned home, it won't get back to the way it was.

"Emma: That (when the child comes home) is when you realise how normal life feels. That's when everything is like it should be. (...) Somehow everything is back to normal, your own state of mind, your mood. It's all completely different."

All of the interviewed families highlighted the need to maintain the family's own culture and coherence. This was perceived as difficult and it caused frustration and distress to both the children and the parents.

One major theme was spending holidays and birthdays. Some of the families said the structures for how families keep in touch were so inflexible that the family could not spend birthdays together, for example. Christmas was highlighted the most out of the annual holidays. All of the families considered it difficult that SOS Children's Village hopes that children spend Christmas Eve at the village. Many of the interviewed families had their own Christmas traditions, and even the ones who did not have any special traditions considered it important for the family to spend Christmas Eve together. The families felt it is strange that spending Christmas was based on SOS Children's Village's established practice rather than assessed on the basis of the family's individual situation.

"SV: What's the reason for you not being able to spend Christmas with the children? Have you talked about it?

Mia: I feel like we haven't talked about it. I guess early on, when the kids came here, they said that Christmas is like a quiet and peaceful time. I've never brought it up myself. I mean, I understand it in a way, but it's something that I haven't entirely accepted. [...] I mean, in my opinion it's not normal. That you don't get to spend Christmas with your kids. (Mia starts to cry)"

"SV: Yeah. So what were the reasons given to you? Why is your child there for Christmas Eve?

Pauli: Well, they didn't really give any reasons. They told us that's their established practice.

SV: So did you voice your own opinion on the matter?

Pauli: Yeah.

SV: How was it received?

Pauli: Well, Olli came by that Christmas. That's the concession they gave us, that I got to pick up Olli from the SOS Children's Village in the morning and took him back in the afternoon.

- Each family member's individual rehabilitation has improved the relationships between family members
- As the parent/parents have time for their own rehabilitation, their ability to interact with the children is improved
- Placement in care has only a minor impact on the unity and coherence of the family

*Riitta: I made my opinion felt loud and clear, so then they allowed him to come.*"

The families' responses concerning the preservation of the family are summarised below.

- The family feels broken
- The fear of the family's unity and coherence being lost if placement in care lasts a long time
- The lack of a shared day-to-day life causes a sense of growing apart
- The family being defined by outsiders
- Difficulties in maintaining family culture/customs/traditions
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### 6.3.1 The boundaries of the family

The boundaries of the family (Rundfors & Wrangsjö 1984) change dramatically when a child is in foster care. The family finds itself in a situation where external forces play a strong role in defining the form the family will exist in and who belongs in it. Some of the interviewed families felt uneasy about the family's affairs being intervened in.

*SV: What do you mean by freedom (one of the "Important Things in Life" cards)?* 

Mauri: It's like we are in shackles that have been imposed on us from the outside. We don't have freedom.

I can't just visit Anna at the SOS Children's Village anytime I want. She's in shackles too, in a way.

*H:* So you mean your family's freedom has been restricted?

Mauri: Right. We don't have freedom. Others decide when you can meet."

In SOS Children's Villages, the SOS parent and the rest of the house team are inevitably a part of the family's life, and their role as part of the family is determined by the quality and extent of cooperation. The child's life can also include other children in the same SOS Children's Village who are the child's siblings, but share the same home and spend a lot of time with the child. To some of the children, these relationships begin to resemble sibling relationships, to some they do not. The situation is strange from the parents' perspective, as the child's family now includes people they barely know. The entire SOS Children's Village, both children and adults, also become part of the child's life.

In light of the interviews, it appears that as the boundaries of the family are shifted due to the child's placement in care, some of the parents' inner circle and close relatives end up further away from the family than they were previously. The families described this as follows:

"SV: Is that something that has been affected by Anna's placement in care? The extent to which she can interact with her relatives?

Mauri: It has. Of course it does. It's different, going to visit someone in the SOS Children's Village. Who wants to go there? It's like an institution. (...) It would be different if she was at home, maybe they could spend the night or something. That's how I see it.

SV: So, Anna, do you wish it was somehow easier to meet with your relatives? Do you feel like your dad does, that it's complicated to invite relatives over for a visit?

Anna: I can't say that I really even want to bring them here (to SOS Children's Village). It's a bit strange."

"SV: So what's the obstacle there? Is it the distance, or do they feel awkward about going to SOS Children's Village, or what?

*Pauli: I think at least some of them don't want to go there.* 

*Riitta: Yeah. I think that's the deal with dad as well, that he doesn't want to.* 

*SV: What do you think is the reason why he doesn't want to?* 

Riitta: Maybe it's the fact that I was in one too, I mean, I wasn't in an SOS Children's Village, but I was in a children's home and in a foster family. So I guess dad feels difficult about going along." A large proportion of the families believed that their relatives did not feel easy about visiting the child at the SOS Children's Village. There were many reasons behind this belief. Some of the parents knew that relatives had certain preconceptions about SOS Children's Villages, for some the child's placement in care was difficult to process, and for some the distance to the SOS Children's Village was very long. Some of the parents indicated that SOS Children's Village had not provided enough support for maintaining relationships with the extended family.

#### 6.3.2 Prospects of reuniting the family

In all of the interviews, reuniting the family was seen as an abstract thing that few of the interviewees had factual information on. Some of the families knew that the child's return home was not currently a realistic prospect, and therefore did not have questions on their minds about it.

The majority of the families did, however, indicate that their aim was to have the child/children return home. Some confusion among the parents was caused by not knowing exactly why the child was placed in care, or what would need to change in order for the child to be able to return home. The parents also did not have any knowledge of how the placing municipality or the SOS Children's Village could support the family in reaching their goal.

"Emma: I strongly feel that I have been neglected as a parent. I haven't been given the chance to prove that I can do better. There have been suspicions of substance abuse, and once I have got past those concerns, they have come up with new reasons. I have heard many times that, where possible, the aim is to eventually have the children return home after being placed in care. But I have never felt that there is any hope of that happening."

"Eero: My family is so perfect, it really is. I don't know why I had to come here. I've spent a total of five years at these foster homes, and I still don't know why."

"Pirjo: I've told them to capture it on video, put in some CCTV cameras when the kids spend the weekend here to see what we do, how the kids behave and how we are, I mean, how can they just make assumptions like 'You drink. You're a drunk.' (...) I've asked them for years to tell me what to do. I don't get any answers. No answers at all. Last time I was almost in tears, I told them I can't think of anything else I can do, tell me what to do. 'Umm hmm, well, it's your daily life, your routines'. (...) Somehow my personality doesn't fit in the mold or something, I don't fit any mold, especially the mold of a mother, so it's like they just don't see me... They don't see me. It's like I don't exist."

"SV: But it's not a big enough issue that you'd like to change to a different foster care place, for example?

*Tytti: I'd like to, but it's like they don't let me. I mean, I've said it before, that I'd like to change places, but it hasn't been talked about at any meetings.''* 

Some of the interviewed parents also spoke of their own timidity about trying to change a situation that has been fairly stable for years. Reuniting the family seemed like a big issue to them. Lacking concrete knowledge of what kind of process it might entail, they did not have the courage to bring it up. One of the mothers, Mia, described her uncertainty as follows:

"Mia: I guess it could be possible, if I had a job and lived closer. Or at least if I was somehow more involved in their lives. I talked about it with a friend of mine, just the two of us, that if I could move and live closer, maybe I could, although I don't think it's something SOS Children's Village generally does, but as an idea, we talked about the kids maybe spending one week with me and then one week here. That's what we talked about.

SV: Okay. So what happened to that idea?

Mia: Well, it's kind of on the back burner, I mean, I still live in a different city, so it's really not possible for now.

*SV: Mmm. Well, have you ever brought this up at a meeting? Whether that arrangement could be possible if you lived closer?* 

Mia: No, I haven't had the courage. I think I mentioned it to the child's therapist, but he told me that it's not really something that's been done." In one of the interviewed families, the children had already returned home. The parents of that particular family were baffled by the authorities' actions in the return stage. Things did not happen like they had been told they would, and they were disappointed to find out that no post-return support was provided despite the parents' requests for it.

"Tuuli: They really tried to scare us, you know, your kids are coming home, who knows what will happen then. I think it was to get us to change our minds about having them return home.

Vesa: At least that's how it felt to us, the way they said it. I was ready to do anything it took (like drug screening), but all of that was forgotten.

*SV: Did you receive any support from SOS Children's Village after the children returned home?* 

Vesa: We wanted to. After all, the kids were there for almost two and a half years, and we got to know the staff there, they are really nice.

Tuuli: Yeah, the SOS parent is just great.

Vesa: Even though we got our kids home, we don't want to forget. We want to visit the SOS Children's Village, and we've done so. So we told the placing municipality that we would like this support thing, maybe the SOS Children's Village there once a month, or...

*Tuuli: (...) But the placing municipality said it's too costly.* 

Vesa: Yeah. But come on, isn't the cost of the placement itself much higher? It seems crazy to me that now they decide not to pay for that kind of support."

The interviews did not highlight any situations where reuniting the family was actively planned or supported. SOS Children's Village also did not come across as having an active role in supporting the family as a whole.

### **7 IN CONCLUSION**

The primary purpose of a foster care place is to ensure the child's wellbeing. Every family has a different story on how successful they consider the child's placement in SOS Children's Village to be as a support measure. In foster care, it is difficult to avoid the pain caused by the parents and children having reduced opportunities to spend time together, to exist together as children and parents, and to share their daily routines and experiences. If we can reduce this pain by changing some of our operating methods, we should do so.

The interviews highlighted the early stage of the child's placement in care as a critical period. The same conclusion was reached in "Investigating the crisis of a child being placed in care", a previous SOS Children's Village project. Parents must be allowed to participate in the placement stage, interacted with and taken into consideration. At SOS Children's Village, it is important to more clearly specify the division of responsibilities between staff and to implement new operating methods concerning the introductory period and the processing of the parent's own crisis separately from the child's crisis. When a child is settling into a foster care place, active work with the whole family is not always appropriate, but taking each family member into consideration as an individual is possible. This is particularly the case when the parent receives insufficient support from other sources, which highlights the role of SOS Children's Village in providing support.

As placement in care continues, it is important to take into consideration the reshaping of relationships between family members and to work with the family as a whole. It is important for each family member to find a natural role in a family that can only spend a limited amount of time together. Despite the fact that the interviewees mostly felt that the family remained quite solid, and the children in particular highlighted the central role of their parents in their lives, many also expressed dissatisfaction with their role as a member of their own family. The children were unhappy about meetings with parents being short in duration, and some did not understand why they could not live with their own parents. Each of the interviewed parents had thoughts on how they could be more active in realising their own parenthood and thereby promote the integrity of the family.

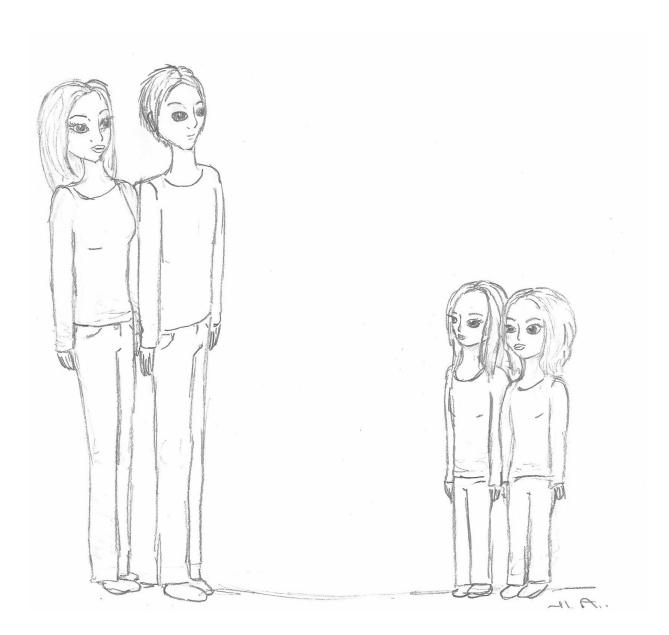
Based on the interview data, families receive only limited concrete support. SOS Children's Village must look for ways to develop its work to strengthen parenthood and empower the parent. For each individual child and family, it is important to have a discussion with the social worker responsible for the child's case on the role SOS Children's Village can take in supporting the family.

In family work, it is important to take the SOS parents' role into consideration in the family's internal interaction relationships. SOS parents inevitably play a central role, regardless of whether the relationship between the SOS parent and the child's birth parent is close and positive, neutral, or distant and quarrelsome. The interview data included examples of each of these relationship types. However, it was evident that when the parents got along and were able to raise the child in parallel and without major conflicts, placement was successful and the children spoke of both SOS Children's Village and their own parents in a warm and positive manner.

The child growing distant from his or her immediate social network, which was highlighted by many families, is rarely appropriate. For this reason, SOS Children's Village must look for new ways to maintain or develop the child's relationships with his or her natural social network, and lower the threshold for members of the family and extended family to visit or otherwise keep in contact with the placed child.

The reuniting of families is a theme that should be made more concrete. It is the duty of the placing municipality to inform the child and the parent why the child is placed in care, and what must change for the family to be reunited. The family should also be informed of what type of support is available to achieve the necessary changes. SOS Children's Village's role in striving to reunite the family should be assessed in cooperation with the family and the placing municipality. When all parties involved work towards reuniting the family in a goal-oriented, brave and open manner, foster care can achieve the outcome that should always be its objective. This outcome is that foster care is no longer needed.

SOS Children's Village has the capacity to provide families with services for different life situations. The future vision is that families will be increasingly offered early-stage support and assistance in order to avoid the child being placed in care. Even when foster care is necessary, the aim should be to actively rehabilitate the family and make the duration of foster care as short as possible, while always making the best interests of the child the first priority.



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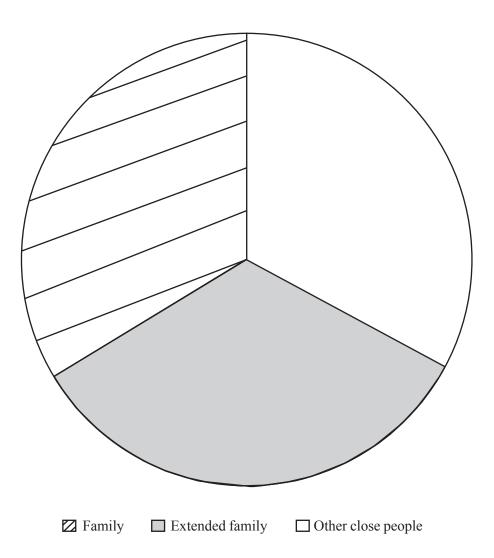
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## APPENDIX 2: "Important Things in Life" cards used

Sister
Play
Joy
Mother
Support
Encouragement
Attention
Day-care centre
Father
Freedom

Food Care Sorrow Hobby Safety Health Work Trust School Brother Hygiene Affection Home Sleep Limits Love Family Grandparents Relatives

#### 1. FOR FAMILIES

- Family history
  - How was your family supported before the child's placement in SOS Children's Village?
  - What kind of a support measure has the child's placement in SOS Children's Village been from the perspective of your family? (Compare with previous support measures)
- Family congruence, coherence, permanence
  - What types of things do you do as a family?
    - o What do you enjoy together?
  - Do you feel like you are a family in the same way as before placement?
    - o What has changed? What hasn't changed?
    - o During placement in care, has anything happened that has, in your view, infringed on the coherence of your family? How has the coherence of your family been supported during placement?
- What advantages or disadvantages has the placement had for your family?
- What type of support do you hope to receive in the future from SOS Children's Village?

#### 2. FOR CHILDREN

- Who does your family consist of? (adapted network map)
  - Do you have more than one family?
- What is good about your relationship with your parents? What would you like to improve? (cards)
- Does the staff at SOS Children's Village support your family relationships?
- What do you wish from SOS Children's Village regarding your family relationships?

#### 3. FOR PARENTS

- Think back to the time when your child was placed in care. How did you feel you were received as a parent?
  - What were your first encounters with SOS Children's Village staff like?
  - Have you felt labelled because your child is placed in care? Has this label affected how you see yourself as a parent?
  - How have your perceptions and experiences changed as your child's placement in care has continued? o Which aspects have you felt you could influence during placement?
- Psychological, social, biological parenthood
  - How do you see your role as a parent now that your child is placed in care?
    - o What roles are strong, what would you like to improve in?
    - o Is fulfilling some of these roles difficult or impossible while your child is placed in care?
  - Evaluate the attachment relationship between you and your child. Have you needed assistance in maintaining/creating an attachment relationship? Have you received assistance?
- In your view, what type of character is the SOS parent in the life of your family?
  - How is cooperation between you and SOS Children's Village staff?
- What do you wish from SOS Children's Village? What type of support do you feel you need, and could SOS Children's Village do something to improve your situation?