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**SUPPORTING  
FOSTER CARE**

in Eastern and Southern Africa

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## Acronyms

CTWWC	Changing the Way We Care
ESARO	Eastern and Southern Africa Regional Office
IZU	Inshuti z'Umuryango (Friends of the Family)
NGO	Non-governmental organisation
PSWO	Probation and social welfare officers
SOPs	Standard operating procedures
UN	United Nations

# **SUPPORTING FOSTER CARE**

## **in Eastern and Southern Africa**

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## Glossary

Term	Definitions
<b>Adoption</b>	"The legal transfer of parental rights and responsibilities for a child which is permanent." <sup>1</sup>
<b>Alternative care</b>	The formal and informal care of children outside of parental care. Children outside of parental care are children not in the overnight care of at least one of their parents, as parents are unwilling or unable to care for children. <sup>2</sup> The Guidelines for the Alternative Care of Children outline several different forms of formal and informal alternative care including kinship care, residential care and foster care. <sup>3</sup>
<b>Care planning</b>	"The process of planning a program of alternative care that has clear short-term and long-term goals. A care plan is a written document which outlines how, when and who will meet the child's developmental needs." <sup>4</sup>
<b>Case management</b>	Case management is a key means of ensuring that vulnerable children and families get the services they need. Case management uses standardised guidance to support social workers in identifying needs, making referrals to appropriate services, monitoring children and families, and keeping effective records. <sup>5</sup>
<b>Family-based care</b>	Care in a family environment. Family-based care includes kinship and foster care (see below for definitions) and care by the child's biological or adoptive parents.
<b>Foster care</b>	Foster care is a formal arrangement whereby a competent authority places children in the domestic environment of a family other than the child's own that has been selected, qualified and approved for providing such care. <sup>6</sup>
<b>Gatekeeping</b>	"A recognised and systematic procedure to ensure that alternative care for children is used only when necessary and that the child receives the most suitable support to meet their individual needs." <sup>7</sup>
<b><i>Kafalah</i></b>	"A form of family-based care used in Islamic societies that does not involve a change in kinship status, but does allow an unrelated child, or a child of unknown parentage, to receive care, legal protection and inheritance." <sup>8</sup>
<b>Kinship care</b>	Family-based care within the child's own extended family or with close friends of the family known to the child. <sup>9</sup>

<b>Residential care and institutional care</b>	<p>Residential care is care provided in any non-family-based group setting.<sup>10</sup> A distinction is often made between different forms of residential care. For example:</p> <ul style="list-style-type: none"> <li>• <i>Institutional care.</i> Large-scale facilities where children are cared for in large groups, usually involving shift-systems, a common set of rules, children sleeping in dormitories, and isolation from wider communities.</li> <li>• <i>Small group homes.</i> Children cared for in small groups, usually with one or two carers, in specially designed and designated facilities.<sup>11</sup></li> </ul>
<b>Supervised or supported independent living</b>	<p>Children and young people living alone or in groups in the community but supervised/ supported by social workers, caregivers and/or community volunteers.</p>



## Introduction

Across Eastern and Southern African governments are working to end the use of institutional care and ensure that children can grow up in safe and caring families.<sup>12</sup> Foster care is increasingly used for children who cannot be looked after by their own families.<sup>13</sup> This form of alternative care is often seen as better than residential care as it allows children to live in a family and form strong relationships with carers.<sup>14</sup> There are many examples of successful foster care programmes in the region, including with disadvantaged groups such as those with disabilities.<sup>15</sup> However, these initiatives are often run by non-governmental organisations (NGOs), reach only a small number of children, and are not fully integrated into national care and protection systems.<sup>16</sup> Many countries struggle to establish government-run or regulated foster care at scale.<sup>17</sup>

This paper examines the nature and benefits of foster care and identifies some of the key challenges associated with this form of care in Eastern and Southern Africa. It outlines the elements of an enabling environment needed for successful large-scale foster care programmes, including legislation, guidance, changes to social norms, coordination mechanisms, and a strong social service workforce. The paper also provides lessons learnt from the region on how to support each stage of the foster care process. The paper is based on a review of the literature and discussions with policy makers and practitioners in the region.<sup>18</sup> It is hoped that the paper will allow policy makers to make more considered decisions about when and how to support safe and effective foster care. Lessons learnt on the stages of the foster care process are aimed at practitioners engaged in the delivery of foster care programmes.

## What is foster care and what different forms does it take?

The Guidelines for the Alternative Care of Children were welcomed by the United Nations (UN) in 2009. These define foster care as:

“Situations where children are placed by a competent authority for the purpose of alternative care

in the domestic environment of a family other than the children's own family that has been selected, qualified, approved and supervised for providing care."<sup>19</sup>

The Guidelines define foster care as a formal arrangement in which an 'authority' selects, trains, approves and supervises foster care. As explored in more detail below, this 'authority' should be sanctioned and regulated by the state but may involve social workers from NGOs or United Nations (UN) agencies.

The definition excludes informal arrangements where a child goes to live with a stranger without the intervention of social workers. Such placements are often referred to as 'spontaneous' or 'informal' foster care and are widely used in the region, particularly during emergencies.<sup>20</sup> The definition also excludes placements with relatives or friends of the family that are approved and monitored by social workers, though this formal kinship care is incorporated into the foster care system in some countries (see Box 1). In this paper, the focus is on formal foster care placements with individuals not previously known to the child, though some reference is made to spontaneous or informal foster care and foster care placements with kin.

### **Box 1: The importance of distinguishing between informal kinship care and formal foster care - the case of South Africa<sup>21</sup>**

In South Africa, the government provides a cash transfer to all caregivers who have been formally registered as foster carers by the state. Many grandmothers and other family members caring for children have applied to be registered as foster carers to get this grant. As a result, social workers have become overwhelmed and unable to manage a huge backlog of foster care applications. This has affected their capacity to support children experiencing violence and abuse. Many in South Africa argue that it is unnecessary to bring these kinship carers into the formal foster care system as they do not need regular monitoring and support from social workers. Instead, there are calls for the social protection system to be revised so that kinship carers can get the economic support they need without being registered as foster carers.

Formal foster care with carers not known to the child is relatively new in the region, and the term often causes confusion. Some perceive foster care to include informal placements with extended family or wider kinship care networks, as 'fostering' is sometimes used to describe this form of care. Others do not understand the distinction between foster care and adoption or the *kafalah* that is used in Muslim communities.<sup>22</sup> Unlike adoption or *kafalah*, the rights and responsibilities of parents are not fully transferred to foster carers, and the state and/or parents maintain some responsibility for or rights to the fostered child.<sup>23</sup>

Foster care may also be confused with forms of residential care where children are being looked after in small groups in a family-like environment. This form of care is sometimes referred to as group foster care. Foster care is distinct from residential care as the child is cared for in 'the domestic environment of a family' rather than in a specially designed or designated facility.<sup>24</sup>

Formal foster care placements can take on many forms as outlined in Box 2. Each type of foster care offers different care and support to children and their families. Policy makers and practitioners in Rwanda have found that having a range of foster care options is vital for meeting the complex needs of children outside of parental care.<sup>25</sup>



## Box 2: Different types of foster care<sup>26</sup>

- **Emergency foster care:** The unplanned placement of a child for a limited period, usually a few days or weeks. Emergency foster care is used when the child is at risk and needs to be removed from an abusive family or other harmful situation quickly. Children are placed in this care whilst longer-term arrangements are made.
- **Short- or medium-term foster care:** The planned placement of a child typically for a few weeks or months, providing care for a child whilst efforts are made to reunite them with their family or find other longer-term or permanent placements.
- **Long-term foster care:** Placement for an extended period, often until the child reaches adulthood. This may be chosen in instances where a child cannot return to their own family, but where adoption or *kafalah* are not suitable options.
- **Specialised foster care:** Foster care for children with needs that require the foster carer to be given additional training and support. This includes foster care for children with some disabilities, mental health problems and behaviour difficulties. Specialised foster care can also be used to care for children who have been in contact with the law, trafficked or lived on the streets.
- **Respite/short breaks foster care:** Foster care that gives the child's parent or regular family caregiver a short break of anything from a few hours to a few days. For example, this might be used when caregivers enter hospital or if children have severe disabilities that require constant attention. This form of foster care can prevent family separation.
- **Fostering to adopt or pre-adoption foster care:** Temporary foster care whilst the option to adopt the child in foster care is explored or whilst the administrative processes associated with adoption are completed. This can be used to test the suitability of placements and to ensure a family-based placement whilst long and complex adoption processes are completed.
- **Parent and baby fostering:** A child is placed together with their parent or primary caregiver (usually mother) in foster care to support the develop of parenting skills. This may be used for example with young and inexperienced mothers or for parents with learning difficulties. It can prevent family separation.

Many of these forms of foster care are already being used widely in the region. For example, in Rwanda there is government-run emergency, short-term, long-term and specialised foster care.<sup>27</sup> In Kenya, the Guidelines for Alternative Family Care recognised three different forms of foster care including emergency placements.<sup>28</sup> In Zimbabwe, children who have grown up in residential care are placed in short-term foster care over the holidays to help prepare them for a life in the community once they leave care.<sup>29</sup> In Uganda, the NGO Hope for Justice provides foster care for street connected children. It offers placements for those in need of long-term family-based care, and short-term provision for children as they prepare to live independently.<sup>30</sup> In Zambia, the government has partnered with the NGO Alliance for Children Everywhere to establish a foster to adopt scheme.<sup>31</sup> A similar programme has been also been developed in Ethiopia.<sup>32</sup>

## How widely is foster care used in the region?

There is a lack of reliable data on foster care in the region as programmes are often managed by several NGOs with limited efforts by governments to consolidate information.<sup>33</sup> What figures do exist suggest that foster care often involves NGO-run programmes reaching a few hundred children at most.<sup>34</sup> Generally, there are far more children in kinship or residential care than foster care.<sup>35</sup>

Foster care in the region does not always involve small-scale NGO-managed programmes. In Rwanda, UNICEF has supported the government to establish foster care. From 2013 to 2021, 539 children were placed in foster care by the government and 1,924 foster carers were recruited.<sup>36</sup> South Africa has a very large foster care programme, with 386,000 children in foster care and receiving foster care grants as of April 2019.<sup>37</sup>

There are also substantial foster care programmes in refugee camps and settlements in several countries. For example, in Kakuma refugee camp in Kenya there are around 1,400 children in alternative care, over half of whom are in foster care.<sup>38</sup> There are also large numbers of refugee children in foster care in Uganda.<sup>39</sup>

## Why support foster care?

The following arguments can be made for increasing the use of foster care in Eastern and Southern Africa.

- Not all children have suitable family members who can care for them.** Global and national guidance commonly states that maximum efforts should be made to keep children in their own families.<sup>40</sup> Foster care offers a good option for children who cannot be looked after by parents or wider extended family, either because family members have died, can't be found, or cannot provide safe nurturing care on a short- or long-term basis.<sup>41</sup>
- Family-based care is better for children than institutional care.** Evidence spanning several decades demonstrates the harm caused to children by placements in large-scale institutions. These facilities deny children the opportunity to form a bond or attachment with their caregiver, with devastating impacts on child development and wellbeing.<sup>42</sup> Foster care allows children to receive the attention they need in a family. Whilst small-scale residential care does not carry the same risks as institutional care it still denies children a family home. The Guidelines for the Alternative Care of Children recommend this form of care should only be used when in children's best interests, and that all children under three should be looked after in a family.<sup>43</sup>
- Foster care takes on many forms, offering a range of options to meet children's needs.** As illustrated in Box 2, there are several types of foster care in the region. Foster care can be used to provide short- or long-term care and specialised support for children with disabilities or other special needs. Short breaks and parent and child foster care is designed to prevent separation for those at risk of losing parental care.<sup>44</sup>
- Long-term foster care is preferable to adoption or *kafalah* for some children.** Although adoption or *kafalah* embed a child more permanently in a family, these options are not suitable for every child who cannot

return to their own family. In some contexts, there is strong cultural resistance to adoption due to cultural norms about the importance of blood relationships.<sup>45</sup> Some children also

do not want another caregiver to take on the permanent rights and responsibilities of their parents.<sup>46</sup>

Box 3 illustrates the benefits of foster care for abandoned babies in Uganda.

### Box 3: The benefits of foster care for caring for abandoned babies in Uganda<sup>47</sup>

In Uganda, the NGO the Child's i Foundation had a 25-bed residential care facility for abandoned babies and at-risk children who had been referred by government social workers. Concerned about the impact of even short periods in residential care on child development, the organisation decided to pilot a foster care programme for children awaiting reunification with their own family, or adoption. A number of staff who worked as carers in the residential facility were retrained to provide foster care in their homes. Foster carers felt that they were able to provide better care for children in a home environment than they could in residential care. They reported that children in foster care reached developmental milestones much more quickly than those in residential care. Seven years after being formed, Child's i was able to close their residential care facility and exclusively provide care through foster care and adoption. A video describing the transition process can be found [here](#).

## The limits of foster care

Although there are many benefits to foster care, it should not be seen as an easy or simple alternative to residential care. As discussed further below, there is cultural resistance to foster care in the region, and, as with any form of care, risk of abuse and violence if caregivers are not carefully selected and monitored.<sup>48</sup> This means that effective foster care programming requires investments in social norm change, in recruiting, vetting, training and supporting foster carers, and in the professional social workforce. In many countries in the region the social workforce is small and developing large-scale foster care programmes would mean substantial increases in the number of social workers.<sup>49</sup> Social workers also need specialised training in foster care.

Foster care is not the best option for all children outside of parental care. It is widely acknowledged that kinship care should always be considered for children who cannot be cared for by parents.<sup>50</sup> This care allows children to remain within their own families and communities, helping to maintain important cultural identities.<sup>51</sup> Kinship care is often children's preferred option, is widely culturally acceptable, and does not usually require the same degree of formal monitoring as foster care.<sup>52</sup> Like foster care, there have been limited investments in supporting kinship care in the region.<sup>53</sup> It is important that investments in foster care are not made at the expense of greater support to kinship care.<sup>54</sup>

For some children in need of alternative care, placements in either kinship or foster care are not suitable as they need time outside of a family environment. For example, social workers in Uganda report that street connected children require a period of adjustment in small-scale residential care before they can be placed back with their own families or in foster care.<sup>55</sup> In Kenya, refugee children

caught up in family feuds may be abducted or even killed and need to be temporarily placed in shelters for their own safety.<sup>56</sup> Examples such as these point to the importance of foster care being amongst a range of care choices for children so that the most appropriate form of care can be found to meet individual needs.<sup>57</sup>

## Creating an enabling environment for safe and effective foster care.

As shown in Diagram 1, effective foster care requires a child protection system with the following components.<sup>58</sup>

- Laws and policies on foster care:** Foster care should be recognised in legislation as a care option, and laws should also stipulate minimum requirements and standards for foster care. National care strategies should outline the role of foster care in the continuum of care choices for children, and explain the changes needed to establish or improve foster care systems. Box 4 includes examples of foster care in national laws and policies in Kenya and Madagascar.
- Detailed guidance on foster care:** Organisations providing foster carer and social workers need detailed standard operating procedures (SOPs) on recruiting, training, and supporting foster carers, and on case management for children in foster care. Guidance is also needed for gatekeeping bodies who make decisions about entry into foster care. Box 4 provides an example of standard operating procedures on foster care developed in Kenya.
- Quality service provision.** Foster care can be provided by NGOs or government agencies. All service providers must have the resources, skills and knowledge to deliver services, including understanding the benefits and risks associated with foster care and the steps in the foster care process. NGOs need to be licensed and closely monitored by the government, who should provide clear expectations in terms of minimum standards. Box 5 shows how government agencies have successfully collaborated with NGOs in the delivery of foster care in Uganda.
- Strong government departments and coordination and oversight mechanisms:** Government departments must have sufficient knowledge of foster care to oversee NGO foster care programmes. If foster care is being provided by a range of actors, coordination mechanisms are needed to avoid duplication of services and share learning. Coordination mechanisms can also be used to ensure effective linkages with other service providers that may support foster care, such as social protection, health and education.
- A social workforce with the capacity to support foster care:** As noted above, managing and monitoring foster care is time-consuming and it is important to have sufficient social workers in place. Professional social workers must play a key role in all stages of the foster care process and should receive specialised training. Community volunteers can also support these professionals through, for example, providing informal support to foster carers or checking up on children in foster care through home visits. Box 6 outlines the role of community volunteers in supporting foster care in Rwanda. Foster carers may be considered part of the social workforce and the recruitment, training and support of these carers is outlined in further detail below.



## Box 4: Examples of foster care legislation and guidance in Kenya and Madagascar

### Kenya

The Government of Kenya has promoted extensive care reform for over ten years.<sup>59</sup> Foster care is included in the Children's Act 2001, the Guidelines for the Alternative Family Care of Children 2014 and the Children's Bill 2021.<sup>60</sup> Together, these policies provide the following.

- Definitions of foster care which consider foster care to be the placement of a child with someone other than the child's parent, relative or guardian. This includes formal placements involving social workers or the courts and informal arrangements.
- Standards for foster care, covering the application and registration process, training and support for foster carers including material supports, considerations for placing a child in foster care and follow-up monitoring.
- The roles and responsibilities of different government departments in establishing and supporting foster care.

The recently approved ten-year National Care Reform strategy<sup>61</sup> calls for changes and enhancements to existing foster care laws and services. The strategy promotes the expansion of foster care, a wider range of forms of foster care, improved decision making about placements, better oversight and monitoring, and enhanced information, services and supports for foster carers. Kenya is also in the process of developing SOPs on foster care. These will provide guidance on establishing and supporting the foster care system, alongside step-by-step procedures for placing children in foster care. The SOPs will be accompanied by a training manual for foster carers.<sup>62</sup>

### Madagascar<sup>63</sup>

The Government of Madagascar is beginning to establish foster care and has drafted a decree, which aims to:<sup>64</sup>

- Regulate the foster family system and set out the terms and conditions of its operation.
- Determine the criteria and conditions for the placement of a child in a foster family if the child cannot be left in his or her family of origin.
- Specify the measures, obligations and responsibilities of the foster family, the family of origin and the social services with respect to a child in difficulty, subject to placement.
- Outline the roles and responsibilities of each actor in the process, from the placement decision to monitoring and follow-up.

## Box 5: Collaboration between government, NGOs and UN agencies in the delivery of foster care in Uganda<sup>65</sup>

In Uganda, the NGO Hope for Justice (formerly RETRAK) provides foster care for street connected children. Hope for Justice identifies children suitable for foster care, recruits and trains foster carers and offers follow-up support once children have been placed. It works in close collaboration with the police, courts and government Probation and Social Welfare Officers (PSWO). The police help to identify children living or working on the streets who may need alternative care. Placements are made with a court order following an assessment by a PSWO. Children are only placed in foster care if it is not possible or safe for them to return to their families. PSWO are also responsible for monitoring foster care placements and ensuring the quality of NGO services.

- **Supportive social norms:** Across the region, there are strong beliefs that families should care for their own children and in the importance of passing down culture and traditions within the family or wider kinship network. Caring for a stranger's child can be seen to contradict these values. Foster care may be viewed as an externally imposed 'western' form of care. Social norms lead to resistance to fostering groups of children who are widely stigmatised and discriminated against, such as those with disabilities or connected to the streets. Social norms can also mean that children in foster care are poorly treated as they not viewed as an equal part of the family. Boxes 6 and 9 illustrate how these challenges have been overcome in Rwanda and Uganda by building on local practices related to the care of children in need.
- **Budget allocations for foster care:** There is widespread evidence that once established, foster care is cheaper than residential care.<sup>66</sup> However, there may need to be an initial injection of resources to build the capacity of government departments and social workers to support foster care effectively.<sup>67</sup> Resources may also be needed to provide material support to foster carers (see below for further details of support needs).
- **Evaluations and research:** A review of the literature shows a lack of research and evaluations on foster care. More evidence is needed to identify the benefits and challenges of foster care in the region, and key lessons learnt from existing foster care programmes.

### Box 6: Social norms and community engagement - building on home-grown foster care in Rwanda and Uganda

#### The Malaika Mulinzi and IZU in Rwanda<sup>68</sup>

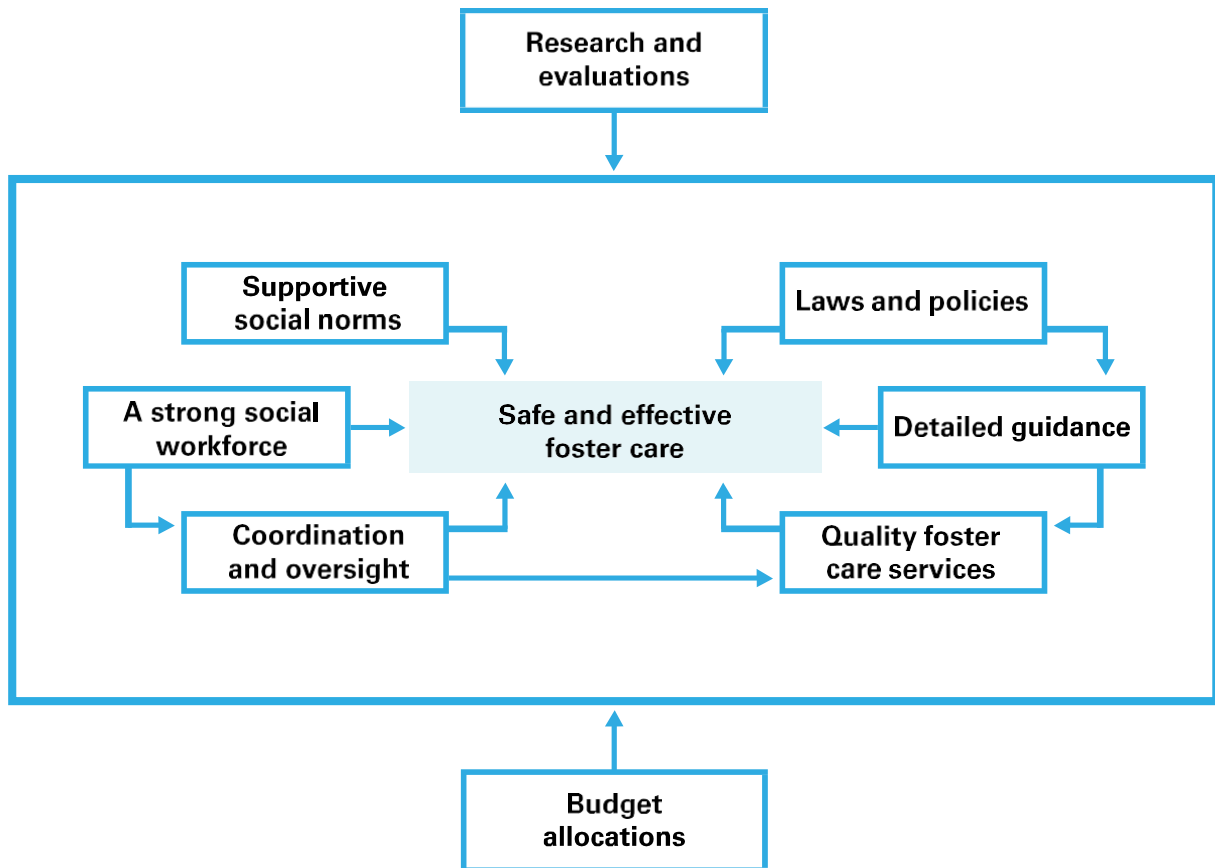
Foster care in Rwanda began with the establishment of the Malaika Mulinzi (Guardian Angels) by Rwanda's first lady, Jeannette Kagame. The Malaika Mulinzi were community volunteers with a remit to identify and support vulnerable children.<sup>69</sup> Their role was expanded and formalised to become foster care through the government-run and UNICEF-supported Tubarerere Mu Muryango programme. Many in Rwanda continue to refer to foster carers as Malaika Mulinzi. Foster care is not seen as from the 'west'. Rather, it is viewed as a home-grown solution that builds on a strong sense of communal responsibility for children's care.

This community commitment to child wellbeing has also led to the creation of the Inshuti z'Umuryango (IZU – Friends of the Family). The IZU are community volunteers who exist in every community and play a vital role in children's protection and care. In relation to foster care, the IZU help to identify prospective foster carers, monitor children in foster care, provide ongoing support to foster carers and children, and make referrals to professional social workers where necessary.

#### The Laroo-Peace Women's Association in Uganda<sup>70</sup>

The Laroo-Peace Women's Association was formed in the aftermath of the conflict involving the Lord's Resistance Army in Northern Uganda. It began as a savings association for widows. Members noticed an increasing problem with children living alone on the streets. Younger children were often used by older children to commit crimes and then caught and beaten by community members. The women established foot patrols and intervened when they witnessed this violence, bringing children back to their own homes to care for them. This informal foster care drew the attention of local leaders who formalised the arrangement through the courts. Although this form of foster care had many advantages, there were also some challenges. Even after the care arrangements were formalised, women were not always rigorously assessed and received limited support.

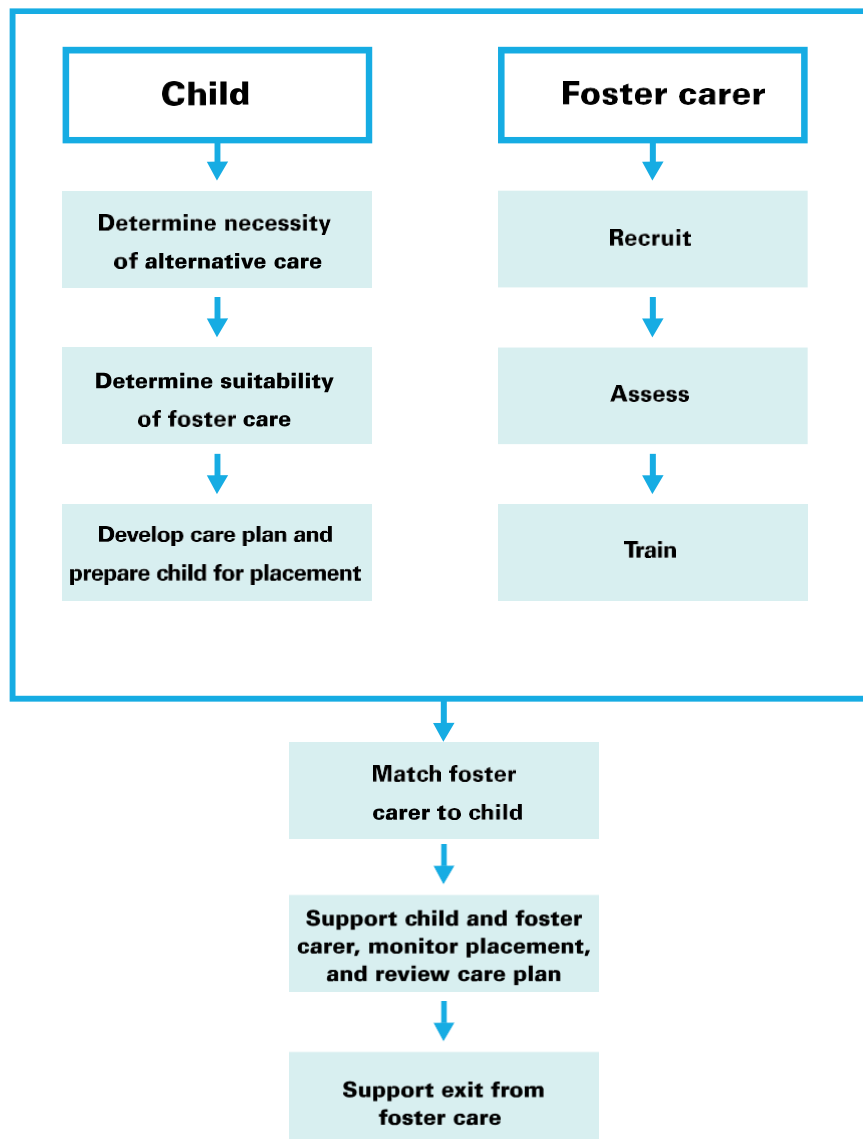
## Diagram 1: The enabling environment for safe and effective foster care



## Supporting each stage of the foster care process

### Overview of the stages of the foster care process

The stages of the foster care process for children and foster carers are summarised in Diagram 2. A child's journey into foster care begins with an assessment by gatekeeping bodies that determines if they need alternative care, and if foster care is the most suitable form of placement for them. A care plan should be developed for each child which outlines their support needs whilst in care, and strategies for reintegration with families, other permanent placements or exit from care to live independently. Children must be properly matched with a foster carer who can meet their needs and provided with follow-up monitoring and supports. Care plans should be regularly reviewed and amended where necessary. Foster carers need to be recruited, assessed and trained before they are matched with a child. They also require extensive follow-up monitoring and support.

**Diagram 2: The stages in the foster care process**

## Determining the necessity and suitability of foster care

Children in Eastern and Southern Africa come into foster care through a variety of routes.<sup>71</sup> For example, they may have been abused or neglected in their families and placed directly into foster care. They may have spent time in residential care and been placed into foster care as part of a programme of de-institutionalisation. Children may have been on the move, fleeing violence or seeking a better life, and come into foster care after a period living in refugee camps or on the streets. In all instances, global guidance suggests that it is vital to first assess if children need to be in alternative care or if they can return to their families.<sup>72</sup> Once the necessity of alternative care has been determined, it is important to consider if foster care is the most suitable option for the individual child.<sup>73</sup> As noted above, foster care is not always the best choice for children in need of alternative care and other options may need to be considered such as kinship care, small group homes, or supervised or supported independent living.

Global guidance suggests that decision making about placement into foster care should be carried out by professionals in national gatekeeping bodies and be based on rigorous assessment.<sup>74</sup> This



assessment should seek to identify whether foster care is in the best interest of the children, taking into account the perspectives of children themselves.<sup>75</sup> Assessments should consider the following.<sup>76</sup>

- Meeting children’s universal rights and specific needs.
- The child’s immediate safety and wellbeing, as well as their longer-term care and development.
- The harm caused by institutional care, particularly for very young children.
- The safety and effectiveness of available foster care programmes.
- The importance of avoiding sibling separation.
- The child’s ethnic, linguistic, and religious background.
- The need to avoid frequent placement changes and to facilitate eventual permanent placements through return to families, adoption or *kafalah*.
- Placing children close to families and communities to ease contact (as long as this is in the best interests of the child).

In addition to assessing if foster care is the best option for children, it is also important to determine which form of foster care is most appropriate to meet the child’s needs (see Box 2).<sup>77</sup>

Assessment processes should be incorporated into case management guidance. For refugee contexts, the UN High Commissioner for Refugee’s Best Interests Procedure Guidelines provide guidance on decision making on alternative care.<sup>78</sup> Once children are placed into foster care, it is essential to regularly review placements to determine the ongoing necessity of alternative care and suitability of foster care for the child.

## Care planning

Decision making about placements into foster care and ongoing review of the placements should be done as part of a care planning process. Each child in foster care should have a care plan outlining the goals of their placement, their support needs and how these needs will be met. Care plans should state how children will shift from temporary to longer-term or permanent care. Care plans should be regularly reviewed.

## Preparing children for foster care

Children entering foster care need to be properly prepared in order for placements to succeed. For example, in Zimbabwe children sent from residential to foster care struggled with the standard of living in villages which was more basic than in residential care.<sup>79</sup> In Uganda, children entering foster care from the streets needed several months of preparation (see Box 7). Preparation varies depending on children’s lives prior to entering foster care but is likely to include the following.<sup>80</sup>

- Establishing relationships of trust with adults.
- Expectations about the new living environment/standards of living.
- Adjusting to new routines and rules.
- Understanding the role of foster carers and building relationships.
- Engaging with the wider community, including understanding culture and traditions.

During the preparation phase, it is also important to explore children's expectations regarding length of placement and to ensure that these match with carers' views and care plans. Evidence from the region shows that ambiguity about permanency of placement and the potential for family reintegration can damage relationships between children and carers.<sup>81</sup>

### Box 7: Preparing children connected to the streets to enter foster care in Uganda<sup>82</sup>

In Uganda, the NGO Hope for Justice is working on family reunification and foster care for children connected to the streets. It has found that children who have lived on the streets suffer from exploitation and abuse and struggle to trust adults. These children are also not used to routine, or to responding positively to authority figures. Hope for Justice places children temporarily in shelters to prepare them for foster care placements. Social workers rebuild children's trust in adults by treating them with respect and kindness. Children are also introduced to routines and responsibilities. When children are ready to be placed in foster care, Hope for Justice regularly follows up to quickly address any problems that emerge. Hope for Justice has found that as well as challenges, street connected children also bring resilience and flexibility with them to foster care placements. For example, in contrast to children who come into foster care from residential care, they can care for themselves and contribute to household chores. A video describing the process of preparing children for foster care can be found [here](#).

## Recruiting prospective foster carers

Evidence from practitioners across the region suggests that cultural resistance can make recruiting foster carers challenging. Successful strategies to overcome these barriers include the following.<sup>83</sup>

- Drawing on values around the importance of family and caring for children in need. As outlined in Box 6, building on existing practices which involve caring for vulnerable children may be better than imposing 'western' models of foster care.
- Identifying prospective foster carers from community child protection committees or from caring professions, such as teaching or nursing.
- Reaching out through churches, mosques, or faith-based organisations, highlighting the emphasis placed on caring for children in both Christianity and Islam.
- Using existing foster carers to identify prospective foster carers and share their experiences.
- Developing clear information about foster care (see Box 8 for example), and training journalists to spread these messages.

During the recruitment process, it is important to be honest about both the rewards and challenges of foster care; unrealistic expectations are likely to cause problems later in the process. Basic information about foster care is critical (see Box 8). Recruitment also hinges on proper services and support for foster carers. For example, UNICEF Kenya report that it is easier to recruit foster carers in refugee camps than other settings as there is more material and other forms of support available in these contexts.

### Box 8: Facts about foster care in Zambia

In 2016, in an effort to promote family-based care across the country, the Government of Zambia produced a one-page pamphlet called 'Facts about foster care in Zambia'.<sup>84</sup> This resource provides information to potential foster carers using a simple question-and-answer format to common queries, such as: What is foster care? Who is a foster child? Who should foster? Why is fostering important? How can I apply to be a foster carer? The pamphlet also explains where to go in each district to find out more. This document can be found [here](#).

Finding foster carers to care for certain groups of children, such as street connected children, children with disabilities or adolescent boys, can be especially hard. Practitioners across the region highlight the following strategies to address this resistance.

- Understanding why carers are reluctant to foster these groups and tailoring responses accordingly.
- Challenging misinformation and stigma.
- Addressing fears about challenging behaviours that are commonly associated with adolescents, children connected to the streets and children who have experienced trauma. Explaining that training will be provided on how to respond to these behaviours.
- Dealing with the practicalities of caring for children with disabilities, providing extra supports if necessary (such as help making homes more accessible or social protection support so that time can be taken off work to care for children).
- Being clear that ongoing training will be offered on caring for particular groups of children.

Box 9 shows how one NGO in Uganda has managed to promote foster care for children with disabilities.

### Box 9: Changing social norms to recruit foster carers for children with disabilities in Uganda<sup>85</sup>

Ekisa Ministries, a faith-based organisation in Uganda, has found that the biggest barrier to transitioning children with disabilities from residential to foster care is the belief that these children cannot be cared for in families. This view is held by many social workers, care home staff, and prospective foster carers, and is closely linked to high levels of ignorance and discrimination around disability. Ekisa argues that although the focus of policies and programmes for children with disabilities is often on providing for children's physical needs, it is cultural attitudes that most require change.

To overcome this barrier, Ekisa staff take stakeholders through a journey which begins with reducing ignorance around disability, before moving on to enhancing empathy and encouraging building relationships with and supporting those with disabilities in the community. Eventually, community members are encouraged to think about whether they might provide care for a child with disability. Giving prospective foster carers a chance to ask questions, discuss their fears and hear from others who have successfully fostered children with disabilities has also been of great value.

Once foster carers are recruited, Ekisa assesses children with disabilities and foster carers so that appropriate matches can be made. This work is undertaken by social workers, who deeply examine each individual child's specific requirements, and assess foster carers' capacity to meet these needs. Where there are gaps, Ekisa provides support, for example, fitting an accessible toilet to a house. Once a child is placed with a family, Ekisa continues to monitor and support the child and foster carer.

## Assessing prospective foster carers

All prospective foster carers must be fully assessed to ensure that they can care for children well and that children are safeguarded from abuse or exploitation. Practitioners in the region report that thorough assessment is vital for preventing placement breakdowns.<sup>86</sup> It is important to remember that not everyone who is willing to foster a child is actually suitable. Hope for Justice in Uganda goes on to approve only one in four of the prospective foster carers that it assesses.<sup>87</sup> Often assessment takes place after initial briefings so that all of those who apply appreciate the challenges associated with foster care. Practitioners in the region argue that the following factors should be assessed.<sup>88</sup>

- Compassion and resilience.
- Health and emotional wellbeing.
- Motivation, including ensuring that caregivers are not motivated by having extra help in the home or on the farm, or by any material supports offered to foster carers.
- The willingness of the entire family to foster, including other children in the household.
- Practicalities such as space in the home, income and time to care for the child, recognising that issues can often be resolved with additional supports.
- Child safeguarding, ensuring that there are no previous incidents of abuse or neglect in the family.

Assessment guidance should be included in SOPs on foster care. Box 10 provides details on the assessment forms developed by the Child's i Foundation in Uganda.



### Box 10: Foster carer assessment form developed by the Child's i Foundation, Uganda<sup>89</sup>

The Child's i Foundation has developed an assessment form for prospective foster carers that covers the following.

- Applicant details and basic information about other members of the household and children of the applicant who live elsewhere.
- Living conditions, including vulnerability to eviction, cleanliness and sleeping space.
- Support networks and services and support in the wider community.
- Education, skills and income of household members, including whether they are managing to meet their needs with their income.
- Motivation to foster.
- Strengths and areas for improvement as a parent/carer.
- Household rules and how they plan to discipline children (with the stipulation that the Child's i Foundation prohibits physical punishment).
- Parenting style and attitudes, including views on education, willingness to accept children as individuals, how children will be made to feel part of the family, and how affection will be demonstrated.
- How children will be kept safe and not exposed to abuse.

Assessments are made by social workers during a series of home visits which are also recorded on the form. In addition, social workers seek three referees who are asked to describe the strengths and vulnerabilities of applicants. Child's i is keen to point out that whilst foster carers need to be able to provide a safe and loving home for children, they are not expected to be perfect individuals with no faults or weaknesses. Assessments and ongoing monitoring are vital for identifying strengths and addressing any challenges that foster carers may face.

## Training foster carers

All foster carers must be fully trained before they can begin to care for a child.<sup>90</sup> Evidence from the region suggests that training must cover the following.<sup>91</sup>

- The roles and responsibilities of foster carers, including the boundaries of legal responsibility.
- The rights of children in foster care.
- The support that is available to foster carers and how to access it.
- Background on the children being placed into foster care, including on the loss, trauma and challenges they have faced and how this might affect behaviour.
- Parenting skills and responding to challenging behaviours.
- Self-care and how to deal with stress – vital for ensuring that foster carers do not burn out.

In addition, some foster carers also need specialised training covering the needs of certain groups of children, such as those with disabilities. Box 11 provides an example of foster care training in Malawi.

### Box 11: Training package for foster carers in Malawi

In Malawi, foster care is seen as an important option for children who cannot live with their parents or with wider extended family or friends of the family. Research from 2017 suggests that foster care is under-utilised, with potential for more children to be placed in foster rather than residential care.<sup>92</sup> The government is concerned not just with expanding foster care, but also with ensuring that foster care is of high quality. The Ministry of Gender, Community Development and Social Welfare has worked with the NGO Hope and Homes for Children to develop a training package for foster carers. This training has to be completed by all foster carers in order to gain official accreditation. It involves three modules covering 27 sessions and takes at least 20 hours. The training covers the following.

#### *Module 1: Child rights and protection*

- Key principles of child rights, such as non-discrimination, the best interests of the child, and respecting children's beliefs and cultural identity.
- Working in partnership with social workers to comply with care plans and enable access services and support for children.
- Child safeguarding, and how to protect children from abuse and violence.
- Identifying and building on children's strengths.

#### *Module 2: Child development*

- Stages in child development, and the corresponding needs of the child.
- Identifying and responding to developmental delays, including the importance of emotional stimulation.
- The importance of play in developing social skills.
- Reasons for family separation, the impact of this separation on the child and dealing with separation, trauma and loss.
- Managing challenging behaviours, appropriate discipline practices, and other parenting skills.
- Enabling healthy communication between the child and their family members.

#### *Module 3: The role and place of foster care in the system of child protection*

- Meanings of a 'suitable family' and of foster care.
- The importance of the family to children and the problems associated with institutional care.
- The roles and responsibilities of foster carers.
- Legal provisions associated with foster care.
- Integrating children into the family and building relationships with other children in the household.

## Matching foster carers to children

Global guidance suggests that children should be matched to foster carers who meet their needs, rather than foster carers selecting the children they want.<sup>93</sup> This means that it is important to have a pool of foster carers available so that the most appropriate caregiver can be chosen for each child.<sup>94</sup> Practitioners in the region highlight the importance of thoroughly assessing the child's needs and the foster carer's capacities.<sup>95</sup> Understanding children's perspectives is a vital part of this process.<sup>96</sup> Consideration of the needs of other children in the foster carer's household and the importance of cultural and religious continuity in the child's life is also important.<sup>97</sup> Foster carers who lack some of the resources or skills needed to care for a child should not automatically be dismissed as some further training and support may be all that is required.<sup>98</sup> Box 9 describes the process of matching foster carers with children with disabilities in Uganda.

## Monitoring placements

All foster care placements must be monitored to check that the child is not being abused or neglected, and to ensure sufficient support is provided to avoid placement breakdown.<sup>99</sup> It is important to speak with children, foster carers, teachers, and others involved in children's lives as part of monitoring. Children should be consulted privately so that they can raise any concerns they have around abuse or neglect.<sup>100</sup> Community volunteers or para-professionals can be involved in monitoring (see Box 6 for example) but professional social workers should play a supervisory role. Tools for monitoring should be included in case management guidance which must be in line with national and international standards on foster care.

## Ongoing support to children and foster carers

Across the region, there has been extensive debates about whether foster carers should be paid for their role. Most of those consulted for this paper agree that payment can lead to foster carers being primarily motivated by monetary gain, placing the child at risk. Payment can also make foster care unsustainable as it increases the cost of foster care. However, practitioners in the region argue that foster carers need to be adequately compensated for any costs incurred due to foster care. This may include a loss of earnings if they have to take time off to care for the child, costs associated with feeding another child in the household, school fees or equipment, or the cost of an extra mattress.

The costs associated with foster care are covered in a variety of ways. Foster carers in refugee camps in Kenya automatically get extra allocations of rations and increases in any cash transfers they are eligible for.<sup>101</sup> In South Africa, there is a cash transfer available for foster carers, though this has faced numerous challenges (see Box 1). In Rwanda, foster carers are recruited from modest but not the poorest backgrounds. They are assessed to make sure they can afford to care for children without additional payments. However, some foster carers are given extra financial assistance if they are looking after children with disabilities or complex health needs.<sup>102</sup>

Just as important as material help is support with parenting and meeting emotional needs. In South Africa research shows that social workers neglect these needs due to heavy workloads, though children in foster care talk of feeling unhappy, rejected by biological parents, stigmatised and excluded.<sup>103</sup> Foster carers are often stressed and struggling to deal with challenging behaviours. Providing carers with a short break through respite care can be effective for dealing with stress.<sup>104</sup> Both foster carers and the children in their care may need help navigating contact with birth families.<sup>105</sup>

Evidence suggests that peer to peer support can be valuable. For example, in Uganda the Child's i Foundation has established parenting support groups that allow foster carers to meet regularly and exchange experiences. These groups are also being used for group savings and loans.<sup>106</sup> Some in the region are using social media groups to link foster carers for mutual support.<sup>107</sup> Global guidance recommends establishing foster carers' associations to generate and share learning and lobby for reforms.<sup>108</sup> Children in foster care can also benefit from contact with others in foster care.<sup>109</sup>

In providing support to children in foster care, it is important to recognise the diversity of their needs and to ensure that support is tailored. For example, children who are in conflict with the law and in foster care may need legal supports and assistance dealing with stigma.<sup>110</sup> Here, it is vital to listen to children's perspectives to fully understand their needs.<sup>111</sup>

## **Supporting children and young people to leave foster care**

All children in foster care will eventually leave, either to return to their own families, to be adopted or placed in *kafalah*, or to live independently as they reach adulthood. Research in South Africa illustrates the importance of supporting such transitions. Legislation in South Africa states that all young people leaving care must be prepared for independent living. Whilst there is some support for children leaving residential care, this assistance is lacking for children leaving foster care. These young people face challenges around unemployment, homelessness, and social isolation. Leaving care can be a terrifying prospect, particularly if young people have no family to support them.<sup>112</sup> Support is also needed for children returning to their families of origin, for both the child and wider family. The move back to families is considerably easier if the child has maintained contact with family members whilst in foster care.<sup>113</sup>





## Conclusions

Foster care is emerging in Eastern and Southern Africa as a valuable form of family-based alternative care that offers many benefits to children. Foster care is a better option than harmful institutional care and the multiple forms of foster care can meet a diverse range of needs. Whilst foster care is an important care choice for children, it is essential that it is not the only option. Investments in foster care should not be at the expense of work with families to prevent separation or support kinship care.

Governments wanting to invest in foster care should not view this as an easy option and must be prepared to create an enabling environment for safe and effective foster care. This includes generating laws, policies, and guidance, creating coordination and oversight mechanisms, ensuring that there are sufficient trained social workers in place to support foster care, developing or overseeing foster care services, and working to address cultural resistance to foster care.

Practitioners need to support each stage of the foster care process. Work with children is vital to determine the necessity and suitability of foster care and prepare them for placement. Foster carers should be recruited, carefully assessed and trained, and there should be a pool of foster carers ready to take on emergency cases and able to meet children's diverse needs. Decisions about matching foster carers to children should be based on the needs of the child. Follow-up monitoring and support for both children and foster carers is essential. Children and young people leaving foster care also need assistance.

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