The demographic characteristics of foster carers in the UK: motivations, barriers and messages for recruitment and retention

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The demographic characteristics of foster carers in the UK:
Motivations, barriers and messages for recruitment and retention

McDermid, S., Holmes, L., Kirton, D. and Signoretta, P.

Childhood Wellbeing Research Centre
May 2012
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Key findings

- The literature suggests that the majority of foster carer households consist of couple carers. While the proportion of married foster carers reflects national trends, the data suggest that cohabiting couples are underrepresented in the foster carer population.

- Recent evidence suggests foster carers are increasingly found to be engaged in employment outside of foster care. A notable proportion of foster carers have experience in the caring or childcare professions. Lone carers are less likely to be employed outside of the home.

- The majority of carers are found to be in middle age. Carers aged less than 35 years are found to be the smallest proportion of carers in existing samples.

- Research suggests that those from BME and mixed ethnicity backgrounds are underrepresented in the foster carer population compared to the national population of looked after children. The issue of ethnicity should be considered in the light of the relatively high proportion of children looked after from ethnic minority and mixed backgrounds.

- Male carers are also identified as being underrepresented in the existing literature. It is unclear whether this is because of sample bias or a reflection of the foster carer population as a whole. However, the literature highlights the important and unique role played by male carers.

- The studies show that a large proportion of foster carers are educated to GCSE level, a slightly higher proportion of foster carers have no educational qualifications and fewer foster carers are educated to degree level or above, compared to the national population of adults of working age.

- Studies suggest that foster carers have a slightly lower than average gross household income. Financial reward is not frequently cited as an initial motivating factor to foster. However, there is evidence to suggest that remuneration enables families to foster and is a factor in the decision making process. There is also evidence to suggest that higher payments may be linked to higher rates of recruitment and longer continuation of foster carers. The existing evidence is mixed regarding the impact that the professionalisation of foster care would have on recruitment and retention.

- The following motivations for fostering have been identified in the literature: having something to offer; fondness/liking for children; carers’ own childhood experiences in
care; awareness of need for foster carers; suits current family circumstances; create/extend own family; and own children grown up/moved away. Intrinsic rewards have also been identified as reasons for continuing to foster including: a sense of satisfaction, seeing children progress, love for the child, a sense of fulfilment, doing something worthwhile and making a difference to a child’s life.

- The barriers to fostering include: lack of confidence; lack of understanding of what is involved in the role; fears of assessment/rejection; mistrust of social workers; lack of support; fears of accusations of wanting to make money from children; discomfort over children returning to their birth families; lack of suitable accommodation; fears of false allegations of abuse; media coverage and public perceptions of social care; placement breakdowns and the high levels of stress involved in the role.

- Recruitment campaigns targeted at foster carers from minority and mixed ethnicity backgrounds, those in their thirties and male carers may be beneficial. A number of potential avenues for recruitment are identified in the literature including word of mouth and the involvement of existing foster carers; geographically targeted recruitment, better information about foster caring; and improved payments.

- With regard to improving retention, the literature suggests that adequate payments to foster carers are essential to ensure that they are able to carry out the role; along with sufficient and specialist professional support especially after placement breakdowns and the payment of retainers.

- At present there are no comprehensive data sets regarding the demographic profile of foster carers and how far this profile matches that of the foster children. Given the importance of suitable matching, such an analysis would be beneficial.

- Most of the existing literature draws on samples of existing foster carers. Therefore, the existing evidence base is limited with regard to the barriers perceived by prospective carers and the reasons why foster carers leave. Research involving ex-foster carers or prospective carers who have made enquiries about fostering which have not been followed up, may make a significant contribution to the existing evidence base.

- An analysis of the motivations and barriers for carers from ethnic minority backgrounds, those aged under 35 and male carers may also help to advance the evidence base and inform recruitment strategies.
Introduction

Background

The latest figures suggest that there are approximately 65,520 children looked after in England, and three quarters of those children are placed with foster carers (Department for Education, 2011). The number of children looked after has risen by approximately 9% since 2007 (ibid). The rise in the number of children being looked after has increased demand for foster carers (Centre for Social Justice, 2008). There is evidence to suggest however, that both local authority fostering services and Independent Fostering Providers (IFPs) are struggling to maintain sufficient numbers of foster carers to meet demand and the Fostering Network estimates that there is a shortage of at least 10,000 foster carers in the UK (Clarke, 2009; Tearse, 2010). Furthermore, policy and practice changes such as the Southwark Judgement¹, and an increasing propensity towards longer term placements (Sellick, 2006) for instance have resulted in some local authorities reporting difficulties with finding placements which were previously uncommon for fostering services (Clarke, 2010).

The sufficiency duty introduced in April 2011 requires all local authorities in England to plan for how they will meet demand for placing children (Department for Children, Schools and Families, 2010). However, as Clarke (2010) notes the immediate challenge will be in ensuring the rising demand is met at a time of budgetary constraint. At present there is no national profile of the number and characteristics of approved foster carers in the UK to inform recruitment and retention strategies. This review aimed to address this.

Aim of the report

This rapid response review, carried out during February and April 2012, examines existing knowledge regarding the demographic characteristics of foster carers in the UK. It explores existing research on what motivates individuals and families to become foster carers and the barriers they identify. It also explores how this information can be used to inform recruitment and retention strategies, whilst also identifying examples of good practice, and gaps in existing knowledge.

¹ This judgement asserts that local authorities should classify young people under the age of 18 as children under the Children Act 1989 and should therefore have responsibility for accommodating them, rather than referring them to the housing authority to meet their accommodation needs.
The report addresses the following questions:

- What are the current demographic characteristics of foster carers?
- What is currently known about the previous employment of foster carers, and their current employment?
- What motivates people to become foster carers, what motivates them to stay and what things motivate them to leave?
- What impact does pay and reward have on recruiting or retaining foster carers?
- What are the barriers to some sections of the population coming forward to become foster carers?

Methods

This review consists of two elements:

*Element 1: Review of existing literature*

A review of existing published and unpublished literature has been undertaken. Studies carried out in the UK which explore the demographic characteristics of foster carers, along with issues associated with motivations, barriers, recruitment and retention have been included. The focus is on studies carried out since 2000. However, in order to both contextualise the findings, and to explore changes over time, some large scale studies carried out prior to 2000 were also included, most notably, Bebbington and Miles (1990) and Dando and Minty (1987).

Applied Social Sciences Index and Abstracts (ASSIA); International Bibliography of the Social Sciences (IBSS); Psychinfo; Social Care Online; and Google scholar databases were used to conduct the literature search. In order to identify the grey literature the following websites were also searched: The Fostering Network; BAAF; Department for Education; SCIE; C4EO; CWDC. Search terms included: foster carers/demographics/motivation/barriers/recruitment and retention. A database of literature was created and in total 32 publications were identified, the findings of which were bought together in order to answer the research questions outlined above.

While many common themes have been identified and are outlined in this report, it should be noted that the studies included were carried out for a range of purposes, using a range of parameters and sample selection methods. Therefore, it is not always possible to make direct comparisons between the different studies. Furthermore, the samples in a number of
the studies were not selected on the basis of demographic representativeness. Therefore, studies when taken in isolation may not present a representative picture of foster carers in the UK. However, collation of the findings across the studies does help to shed light on the questions raised in this review, and many recurring themes emerge.

The majority of the demographic information is drawn from six key studies. These studies are summarised in Table 1.

### Table 1: A summary of the key studies included in this report

<table>
<thead>
<tr>
<th>Study</th>
<th>Scope of the study</th>
<th>Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>Triseliotis, Borland and Hill (2000)</td>
<td>This study was carried out in Scotland and examines the characteristics, motives and social circumstances of active and former foster carers; why some carers leave the service and describes the experience of fostering, including the impact of fostering on carers' families.</td>
<td>The study included 835 foster carers drawn from seven of the 12 Scottish regional authorities, and one voluntary agency.</td>
</tr>
<tr>
<td>Kirton, Beecham and Ogilvie (2003)</td>
<td>This study explores foster carers' attitudes towards payments and foster care as a 'professional' task. Differences between local authority fostering services and Independent Fostering Providers were examined.</td>
<td>The study included 1,181 foster carers drawn from 16 local authorities in England and five Independent Fostering Providers.</td>
</tr>
<tr>
<td>Farmer, Moyers and Lipscombe (2004)</td>
<td>This study explores the experiences of foster carers' fostering of adolescents and the kinds of support required for these placements.</td>
<td>The study included interviews with 68 foster carers of adolescents aged 11-17 from 14 local authority fostering services and two Independent Fostering Providers in England.</td>
</tr>
<tr>
<td>Sinclair et al. (2004)</td>
<td>The findings of this report are drawn from three linked studies carried out over a six year period.</td>
<td>The studies were carried out in seven local authorities in England selected to provide geographical and social variety.</td>
</tr>
<tr>
<td></td>
<td>The study explores the experiences of foster carers and examines the ways that carers can be supported to reduce strain and turnover.</td>
<td>The studies included a census of 1,528 foster carers completed by fostering team social workers, followed up 17 months later and a survey of 994 foster carers in the authorities.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>The sample was reported by the authors to present a representative picture of foster carers at the time of the study's completion.</td>
</tr>
<tr>
<td>Brannen et al. (2007)</td>
<td>This study explores the factors that influence people's decision to enter and leave care work. The study includes four key groups: foster carers, residential social workers, family support workers and community childminders.</td>
<td>In total 74 foster carers participated in the study. The sample consisted of 38 foster carers from local authority fostering services in England and 36 from Independent Fostering providers.</td>
</tr>
<tr>
<td>OFSTED (2011)</td>
<td>This is a national survey of foster carers which reports the numbers and profile of foster carers and children, in both local authority and independent services covering the period between 1 April 2010 and 31 March 2011. It also gives data relating to types of foster care, registrations and de-registrations, and a range of other subjects.</td>
<td>The OFSTED (2011) survey reports a snapshot total of 38,157 fostering households in England between 1 April 2010 and 31 March 2011. Of these, 69% were foster carers from local authority fostering services and 31% were from IFPs.</td>
</tr>
</tbody>
</table>
Element 2: Geographical Information Systems (GIS) Analysis of the database of foster carers from one national association of foster carers

The aim of the GIS analysis was to provide information on the areas in which foster carers live. The research team were supplied with 24,760 anonymised records of households with foster carers in residence (by postcode) for a total of 41,881 foster carers in England.

- 7,639 postcodes for households which have one foster carer in residence.
- 17,121 postcodes for households which have two foster carers in residence.

The postcodes were used to explore the characteristics of the geographical areas in which foster carers reside. The analysis was conducted at the level of Lower Super Output Areas (LSOA), derived from the 2001 Census. There are 32,482 LSOA in England. Each LSOA has a minimum population of 1000 individuals and a mean of 1,500. The population size of LSOA ensured that households with carers in residence cannot be identified.

Two main datasets were utilised for this analysis:

- the English Indices of Deprivation (IMD2010) (Communities and Local Government, 2010); and
- Experian’s Mosaic Public Sector Citizen Classification for the United Kingdom (MPSCC) (Experian, 2009).

Further details on these data sets utilised and the geographical distribution of the foster care households are provided in Appendix A.

2 This work is based on data provided through EDINA UKBORDERS with the support of the ESRC and JISC and uses boundary material which is copyright of the Crown.

3 23,825 postcodes were used for the analysis (96% of the 24,790 records) for a total 40,415 foster carers in residence. A total of 965 postcodes (households) for a total of 1,466 foster carers (3.5%) were excluded from the analysis. Tied and unmatched records were excluded.
Findings

The demographic characteristics of foster carers in the UK: literature review

This section brings together the demographic profiles of the samples of foster carers in the included studies in order to build up a picture of the foster carer population in the UK.

Marital status

A number of studies carried out before 2000 (Dando and Minty, 1987; Bebbington and Miles, 1990) have found that foster families are ‘rather more traditional than other families’ (Sinclair et al. 2004:18). This ‘traditional’ familial structure can be described as a married couple in which one partner, traditionally male, works, while the other, usually female, stays at home to fulfil the caring responsibilities.

Table 2 compares the marital status of foster carers in a number of studies, with the latest statistics on the national population (Office for National Statistics, 2011).

Table 2: Marital status of foster carers

<table>
<thead>
<tr>
<th>Status (main carer)</th>
<th>National Population (%)</th>
<th>Foster carers by marital status (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Married</td>
<td>70¹</td>
<td>79</td>
</tr>
<tr>
<td>Cohabiting</td>
<td>16</td>
<td>4</td>
</tr>
<tr>
<td>Lone single parents/carers²</td>
<td>14</td>
<td>17</td>
</tr>
<tr>
<td>Lone parents/carers</td>
<td></td>
<td>17</td>
</tr>
<tr>
<td>Separated/divorced/widowed</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

¹ Includes both opposite sex married couples and same sex civil partners. Same sex civil partnership account for 0.24% of all families.
² The term ‘lone single carers’ refers to carers who are lone carers and are not divorced, separated or widowed.

Current evidence suggests that the majority of foster carer households consist of couple carers. The studies found that between 69% and 79% of foster carers are married or cohabiting compared to 86% of the national population. The data from the two studies that distinguish between married and cohabiting couples (Kirton, Beecham and Ogilvie, 2003; Martin, 2006), suggest that the proportion of married foster carers reflect national trends, while cohabiting couples are underrepresented in the foster carer population.

Direct comparisons between the data regarding lone carers are problematic due to the different ways the family types have been categorised between the studies. For example, the
Office for National Statistics (2011) and Farmer, Moyers and Lipscombe (2004) have included both single and divorced/separated/widowed carers in the lone parent category, where other studies have differentiated between these two groups. However, the data presented in Table 2 suggest that lone carers, most notably those who are divorced, separated or widowed, are slightly over-represented in the foster carer population. Lone carers are more likely to live in flats and rented accommodation, but relative to space size likely to foster more children than couple carers and less likely to have considered giving up fostering (Triseliotis, Borland and Hill 2000).

Dependent children

Triseliotis et al. (2000) found that over 90% of the foster carers in their sample had children of their own, with about 25% of these living away from home. Martin’s study found 64% of carers had dependent children (Martin, 2006). Sinclair et al. (2004) note that the number of dependent children in foster families has remained consistent over many studies and this consistency is borne out across the literature, as demonstrated in the table below (adapted from Sinclair et al. 2004: 25).

Table 3: The number of dependent children of foster carers

<table>
<thead>
<tr>
<th>Dependent children</th>
<th>Number of dependent children (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>49</td>
</tr>
<tr>
<td>One</td>
<td>27</td>
</tr>
<tr>
<td>Two</td>
<td>16</td>
</tr>
<tr>
<td>Three</td>
<td>6</td>
</tr>
<tr>
<td>Four or more</td>
<td>2</td>
</tr>
</tbody>
</table>

Kirton, Beecham and Ogilvie’s 2003 study found that foster carers in their sample without dependent children were significantly more likely to be approved for three placements (p <.001) and, though to a lesser extent, are likely to have more children in their care than other foster carers. These findings suggest that those without dependent children seem to provide a greater fostering resource. They were also significantly more likely to care for older children and to have long-term placements than carers with dependent children.
Age

Direct comparisons of the age of foster carers between different studies are somewhat complex due to the differing age bands used in different studies. Tables 4a and 4b summarise the ages of foster carers across four of the studies included in this review.

Table 4a: The ages of foster carers in Kirton, Beecham and Ogilvie (2003) and Martin (2006)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Female carers</td>
<td>Male carers</td>
<td></td>
</tr>
<tr>
<td>Up to 35</td>
<td>10</td>
<td>7</td>
<td>12</td>
</tr>
<tr>
<td>36-45</td>
<td>32</td>
<td>27</td>
<td>38</td>
</tr>
<tr>
<td>46-55</td>
<td>40</td>
<td>42</td>
<td>29</td>
</tr>
<tr>
<td>56 and over</td>
<td>18</td>
<td>24</td>
<td>20</td>
</tr>
</tbody>
</table>

Male and female carers were counted separately in this study and not in the other studies included in this section.

Table 4b: The ages of foster carers in Farmer, Moyers and Lipscombe (2004) and Clarke (2009)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>40 and under</td>
<td>13</td>
<td>6</td>
</tr>
<tr>
<td>41-50</td>
<td>53</td>
<td>29</td>
</tr>
<tr>
<td>51 - 60</td>
<td>28</td>
<td>38</td>
</tr>
<tr>
<td>Over 60</td>
<td>6</td>
<td>27</td>
</tr>
</tbody>
</table>

Findings across all the studies show that very few carers are under 35 years of age. Clarke (2009) raises some concerns regarding the ageing population of foster carers. Clarke (2009) found that 94% of the foster carers in her sample were aged over 40 (and 65% aged over 50). Clarke notes that older foster carers are able to bring considerable experience and expertise to their role of foster carers. However, while there is not a specified retirement age for foster care, an ageing population of carers may result in the loss of experience and expertise through retirement (Clarke, 2009). Furthermore, there is some evidence to suggest that the age of foster carers will increasingly become an important consideration given the trends towards longer term foster placements (Sellick, 2006; Clarke, 2009). However, carers from Independent Fostering Providers (IFP) have been found to be younger than their local
authority counterparts. In Kirton, Beecham and Ogilvie (2003) 52% of IFP female foster carers were under 45 compared with 39% of carers from local authorities. This may be due to the fact that the foster carers from IFPs in the sample were newer to fostering at the time of the study: 76% of IFP carers had been fostering for less than 10 years compared to 64% of those from local authorities (ibid).

The majority of the studies capture ‘snapshot’ data of the age of foster carers at a single time period. Triseliotis et al. (2000), however, recorded foster carers age when starting to foster and again at the time of the survey.

Table 5: Age range of foster carers when they started fostering and at time of survey (Triseliotis et al. 2000)

<table>
<thead>
<tr>
<th>Age range</th>
<th>Female carers (%)</th>
<th></th>
<th></th>
<th>Male carers (%)</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>At start</td>
<td>Time of survey</td>
<td>At start</td>
<td>Time of survey</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21-30</td>
<td>15</td>
<td>2</td>
<td>10</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31-40</td>
<td>45</td>
<td>26</td>
<td>43</td>
<td>18</td>
<td></td>
<td></td>
</tr>
<tr>
<td>41-50</td>
<td>27</td>
<td>42</td>
<td>33</td>
<td>43</td>
<td></td>
<td></td>
</tr>
<tr>
<td>51 and over</td>
<td>13</td>
<td>30</td>
<td>14</td>
<td>37</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Tables 4a, 4b and 5 suggest that, while the majority of the foster carers included in the studies were in their forties at the time of the research, foster carers are most likely to begin their careers between the ages of 31 and 40. However, this finding should be treated with some caution because it comes from only one study. The age at which foster carers begin to foster may reflect the findings relating to the lifestyle factors that influence why people begin to foster (explored further below).

**Ethnicity**

The latest figures from the Department for Education report 77% of children looked after between April 2010 and March 2011 were White; 9% Mixed; 5% Asian; 7% Black and 2% ‘Other’ (Department for Education, 2011). The literature suggests that ethnic minority groups may be underrepresented in the foster carer population. This finding is consistent with research carried out prior to 2000. For instance Bebbington and Miles (1990) found that 5% of the foster carers in their sample were from non-white backgrounds. The vast majority of foster carers in contemporary studies are found to be White British. Table 6 summarises the ethnicity of the samples in a number of studies, compared to the looked after children population. However, it should be noted that the samples in these studies were not selected on the basis of ethnic representativeness.
In all of the studies, except Brannen et al. (2007) White carers are over represented compared to the population of looked after children. This suggests that foster carers from BME background are under represented. However, BME families are not a homogenous group and the constituent proportions of foster carers from different ethnic groups varied across the studies. For instance, Black carers are over represented compared to the population of looked after children in Sinclair et al. (2004) and Ofsted (2011), and Asian carers are over represented in Brannen et al. (2007).

However, while looked after children describing themselves as 'Mixed' account for 9% of those in the care system (Department for Education, 2011), foster carers from Mixed backgrounds account for less than 3% of the population of foster carers.

The OFSTED (2011) survey reports a snapshot total of 38,157 fostering households between 1st April 2010 and 31st March 2012. Of these, 69% were foster carers from local authority fostering services and 31% were from IFPs. These fostering households consisted of 56,145 foster carers. Nationally 48,623 children and young people are being fostered by the IFPs included in the OFSTED survey. Of these children and young people, 78% were White, 9% Mixed, 5% Asian/Asian British, 7% Black/Black British and 2% are from other ethnic groups. Some secondary analysis of the OSFTED data carried out for this report led to the following breakdown by sector shown in Table 7 and the data clearly reveals the greater ethnic diversity in both populations within IFPs.

<table>
<thead>
<tr>
<th>Proportion of foster carers by ethnicity (%)</th>
<th>Proportion of looked after children by ethnicity (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bebbington and Miles (1990)</td>
<td>OFSTED (2011)</td>
</tr>
<tr>
<td>Sinclair et al. (2004)</td>
<td></td>
</tr>
<tr>
<td>Brannen et al. (2007)</td>
<td></td>
</tr>
<tr>
<td>White British</td>
<td>95</td>
</tr>
<tr>
<td>Black</td>
<td>3</td>
</tr>
<tr>
<td>Asian</td>
<td>0</td>
</tr>
<tr>
<td>Mixed</td>
<td>3</td>
</tr>
<tr>
<td>Other/Not stated</td>
<td>1</td>
</tr>
</tbody>
</table>

1 Percentages have been rounded to the nearest whole number where possible.
Table 7: Foster carers and looked after children by ethnicity in local authority and IFP fostering services (OFSTED, 2011)

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Local authorities</th>
<th>Independent Fostering Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Foster Carers (%)</td>
<td>Looked after children (%)</td>
</tr>
<tr>
<td>White</td>
<td>89</td>
<td>81</td>
</tr>
<tr>
<td>Mixed</td>
<td>1</td>
<td>8</td>
</tr>
<tr>
<td>Asian</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Black</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>Other</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

The table shows that, 13% of foster carers and 9% of looked after children placed with IFPs described themselves as Black, compared to 6% of both foster carers and looked after children within local authority fostering services. It is unclear from the literature why IFPs appear to have greater success at recruiting carers from a more diverse range of ethnic backgrounds.

There is some evidence to suggest that the proportion of Black lone foster carers is relatively high. Sinclair et al. (2004) found that 55% of foster carers from non-white backgrounds were lone parents. Male foster carers were more likely to be White British (96%) (Kirton, Beecham and Ogilvie, 2003).

Religion

The data on religion reported in the studies show how respondents identified themselves and do not measure the extent to which the foster carers actively practiced that religion. In Kirton, Beecham and Ogilvie (2003), 53% of female carers self-identified as Church of England, 12% Roman Catholic, 20% other, and 15% no religious affiliation. Male responses were fairly similar though with a higher figure (21%) for none. The ‘other’ category was very diverse. Muslim carers comprised only 1% of the sample. Most of Martin’s (2006) sample, almost entirely White British, reported either being Christian (78%) (53% C of E, 10% Roman Catholic, 15% unspecified) or with no religion (14%). Triseliotis, Borland and Hill (2000) found that 62% of their sample identified themselves as Protestant; 17% Roman Catholic, 10% Christian other. Twelve percent of female carers declared no religion.

Male carers

Male carers may be underrepresented in the samples in the existing literature (Gilligan, 2000; Wilson, Fyson and Newstone, 2007). It is unclear whether this is because of sample bias or
a reflection of the foster carer population as a whole. The relative absence of male carers in the literature may be related to employment patterns: whereby foster families tend to have a more traditional familial structure with one partner, usually male, having the principle responsibility for the financial support of the family. As many studies focus on the ‘main carer’, this is usually the female partner; this may also help to account for the underrepresentation of males in the literature (Gilligan, 2000; Sinclair et al. 2004; Wilson, Fyson and Newstone, 2007). There are, however, exceptions to this, most notably in Farmer, Moyers and Lipscombe (2004) study of fostering adolescents, who report that the main carer was male in 10% of the couple carers. It is unclear from the literature whether unique characteristics of fostering of adolescents result in a greater likelihood of the main carer being male or whether the higher proportion of male carers in this study is simply by virtue of the nature of the sample.

Male carers are found to be almost all married (> 90%) or cohabiting, (Kirton, Beecham and Ogilvie, 2003; Wilson, Fyson and Newstone, 2007). Only 2% of male carers were single (Kirton, Beecham and Ogilvie, 2003). Between 4% and 5% of lone single carers (those who are lone and not divorced, separated, or widowed) were male (Triseliotis, Borland and Hill, 2000; Kirton, Beecham and Ogilvie, 2003). A slightly higher proportion (15%) of lone carers were male in Wales (Collins and Butler, 2003).

**Education**

Table 8 summarises the highest qualification attained by the foster carers in the studies compared to the national population (Department for Business, Innovation and Skills, 2012).
Table 8: Educational attainment of foster carers

<table>
<thead>
<tr>
<th>Proportion of foster carers (%)</th>
<th>National Population of working age adults (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Collins and Butler (2003)</td>
</tr>
<tr>
<td>No Qualification or below Level 2</td>
<td>34</td>
</tr>
<tr>
<td>Level 2 (NVQ level 2 or GCSE)</td>
<td>30</td>
</tr>
<tr>
<td>Level 3 (NVQ or A'Levels)</td>
<td>21</td>
</tr>
<tr>
<td>Level 4 Degree Post graduate</td>
<td>9</td>
</tr>
<tr>
<td>Other</td>
<td>5</td>
</tr>
</tbody>
</table>

*Figures for the whole sample were not quoted in the original study. Therefore the total does not add up to 100%.

Studies show that the proportion of foster carers with no educational qualification is slightly higher than in the general population, although this difference is small. In Wales, Collins and Butler (2003) found that 34% of foster carers had no education compared to 33% in the general population of Wales. The findings presented in Table 8 suggest that the majority of foster carers are educated to Level 2 (GCSE or equivalent) or Level 3 (A'Level or equivalent) and that fewer foster carers are qualified up to degree level compared to the national population of adults of working age (Department of Business Innovation and Skills, 2012). In Scotland, Triseliotis, Borland and Hill (2000) found that only 17% of men and 20% of women foster carers had gone into further or higher education. The sample of foster carers in Brannen et al. (2007), however, reported having higher levels of educational attainment, with 28% reporting to have obtained a degree. This may be a result of the relatively small size of the study’s sample. There are, however, no studies which explore the impact of educational attainment of foster carers on the quality of care offered.

**Income**

The average (median) gross household income in the general population is £21,528: (Jin et al. 2011). The existing research suggests that foster carers’ average income is slightly below the national average. Twenty one percent of respondents in Kirton, Beecham and Ogilvie (2003) reported having a household income below £10,000 and a further 32% below
£20,000. Thirty six percent of the foster carers in Brannen et al. (2007) had a gross household income of less than £15,000 and 18% £15,000-£22,999. That amounts to a little over half of the respondents in both studies having a household income below the national average. Eleven percent of the respondents in Kirton, Beecham and Ogilvie (2003) and 46% in Brannen et al. (2007) reported having incomes over £30,000. Incomes among IFP carers tended to be higher than those of their local authority counterparts (Kirton, Beecham and Ogilvie, 2003). Single foster carers were much more likely to report having no additional income, as were more experienced carers (Kirton, Beecham and Ogilvie, 2003). While Kirton, Beecham and Ogilvie (2003) do not conclude definitively on the extent to which more experienced carers were likely to be older and therefore not working, the study found that older female foster carers of all levels of experience in foster care were less likely to be working. The study found that 49% of foster carers under 35, 44% of foster carers aged 36-45, 34% of foster carers aged 46-55 and 19% of foster carers aged 56 and over were in paid employment.

There is some evidence to suggest that a slightly higher proportion of foster carers are in receipt of benefits such as income support, as compared with the general population (Swain, 2007; Tearse, 2010).

**Employment outside foster care**

Research prior to 2000 suggested that foster carers generally reflected a traditional familial structure, with one parent (usually male) in employment, while the other (usually female) undertook the caring responsibilities at home. For instance, while they do not supply statistics, Bebbington and Miles (1990), describe foster care as an occupation for ‘unpaid mothers’ and equate the fall in the number of foster carers with the rise of women in employment. However, recent research suggests that increasingly both partners are in employment outside of the home, albeit on a part time basis for at least some of the time. In Kirton, Beecham and Ogilvie’s (2003) study, 71% of males within foster care households and 36% of females reported having paid employment in addition to their fostering commitments. In 39% of two-carer (male-female) households, only the former was in paid employment, while in 9% of cases it was the latter only. Thirty percent of such households had both carers in employment, while 22% had neither. This breakdown is very similar to that reported by Triseliotis, Borland and Hill (2000 p.49) who found that 72% of male and 37% of female carers (60% of these part-time) were employed outside the home. Martin (2006) found 40% of main carers were in employment other than fostering, a finding very similar to that of Sinclair et al. (2004): 39% (62% of them being in part time employment). Similarly, Swain
(2007) and Tearse (2010) found that 32% and 34% of carers respectively were in paid employment outside of fostering.

Lone carers are less likely to be in employment outside of the home. The Fostering Network suggests that 90% of lone foster carers do not have paid employment outside of the home (Swain, 2007; Tearse 2010). Collins and Butler (2003) found that 62% of lone foster carers had no employment outside of fostering.

Kirton, Beecham and Ogilvie (2003) plotted occupations of those foster carers in employment while fostering at the time of their study against the wider labour force using the Standard Occupation Classification (Office for National Statistics, 2000). The findings are shown in Table 9.

**Table 9: Occupations of foster carers and the general population (Kirton, Beecham and Ogilvie, 2003)**

<table>
<thead>
<tr>
<th>Occupation or Job Title</th>
<th>Female foster carers</th>
<th>National Average Female</th>
<th>Male foster carers</th>
<th>National Average Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>Managers &amp; Senior Officials</td>
<td>15%</td>
<td>9.1%</td>
<td>22%</td>
<td>17.5%</td>
</tr>
<tr>
<td>Professional Occupation</td>
<td>17.5%</td>
<td>10.6%</td>
<td>12%</td>
<td>13%</td>
</tr>
<tr>
<td>Associate Professional &amp; Technical</td>
<td>14%</td>
<td>13.7%</td>
<td>12%</td>
<td>13.1%</td>
</tr>
<tr>
<td>Administrative &amp; Secretarial</td>
<td>11%</td>
<td>23.5%</td>
<td>3%</td>
<td>5.1%</td>
</tr>
<tr>
<td>Skilled Trades</td>
<td>3%</td>
<td>2.1%</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td>Personal Services</td>
<td>27%</td>
<td>13.6%</td>
<td>5%</td>
<td>2%</td>
</tr>
<tr>
<td>Sales &amp; Customer Service</td>
<td>3%</td>
<td>12%</td>
<td>2%</td>
<td>4.5%</td>
</tr>
<tr>
<td>Process, Plant &amp; Machine Operatives</td>
<td>0.5%</td>
<td>3.3%</td>
<td>16%</td>
<td>12.9%</td>
</tr>
<tr>
<td>Elementary Occupations</td>
<td>8%</td>
<td>12%</td>
<td>8%</td>
<td>11.9%</td>
</tr>
</tbody>
</table>


In this sample, both female and male foster carers who were employed were twice as likely to be in Personal Service occupations compared with the wider population. Female foster carers were more likely to be employed in the Professional and Managerial occupations than the general population. This finding may appear incongruous with the findings presented above about the profile of foster carers. However, it is important to note that just over 30% of the female foster carers in the sample were working at the time of the study. Therefore, while a larger proportion of foster carers may be employed in Managerial and Professional
occupations than the general population, the size of these categories is quite small (accounting for between 4% and 5% of the total sample in the study). The data suggest that female foster carers in Managerial, Professional and Personal Service occupations may be more likely to continue in employment while fostering.

Using the Registrar-General's classification, Triseliotis, Borland and Hill (2000) found that female carers were more likely to be manual workers and less likely to be routine non-manual workers. Male carers had a similar pattern although it was closer to the general population and 40% of female foster carers had connections with some form of care work. Statham, Brannen and Mooney (2008) note that it is common for foster carers to have previous experience working with children. This is supported by several studies including Bebbington and Miles (1990), Farmer, Moyers and Lipscombe, (2004) and The Fostering Network (2012) who reported that 23%; 56% and 63% of foster carers respectively had previously worked with children prior to beginning to foster.

Sinclair et al. (2004) suggests that there is an association between availability to foster and employment. Eleven percent of foster carers in the study were categorised as inactive (defined as registered foster carers who were not fostering at the time of the study and not expected to do so again) and this was strongly linked to work: 30% of the inactive carers were in full time work, compared to 13% of those currently fostering. The relationship between employment and availability to foster may work in both directions: for instance, those foster carers without a current placement may be more inclined to take other paid work; while conversely those who have paid work may be more restrictive about taking on foster placement. A similar relationship was identified between inactivity and higher educational attainment. Sinclair et al. (2004) note that those foster carers with higher educational attainment may have more employment options and may choose to return to work rather than take new placements and therefore become inactive. By contrast, Wilson, Fyson and Newstone’s study of male foster carers (2007) found a small number of male carers (four in ten) had reduced their hours in employment to increase their foster caring activities. In such cases, this had been made possible by the remuneration (discussed below).

The picture of foster carers and their employment activities outside of the home is complex. This is in part due to the range of measures and parameters used by the studies included in this review, making conclusive comparisons between studies problematic to obtain. However, existing research would seem to suggest that an increasing proportion of main carers within two carer households are in employment outside of the home compared to research carried out prior to 2000. In two carer households, around 30% of foster carers are in paid
employment outside the home. Lone carers are less likely to be in employment outside of the home. The studies also suggest that experience in employment which involved working with children is common among foster carers. Foster carers in Professional and Managerial occupations appear more likely to continue working while fostering and those with higher educational attainment may have more employment options and may therefore be more likely to return to work when placements cease.

**Health & Wellbeing**

Foster carers in Kirton, Beecham and Ogilvie (2003) completed a health and wellbeing questionnaire based on the EuroQol EQ-5D. Responses showed that foster carers reported significantly lower levels of morbidity (i.e. were generally more healthy) across the study’s areas by comparison with the wider population. On the visual analogue scale, where respondents rated themselves on a scale of 0 – 100 for health and wellbeing, the mean score for foster carers’ state of health was 84.6 compared to a mean score of 82.5 for the UK population norms. However, these findings were not tested for statistical significance. The finding should, therefore, be interpreted with some caution. The following table shows comparisons for female carers by age and marital status.

**Table 10: The health and wellbeing of female foster carers by marital status (Kirton, Beecham and Ogilvie, 2003)**

<table>
<thead>
<tr>
<th></th>
<th>Married</th>
<th>Cohabiting</th>
<th>Separated/Divorced</th>
<th>Single</th>
<th>Widowed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Study National Survey</td>
<td>Study National Survey</td>
<td>Study National Survey</td>
<td>Study National Survey</td>
<td>Study National Survey</td>
</tr>
<tr>
<td>All Females</td>
<td>84.63 84.42</td>
<td>83.86 86.30</td>
<td>85.06 80.03</td>
<td>85.24 84.40</td>
<td>85.71 74.87</td>
</tr>
<tr>
<td>&lt; 35 yrs</td>
<td>84.54 87.52</td>
<td>82.47 86.77</td>
<td>88.29 82.31</td>
<td>84.43 86.18</td>
<td>90 100</td>
</tr>
<tr>
<td>36-45 yrs</td>
<td>86.42 87.35</td>
<td>88.86 84.05</td>
<td>86.04 84.35</td>
<td>86.19 84.76</td>
<td>90 73.50</td>
</tr>
<tr>
<td>46-55 yrs</td>
<td>83.79 82.90</td>
<td>79.53 90.38</td>
<td>83.10 80.28</td>
<td>86.39 78.13</td>
<td>86.25 82.20</td>
</tr>
<tr>
<td>56+ yrs</td>
<td>83.03 81.36</td>
<td>81.67 87.50</td>
<td>86.12 73.66</td>
<td>76.17 80.27</td>
<td>84.78 81.40</td>
</tr>
</tbody>
</table>

Overall, the sample in Kirton, Beecham, and Ogilvie (2003) scored moderately higher than the national survey. It is not clear how far there are health benefits deriving from foster care or whether it is only the healthier carers who continue to foster. Nonetheless, the health ‘premium’ for single/divorced/widowed foster carers is noticeable. Health ratings were found to be correlated (positively) with various aspects of satisfaction (with remuneration, support, feeling valued).
Martin’s 2006 survey found that 7% of main carers and 7% of partners reported a long-term illness, health problem or disability, which limits daily activity or the work they are able to do. Collins and Butler (2003) found that foster carers in Wales were slightly more likely to smoke, but much more likely to have good health compared to the general population. Triseliotis, Borland and Hill (2000) found that 60% of the foster carers in the sample reported that their health was very good and 35% good. Single women reported lower levels of health. Younger carers also reported poorer levels (c.f. Kirton, Beecham and Ogilvie, 2003). Sixty percent of households had at least one adult smoker.

**Housing**

Housing is noted as an important consideration in a small number of studies (Bebbington and Miles, 1990; Sinclair et al. 2004; Colton, Roberts and Williams, 2006). Housing may be a pertinent factor for some families and communities due to the requirement of a spare room to accommodate a foster child. This may exclude some families from fostering and there is some evidence to suggest that birth children may be required to share a room in some instances when a placement is filled in order to provide the spare room (Sinclair et al. 2004). Colton, Roberts and Williams (2006) note that in some cities, recruitment may be difficult due to limitation of the housing stock and physical lack of space. This may also exclude some families on lower incomes, who are unable to afford suitable accommodation (The Centre for Social Justice, 2008).

**Fostering Careers**

*Experience in Foster Care*

The literature suggests that many foster carers show extensive commitment to caring, with some continuing to provide care for extensive periods. For instance, a quarter of the carers in Sinclair et al’s sample (2004), and over a third of Kirton, Beecham and Ogilvie’s (2003) sample had fostered for ten years or more. Approximately half of the foster carers in Sinclair et al’s sample (2004) and 43% of the sample in Kirton, Beecham and Ogilvie’s (2003) study had been fostering for five years or less. Single, cohabiting, and carers from BME backgrounds were all found to be less experienced (Kirton, Beecham and Ogilvie, 2003), which could reflect either changing patterns of recruitment prior to the survey or shorter career spans.
Martin (2006) provides an average figure (nine years) for the length of placements (n=20) compared to an average of 6.9 years found in Sinclair et al. (2004), and seven years in Triseliotis, Borland and Hill (2000). In Wales, Collins and Butler (2003) found that the largest proportion of carers in their sample had been caring for under two years. Farmer, Moyers and Lipscombe’s (2004) study of foster carers of adolescents presents more experienced carers where only 4% had been fostering for a year or less, a further 33% between one and five years; 24% between five and ten years; 21% between ten and 15 years; and 18% more than 15 years.

Terms of approval

As Sinclair et al. (2004) observe, the fact that many foster carers foster for many years does not necessarily mean that they have been fostering the same child. The OFSTED (2011) survey records 39% of the 48,576 placements as time-limited and 32% as long-term/permanent; 13% family and friends care; 7% short break; 5% emergency; and 5% intensive/treatment. In a different formulation, Kirton, Beecham and Ogilvie (2003) reported foster carers as offering placements on the following basis - 31% short-term, 24% long-term and 45% a mixture of both. Martin (2006) found 12% of foster carers approved for long-term fostering only with a further 36% approved for long-term and other types of placement. Sinclair et al. (2004) asked survey respondents to report how long the foster children currently living with them had been there. The sample could be grouped into those who had been in the placement for six months or less (36%) and those who had been in the placement six months to two years (35%). The remaining children could be equally divided between those who had been in the placement between two and four years and those who had been there between four and ten years. Sinclair and colleagues (2004) also asked survey respondents to identify the types of placements they preferred: 30% reported that they prefer short-term (up to three months), 22% medium-term (four – 11 months) and 40% long-term fostering.

Precise age approval ranges are notoriously diverse: Martin (2006) reported 61 variations, but loosely summarised, Kirton, Beecham and Ogilvie (2003) found a fairly even three way split with 36% approved in the 0-ten years age range; 31% in the 11-18 years age range and 33% from ages below 11 (most frequently either 0 or five) up to 18. Sinclair et al. (2004) found their samples slightly biased towards younger children: 50% in the 0-nine range; 33% ten-15 and 17% aged 16 or older.

In Kirton, Beecham and Ogilvie’s (2003) study, the mean number of placements per household at any one time was 1.96, while Martin (2006) reported 1.83 and Sinclair et al.
(2004) reported 1.5. These figures are clearly rather higher than the OFSTED (2011) survey figure which, taken at face value, suggest 1.27 placements per fostering household.

OFSTED (2011) reported that 78% of local authority and 63% of IFP placements were filled and that 11% of local authority and 27% of IFA placements were vacant. Kirton, Beecham and Ogilvie (2003) found 33% of carers had fewer than their approved number of children, while 9% exceeded theirs. Martin (2006) calculated a vacancy rate at around 15%. This figure is congruent with that suggested by Tapsfield and Collier (2005).

Summary: The demographic characteristics of foster carers

This study has found that:

- The literature suggests that the majority of foster carer households consist of couple carers. While the proportion of married foster carers reflects national trends, the data suggest that cohabiting couples are under-represented in the foster carer population.
- Recent evidence suggests foster carers are increasingly found to be engaged in employment outside of foster care. A notable proportion of foster carers have experience in the caring or childcare professions. Lone carers are less likely to be employed outside of the home.
- The majority of foster carers in the studies were in their forties and fifties. However, there is some evidence to suggest that foster carers are most likely to begin fostering in their thirties.
- Studies suggest that foster carers have a slightly lower than average gross household income.
- Research suggests that carers from BME and mixed backgrounds are underrepresented in the foster carer population compared to the national population of looked after children.
- The studies show that a large proportion of foster carers are educated to GCSE level, a slightly higher proportion of foster carers have no educational qualifications and fewer foster carers are educated to degree level or above, compared to the national population of adults of working age.
The recruitment and retention of foster carers

Sellick and Howell note that ‘recruitment and retention of foster carers is probably the most important factor in delivering an effective fostering service’ (2003:10). Concerns have been raised regarding the impact of increased demand on the quality of services and a number of studies have suggested that the shortage of foster carers reduces placement choice and consequently, the likelihood of an appropriate, stable and nurturing placement being found (Sinclair et al. 2004; Sellick 2006; Colton, Roberts and Williams, 2006; Clarke, 2010). While Sinclair and Wilson (2003) note that suitable matches are often subject to intangible characteristics and ‘chemistry’ rather than demographic characteristics per se, they also note that the likelihood of finding that chemistry is increased with the supply of foster carers. There is some evidence to suggest that the rise in children becoming looked after has compounded the difficulties in placing those children who are traditionally considered to be more difficult to place, such as older children, those with complex needs and disabilities, those requiring long-term placements, those from BME backgrounds, sibling groups and unaccompanied asylum seeking children (Fisher et al. 2000; Clarke, 2010).

Amid concerns regarding the supply of foster carers, noted in the introduction, attention can be turned to the recruitment and retention of foster carers. This section of the report will explore what motivates individuals and families to either become or cease being foster carers and how targeted recruitment and retention strategies might improve the supply of foster carers, with particular focus on the gaps identified in previous sections.

Recruitment and retention statistics

The OFSTED (2011) survey provides a useful overview of recruitment and retention figures. Reported data from agencies showed that 6,832 new fostering households were approved during the year, offering a total of 10,571 placements. Five thousand and seventy households (7,434 placements) were lost during the year. This significant net gain seems to show a continuation of trends from previous years. OFSTED’s data also show that recruitment is greater in the independent sector than in local authorities. While Independent Fostering Providers (IFPs) account for only 31% of fostering households, they accounted for 40% of new approvals and 45% of ongoing applications. Similarly, although attrition rates were fairly similar between the two sectors at around 13-14% of households, recruitment rates diverged markedly, at 15% for local authorities and 25% for IFPs. New IFP approvals
also tended to involve more placements per household than for local authorities (1.73 and 1.47 respectively). Elsewhere, IFPs are found to have slightly better levels of success recruiting foster carers, and consequently, local authorities are increasingly relying on IFPs to support their looked after population (Collins and Butler, 2003; Sellick and Howell, 2003; Centre for Social Justice, 2008).

OFSTED data on applications for fostering show that there were 18,935 applications handled during 2011 of which 36% led to approvals, 24% were continuing, 36% voluntary withdrawal by the carer and 1% were rejected (OFSTED, 2011). The independent sector rates of approval were slightly lower (31%) and discontinued applications slightly more frequent (41%). Panel rejection rates were higher in local authorities (1.5%) than IFPs (0.4%). Only 17 cases nationally were recorded of prospective foster carers appealing to the Independent Review Mechanism (IRM). From a more limited sample of agencies, Kirton, Beecham and Ogilvie (2003) found average recruitment rates at 13% and attrition at 7% among local authorities. IFP data again showed larger net gains but the number of responses was very low. In those cases where information was available, the percentages of applications leading to approvals ranged from 40 to 91%, with a mean figure of approximately 60% (Kirton, Beecham and Ogilvie, 2003).

Triseliotis, Borland and Hill (2000) explore the different avenues through which foster carers began their careers. For the carers surveyed, 46% first became aware of fostering through friends, families or other (for example work) networks; 36% had responded to either a newspaper article or advert and 11% had responded to TV or radio. The Fostering Network (2012) report that on average it takes three years between considering fostering and approval.

**Motivation**

Statham, Brannen and Mooney (2008) suggest that understanding why people undertake different kinds of work may help to inform recruitment strategies. Similarly, understanding the reasons why individuals and families may put themselves forward to foster and the reasons why some delay fostering, or do not foster at all, may also inform recruitment and retention strategies. While there is some literature on the reasons why existing foster carers continue to foster and the personal rewards they gain for doing so, there is less exploration of the initial motivations and barriers among prospective carers. This is largely because current studies focus on existing foster carers.
A number of studies do, however, ask existing carers about their motivations retrospectively. The study of motivation in the current literature tends to focus on attitudes towards remuneration and support, and on broader questions of orientation towards foster care. Much of the literature cites ‘intrinsic’ reasons for fostering, such as:

- having ‘something to offer’ (Gilligan, 2000; Sheldon, 2002; Farmer, Moyers and Lipscombe, 2004; Sinclair et al. 2004);
- fondness for children (Dandy and Minty 1987; Farmer, Moyers and Lipscombe, 2004; Brannen et al. 2007);
- awareness of need or wanting to help vulnerable children (Sinclair et al. 2004; Brannen et al. 2007; Centre for Social Justice, 2008); and
- extending the family or the fact that fostering suits family circumstances (Dando and Minty, 1987; Farmer, Moyers and Lipscombe, 2004; Statham, Brannen and Mooney, 2008; Barratt, 2002).

Motivations for fostering have also been linked to childlessness or desire to extend the family when the carers’ own children have grown older and/or left home (Dandy and Minty 1987; Farmer, Moyers and Lipscombe, 2004). Various motivations were cited by Triseliotis, Borland and Hill (2000) as reasons for fostering, the most common of which were (female carers only):

- having ‘something to offer’ (38%);
- fondness/liking for children (35%);
- awareness of need (21%);
- suits current family circumstances (17%);
- create/extend family (11%); and
- children grown up/away (7%).

There is some evidence to suggest that a notable proportion of foster carers have previously been employed in the caring professions and foster care offers them a suitable alternative to employment (Statham, Brannen and Mooney, 2008). Fostering has also been cited as a convenient way to increase the family income when one or more partners wishes to continue caring for their own children (Statham, Brannen and Mooney, 2008; Barratt, 2002).
Carers’ own experiences and subsequent empathy for vulnerable children has been cited as a key motivating factor (Dando and Minty, 1987; Farmer, Moyers and Lipscombe, 2004; Brannen et al. 2007; Barratt, 2002). Some foster carers have reported that their own past experiences, in some cases their own experiences in care, have given them ‘something to offer’ children in similar situations (Dandy and Minty 1987; Farmer, Moyers and Lipscombe, 2004; Barratt, 2002). Indeed, in a study comparing the motivations of foster carers with how highly they were rated by social workers Dando and Minty (1987) report that those carers who had themselves been in care were rated highly by family placement and allocated social workers.

In Martin’s (2006) study of a local authority’s fostering services, 72% of foster carers thought qualifications and accreditation important (and more-so at higher levels) but at the same time skills and experience, notably from parenting, were all thought to be either as, or more important. In Brannen et al. (2007) foster carers were more likely than other workers caring for vulnerable children (child-minders, residential social workers and family support workers) to disagree that formal training was necessary for their job. Farmer, Moyers and Lipscombe (2004) found that a notable proportion of the foster carers in their sample had attended training prior to placement (75%) and ongoing training (69%).

Male Carers

The evidence regarding the motivations of male carers is mixed. This may in part be due to the relative dearth of current data on male carers, as noted above. Triseliotis, Borland and Hill found that 13% of male carers said that they had fostered to please their partners and Gilligan’s study suggests that a number of male carers are motivated by playing a supportive role to their partners as the main carer (Gilligan, 2000). By contrast, Wilson, Fyson and Newstone (2007) suggest that, while initiating the idea of fostering was primarily the act of female partners, male partners quickly became involved in the decision making, application and training process. This study found little difference between male and female carers’ motivations for fostering. Having ‘something to offer’ was a common motivation among foster carers of both genders. However, the literature suggests that male carers see their role as unique. Most notably, male carers consider themselves to be able to present positive male role models for both male and female foster children, which can have a restorative or therapeutic impact on children for whom fathers have been absent or abusive (Gilligan, 2000; Wilson Fyson and Newstone, 2007).
Barriers

As noted above, there is limited knowledge about the barriers identified by prospective foster carers which may prevent them from deciding to foster, although a little more is known about why current foster carers consider stopping their fostering. In a number of studies current foster carers and fostering services were asked why they thought that other individuals and families did not come forward. The main reasons put forward were:

- lack of awareness of need (Triseliotis, Borland and Hill 2000; Sellick and Howell, 2003);
- lack of confidence (Triseliotis, Borland and Hill 2000; Clarke, 2009);
- lack of understanding of what is involved in the role (Clarke, 2009);
- fears of assessment/rejection (Triseliotis, Borland and Hill 2000; Clarke, 2009);
- mistrust of social workers (Triseliotis, Borland and Hill 2000);
- the (foster) children’s problems (Triseliotis, Borland and Hill 2000);
- fears of accusations of wanting to make money from children (Triseliotis, Borland and Hill 2000);
- discomfort over children returning to their birth families (Triseliotis, Borland and Hill 2000);
- lack of accommodation (Triseliotis, Borland and Hill 2000);
- fears of false allegations of abuse (Gilligan, 2000; Triseliotis, Borland and Hill 2000); and
- media coverage and public perceptions of social care (The Centre for Social Justice, 2008).

Remuneration and the professionalisation of foster care

The relationship between remuneration and recruitment and retention of foster care is one that has been extensively explored across current literature. While financial reward is not widely cited as an initial motivating factor for fostering (Kirton, Beecham and Ogilvie, 2007), the ability financially to support a family, including foster children, is cited as a practical consideration for prospective and existing carers when deciding whether to accept a placement (Kirton, 2001; Kirton, Beecham and Ogilvie, 2003; Sinclair et al. 2004; The Fostering Network, 2012). This is supported in Kirton, Beecham and Ogilvie’s (2003) findings on the part played by financial matters in choices to foster. Here 76% of foster carers reported knowing little or nothing about fostering payments at the outset, and 70% stating that payments figure ‘very little’ or ‘not at all’ in decisions to foster. However, it should be noted that newer carers were more likely to be knowledgeable and concerned about
payments, although these are a minority. BME carers reported greater consideration given to finances as a motivating factor than white counterparts as did those fostering teenagers.

Despite this starting point, and as evidenced in other studies, a clear majority of foster carers supported ‘reward’ payments, with 72% arguing that fees should be paid and 61% arguing for a salary (c.f Swain, 2007; Tearse, 2010). Martin (2006) reported 60% in favour of ‘reward’ payment. Support for payment was associated with those who were neither particularly new to foster care nor especially long-serving; who were fostering older children; and (perhaps surprisingly) offering long-term placements; and also those who either had no alternative income or stated that they regarded foster care as an alternative to paid employment. Martin (2006) found higher support among single carers, who as noted above, are less likely to be in employment outside of foster care. Support for payment has been found to be positively correlated with support for professionalisation (Kirton, Beecham and Ogilvie’s, 2003; Martin, 2006).

The professionalisation of foster care is a notable feature of much of the literature regarding recruitment and retention (Sinclair et al. 2004; Kirton, Beecham and Ogilvie, 2007; Swain, 2007; Colton, Roberts and Williams, 2006, Tearse, 2010). The literature, however, is mixed with regard to the impact professionalisation would have on recruitment and retention: while some studies show strong support for the professionalisation of foster care (Swain, 2007; Tearse, 2010), other studies highlight concerns regarding the impact that this would have on foster carers and the children they care for. For instance, Colton, Roberts and Williams (2006) note that foster carers have highlighted concerns regarding the impact that professionalisation would have on foster children’s perception of foster carers’ motivations. Pithouse, Lowe and Hill-Tout (2004) found that although just under a quarter of foster carers caring for children with challenging behaviour stated that supplementing their income was a part of their fostering activities, the study’s participants did not see their role as a professional one. While there is strong support for the idea of fostering as a job, most foster carers emphasise the parental element of foster caring (Kirton, Beecham and Ogilvie, 2003; Farmer, Moyers and Lipscombe, 2004; Martin, 2006). For example, in Kirton, Beecham and Ogilvie (2003), despite the very high level support for ‘reward’ payment and widespread use of a discourse around employment, 66% of respondents agreed that fostering was ‘more like parenting than a job’. Similarly, Martin (2006) found closeness to the parental role endorsed by over 90% of respondents, but 60% nonetheless considered it a job. Those foster carers with higher skill level ratings were much more likely to regard foster care as a job.
In terms of potential impact on motivation, dissatisfaction with payments is fairly high across the literature. Kirton, Beecham and Ogilvie (2003) reported 45% satisfied, 38% dissatisfied and the remainder unsure. Satisfaction is found to be only partially linked to actual levels of payment. Martin (2006) reported 63% satisfaction, but this followed a significant rise in payments in the local authority. In their study of over 300 foster carers, the Centre for Social Justice (2008) found that almost half (46%) felt unsupported financially. In Kirton, Beecham and Ogilvie (2003) IFP carers were markedly more satisfied than those in local authorities (75% and 39% respectively), but some of the payment gaps may have narrowed since then (Swain, 2007; Tearse, 2010). Dissatisfaction was found to be linked to ethnicity (higher among BME carers), having dependent children and length of fostering careers (highest among those fostering for between two and ten years) (Kirton, Beecham and Ogilvie, 2003). Thirty five percent of foster carers of adolescents were dissatisfied with the payments they received (Farmer, Moyers and Lipscombe, 2004). Tearse (2010) found that 65% of foster carers think that their income is not enough for the job that they do and that 36% of foster carers had considered ceasing to foster because the payments are insufficient. Collins and Butler (2003) found that the majority of foster carers in their study reported that the payment received for fostering does not cover the additional costs incurred.

Despite the introduction of a national minimum allowance for foster carers in 2007, some studies have found substantial variations in remuneration across localities, placement types and foster carers with different levels of experience (Brannen et al. 2007; Swain, 2007; Tearse, 2010). Studies have found that, while financial reward is not generally cited as an initial motivation for fostering, local authorities and IFPs with higher payments to foster carers report fewer recruitment difficulties (Sinclair et al. 2004; Brannen et al. 2007; Swain, 2007). It is evident that while it may not be a motivating factor for all foster carers, remuneration plays a key role in enabling foster carers to foster (Colton, Roberts and Williams, 2006; Swain, 2007; Clarke 2010; The Fostering Network, 2012). Tearse (2010) found that 62% of foster families report that they are reliant on the fostering income. The Fostering Network (2012) state that 42% of carers report that fostering is their only source of income. Sinclair et al. (2004) found that foster carers not in full time employment were significantly more likely to want to continue caring for the next two years. There was no evidence of a link between foster carers’ perceived generosity of payments and their reported intention of leaving in Sinclair et al’s study. However, those carers who received a higher level of income from fostering were less likely to leave. Sinclair et al. (2004) note that while this finding is highly significant it is not necessarily associated with higher payments, rather payments may be associated with the number of children as well as their ages, which have previously been associated with longer periods of fostering.
Retention

Turnover rates of foster carers are estimated at approximately 10% (Collins and Butler, 2003: 9.5%; Triseliotis, Borland and Hill 2000 8%; Sinclair et al. 2004 10%; c.f Clarke, 2009; OFSTED, 2011). As previously noted, much of the current research has been carried out with exiting foster carers. Therefore, explorations of retention have focused on why current foster carers consider or intend to cease fostering. The one exception to this pattern is Triseliotis, Borland and Hill (2000) who included those who had ceased fostering in their study, comparing this group with those who had continued to foster. In terms of background characteristics, those who stopped were more likely to be in poor health, have larger families/dependent children; be active worshippers; hold non-manual occupations (female); and have larger houses. Those stopping were also more likely to have fostered young children; have fewer breaks; have placements outside their preferences; and experience contact problems with birth parents. The most frequently stated reasons from those giving up, as reported by Triseliotis, Borland and Hill (2000) were:

- dissatisfaction with the service (26%);
- retirement/illness (19%);
- adoption (18%);
- children’s behaviour (17%);
- ‘needing to work or move house’ (15%);
- impact on own family (12%);
- stress and no respite (10%).

Main reasons for carrying on despite thoughts of giving up were fondness of particular child (37%) and awareness of the need (33%). Sinclair and colleagues (2004) found that foster carers under 35 were twice as likely to cease fostering in the research period compared to those aged over 35, although those findings were not statistically significant. Collins and Butler (2003) found that there was no statistically significant average length of service at which a foster carer is most likely to resign. Lone carers were somewhat more likely to cease caring, compared to those in partnerships (Sinclair et al. 2004). This was not found to be statistically significant; however, the association between the likelihood of lone carers leaving was stronger among those lone carers who reported not having a strong support network.

Much of the analysis of retention focuses on the intrinsic rewards of fostering which motivate foster carers to continue. A sense of satisfaction is closely associated with retention (Sellick
and Howell, 2003). Butler and Charles (1999) note that there are ‘tangible’ rewards (such as remuneration) along with intangible rewards (such as love, a sense of fulfilment and making a difference to a child’s life) reported by existing foster carers. Kirton, Beecham and Ogilvie (2007) note that while there is no statistically significant relationship between satisfaction with remuneration and retention, there is some evidence to suggest that higher payments may be linked to longer continuation of foster carers (c.f. Swain, 2007; Tearse, 2010; The Centre for Social Justice, 2008; Colton, Roberts and Williams, 2006).

Triseliotis, Borland and Hill (2000) asked foster carers about the benefits and attractions of fostering. These findings linked with other studies and were found to be broadly linked to intrinsic rewards such as: seeing children progress (28%) (Brannen et al. 2007); sense of achievement (25%); job satisfaction (20%); enhancement of our lives (16%); insight into other people’s problems (9%); and doing something worthwhile (9%) (Brannen et al. 2007). This study also identified the worst aspects of fostering which were identified as: operation of the fostering services (24%); children’s problems (20%); hard work and stress (20%); when children leave (10%).

Other research, such as that carried out by Sinclair et al. (2004), explores whether existing foster carers had considered leaving fostering. Sinclair and colleagues found a small association with intention to leave and number of years fostering, and suggest that continuing to foster may be linked with a commitment to fostering a particular child. These carers therefore leave after that child has left care and do not go on to foster several children. Foster carers with older children tended to be more likely to express an intention to finish fostering than those with younger children, and this may be a factor of timing whereby the foster carer chooses to stop fostering when the children’s placement ends. Sinclair et al. (2004) note, however, that future and unpredicted events play a large role in the continuation of fostering. Predictions of who is likely to cease are, therefore, difficult to make. Martin’s (2006) study asked questions about whether foster carers had considered leaving, and 42% indicated that they had.

Factors associated with children’s needs and, most notably mismatches between children and their placements feature frequently within the literature (Fisher et al. 2000; Triseliotis, Borland and Hill, 2000; Statham, Brannen and Mooney, 2008). For instance, some studies have found that foster carers have been asked to take placements for which they are not approved (Clarke, 2010) or have not been given sufficient information about children and their needs prior to placement (Collins and Butler, 2003; Farmer, Moyers and Lipscombe, 2004). Insufficient information about children prior to placement was reported to restrict
carers’ ability to prepare appropriately for the placements, and was linked to increased stress and placement breakdowns, resulting in foster carers considering leaving (Farmer, Moyers and Lipscombe, 2004).

Fear of allegations of abuse against foster carers was also cited as a reason for considering leaving fostering (Triseliotis, Borland and Hill 2000; Collin and Butler, 2003). Allegations of abuse are of particular concern to male carers, who in some cases reported being reticent to participate in foster caring activities for fear of allegations (Gilligan, 2000).

A number of studies have noted that feelings of inadequacy following placement breakdowns have also prompted some foster carers to consider leaving (Butler and Charles, 1999; Triseliotis, Borland and Hill 2000; Martin, 2006). There is some evidence to suggest that guilt or feelings of failure after a placement breakdown, or when the expected rewards of fostering are not achieved are also associated with foster carers considering leaving (Butler and Charles, 1999). Butler and Charles (1999) note that presenting realistic expectations to prospective carers along with better discussions regarding why placements breakdown, may help to retain some foster carers. Farmer, Moyers and Lipscombe (2004) go on to argue that some foster carers may need more time to recover from difficult placement breakdowns than they are often given, and propose that the payment of retainers to allow foster carers more time to recuperate and reflect without them feeling under pressure to resign from the role for emotional or financial reasons.

Foster carers have reported that during a placement the job is ‘24 hour’ (Farmer, Moyers and Lipscombe, 2004) and that they are less likely to have access to time off for family emergencies or other family reasons than other members of the children’s workforce (Farmer, Moyers and Lipscombe, 2004). Therefore, ‘burn out’ and the effect on the foster carers’ own family is cited within the literature as a reason that foster carers consider leaving (Triseliotis, Borland and Hill 2000; Martin, 2006). While caring for foster children can be an extremely rewarding experience, these rewards can be accompanied with periods of considerable stress (Sheldon, 2002; Farmer, Moyers and Lipscombe, 2004; Pithouse, Lowe and Hill-Tout, 2004; Sinclair et al. 2004; Colton, Roberts and Williams, 2006). Children in care, almost by definition, generally have higher needs than children in the general population and may have particularly complex needs, including emotional or behavioural difficulties (Pithouse, Lowe and Hill-Tout, 2004). Such stressful periods or events and their impact on the carer or the family, is one reason for leaving fostering (Triseliotis, Borland and Hill, 2000; Wilson, Sinclair and Gibbs, 2000; Pithouse, Lowe and Hill-Tout, 2004). Wilson,
Sinclair and Gibbs (2000) identify six stressful event types and carers reported experiencing these events in the following proportions (pp. 198):

- 13% had experienced the removal of a foster child against the advice of the foster carer;
- 16% an allegation of abuse by a child;
- 19% a strong disagreement with social care regarding the plans for a child;
- 25% difficulties with the child’s birth parents;
- 31% family tensions because of a difficult foster placement;
- 47% had experienced breakdown or disruptions to a placement.

Wilson and colleagues report that experiences of stressful events do result in foster carers thinking about leaving, although the foster carers in their sample demonstrated considerable resilience and commitment to foster care. However, as noted by the Centre for Social Justice (2008) the impact of stress does not only relate to recruitment and retention, it may also have an impact on the outcomes of the child in care.

*The retention of foster carers: support*

Through the literature, good support and the closely related ‘feeling valued’, consistently emerge as key factors in retaining foster carers. Conversely the lack of sufficient support, especially at times of familial crisis or placement breakdown, is strongly linked with foster carers leaving or thinking about it (Butler and Charles, 1999; Fisher et al. 2000; Triseliotis, Borland and Hill 2000; Sheldon, 2002; Collins and Butler, 2003; MacDonald, Burgess and Smith, 2003; Sellick and Howell, 2003; Farmer, Moyers and Lipscombe, 2004; Sinclair et al. 2004; Martin, 2006; Sellick, 2003; Colton, Roberts and Williams, 2006). In Sheldon’s (2002) study asking whether existing foster carers would recommend fostering to a friend, those who would not cited difficulties and lack of support from social care services as the reason.

With its complex dynamics and strong subjective elements, support is a difficult concept to measure, but study data does cast light on some of its key aspects. Kirton, Beecham and Ogilvie (2003) and Sinclair et al. (2004) found that feelings of support were significantly linked to ‘objective’ measures such as the frequency and duration of family placement and supervising social worker visits, having an allocated children’s social worker, receipt of care plans and prompt annual reviews. Of those carers who received monthly social worker visits lasting over an hour, had experienced no unallocated cases, always received care plans and had their review on time, 86% rated their support (very) good and only 1% rated it as poor. Conversely, of those lacking all these aspects of service delivery, only a quarter rated the
support as (very) good and over half as (very) poor. Receipt of good background information on the child and their education were correlated with carers feeling valued and importantly with lower rates of placement breakdown (Sinclair et al. 2004; Martin 2006). Kirton, Beecham and Ogilvie (2003) found fairly positive views of overall support, with 55% rating it (very) good, 31% adequate and 14% regarding it as (very) poor. Although it would be very difficult to untangle the links, there is evidence from a set of positive correlations that feelings of support form part of a ‘virtuous circle’, whereby those carers who feel better supported are more likely to participate in support groups, training, social events and a culture in which carers feel valued and listened to (Kirton, Beecham and Ogilvie, 2003; Sinclair et al. 2004). One measure of the importance of support was Kirton, Beecham and Ogilvie’s (2003) finding that only 22% of foster carers would favour higher payment if this was funded through a reduction in support services.

Specialist and specific support for foster carers supporting children with challenging behaviour has been highlighted as essential for ensuring that foster carers with this particular expertise and experience continue to be available for placing children (Pithouse, Lowe and Hill-Tout, 2004). Research has found that close links with family placement social workers (Fisher et al. 2000; Farmer, Moyers and Lipscombe, 2004; Sinclair et al. 2004), clear and consistent communication between fostering teams and foster families (Fisher et al. 2000), access to out of hours and other professional support services (Farmer, Moyers and Lipscombe, 2004; Sinclair et al. 2004) and feeling part of a wider team supporting a child (Fisher et al. 2000; Farmer, Moyers and Lipscombe, 2004) influence foster carers’ decisions to continue fostering. The availability of informal support networks, such as other foster carers, the foster carers own family and friends and religious communities have also been associated with retaining foster carers (Butler and Charles, 1999; Farmer, Moyers and Lipscombe, 2004; Sinclair et al. 2004). Wilson, Sinclair and Gibbs (2000) observe that those foster carers who report having strong formal (from professionals) and informal (from family and friends) support networks are more likely to continue to foster after stressful events. The literature also suggests that support that is targeted and specific to foster families’ needs is valued by foster carers. For instance, in order to counteract the impact of allegations of abuse (noted above) specific support for male foster carers has been associated with continued participating in care (Gilligan, 2000). Lone carers note that they also require specialist support to ensure they are able to sustain their role as foster carers with particular attention paid to the limited access to groups, meetings and training resulting from lack of alternative childcare (Farmer, Moyers and Lipscombe, 2004).
The extent to which foster carers felt supported is strongly linked in the literature to the extent to which foster carers felt valued by professionals and fostering services. Overall the literature suggests that foster carers did feel valued. In Kirton, Beecham and Ogilvie’s (2003) study, 47% (rising to 70% in IFPs) of carers stated that they felt valued, 16% that they did not and the remainder ‘sometimes’. Martin (2006) report that 66% of foster carers felt valued and 60% reported that their views were taken into account. The proportion of carers satisfied with the levels of support was higher still in Triseliotis’ study (88%). However, there is some evidence to suggest that those carers in support of the professionalisation of foster care tended to feel less valued. Although there were some signs of this in Kirton, Beecham and Ogilvie (2003), this emerges more clearly in Martin (2006). This may reflect the greater expectations and aspirations of those with a more professional orientation to foster care, while Martin also notes the impact of typically facing more challenging placements (Martin, 2006). Therefore, the professionalisation of foster care may not only help to retain foster carers by way of higher payments (as discussed above) but may also help foster carers feel more valued.

GIS Analysis

The Geographical Information System (GIS) analysis sought to provide information on the areas in which foster carers live, and to shed light on associated demographic factors, using the English Indices of Deprivation, 2010 (Communities and Local Government, 2010) and Experian’s Mosaic Public Sector Citizen Classification for the United Kingdom (MPSCC) (Experian, 2009). The English Indices of Deprivation uses 38 separate indicators organised across seven distinct domains of deprivation which can be combined, using appropriate weights, to calculate the Index of Multiple Deprivation 2010 (IMD 2010) and the Mosaic Public Sector Citizen Classification (MPSCC) classifies all individuals, households or postcodes in the United Kingdom into a set of homogeneous lifestyle types (see Appendix A). These data sets enabled additional information to be obtained about some measures of demographic characteristics through geographical analysis.

For this analysis all households in England were organised into groups of approximately 10% of the overall number of households in England, organised by the level of deprivation (starting with the 10% of the most deprived households and so on). These groups are the ‘deprivation deciles’.
The literature review suggests that foster carers have a slightly lower than average (median) gross household income. The GIS analysis found that foster carers in England live in areas at all levels of deprivation (as measured by the overall IMD 2010).

The distribution of foster carers in each deprivation group is shown in Table 11. There is an average of 10% of foster carers in each deprivation group. A lower percentage (8%) of carers is found in the two extreme deprivation groups, the worst and least deprived groups. These findings are consistent across all deprivation domains excluding the Education Domain.

**Table 11: Distribution of foster carers by deprivation deciles**

<table>
<thead>
<tr>
<th>IMD 2010 Rank (deciles)</th>
<th>Carers (counts)</th>
<th>% carers</th>
<th>Households with carers (counts)</th>
<th>% Households with carers</th>
<th>Households in England (counts)</th>
<th>Average (Median) Household Income (£)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 - 10% Most Deprived</td>
<td>3065</td>
<td>8</td>
<td>1948</td>
<td>8</td>
<td>2198750</td>
<td>18835</td>
</tr>
<tr>
<td>10 - 20%</td>
<td>3841</td>
<td>10</td>
<td>2422</td>
<td>10</td>
<td>2180007</td>
<td>22481</td>
</tr>
<tr>
<td>20 - 30%</td>
<td>4280</td>
<td>11</td>
<td>2648</td>
<td>11</td>
<td>2211333</td>
<td>25289</td>
</tr>
<tr>
<td>30 - 40%</td>
<td>4534</td>
<td>11</td>
<td>2679</td>
<td>11</td>
<td>2230063</td>
<td>27427</td>
</tr>
<tr>
<td>40 - 50%</td>
<td>4793</td>
<td>12</td>
<td>2814</td>
<td>12</td>
<td>2259319</td>
<td>29779</td>
</tr>
<tr>
<td>50 - 60%</td>
<td>4551</td>
<td>11</td>
<td>2658</td>
<td>11</td>
<td>2275651</td>
<td>32453</td>
</tr>
<tr>
<td>60 - 70%</td>
<td>4270</td>
<td>11</td>
<td>2422</td>
<td>10</td>
<td>2285965</td>
<td>34942</td>
</tr>
<tr>
<td>70 - 80%</td>
<td>4084</td>
<td>10</td>
<td>2303</td>
<td>10</td>
<td>2287899</td>
<td>37212</td>
</tr>
<tr>
<td>80 - 90%</td>
<td>3820</td>
<td>9</td>
<td>2134</td>
<td>9</td>
<td>2432482</td>
<td>39750</td>
</tr>
<tr>
<td>90 - 100% Least Deprived</td>
<td>3177</td>
<td>8</td>
<td>1797</td>
<td>8</td>
<td>2407523</td>
<td>44789</td>
</tr>
</tbody>
</table>

The GIS analysis supports the findings of the literature review with regard to education, highlighting the fact that there are only 5% of foster carers living in the least deprived areas on the education domain compared to 9% living in the most deprived group (Table 12). In this instance, ‘least deprived’ indicates that the most educated people live in these areas.
An analysis of the deprivation groups and the Experian’s Mosaic Public Sector classification explored the general characteristics of households living in these areas. It must be stressed that these are area characteristics rather than individual characteristics, and consequently these findings should not be used as a basis for inferring characteristics of foster carers.

The analysis investigated the association between levels of deprivation and the Experian classification groups. It highlights which neighbourhood types (as described by the Experian classification) are associated with increasing (or decreasing) deprivation levels. However, the use of large units of analysis⁴ meant that it was not possible to establish the proportion of foster carers living in neighbourhood types. In addition, a more detailed analysis was beyond the time frame and scope of this study (see Appendix B for more information).

The main aim of this analysis is to provide an overview of the neighbourhood types in which foster carers live. However, given the limitations explained in the previous paragraph it is not possible to provide the proportion of foster carers living in the neighbourhood types. The aim of this analysis is to set the context in which foster carers live. These types are summarised below.

Firstly, a mix of low-income communities characterises the most deprived areas in which foster carers live. These communities include:

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⁴ Each decile includes 3,248 Lower Super Output Areas (see Appendix A).
• lower income workers from ethnic minority groups that live in urban terraces close to the centres of small towns or in London;
• residents with sufficient incomes in right-to-buy social housing in the South East of England and in smaller centres and market towns;
• elderly people reliant on state support who live in the UK’s principal coastal retirement destinations and in the Northern industrial cities;
• young people renting flats in high density social housing living in inner London and to a lesser extent large provincial cities in the North of England; and
• families in low-rise social housing with high levels of benefit need. This group includes some of the most disadvantaged people in the UK who live in the periphery of large provincial cities, such as Liverpool, Hull and Middlesbrough.

Secondly, the middle-to-least deprived areas in which foster carers live are characterised by a mix of better-off communities. These include:
• residents of small and mid-sized towns with strong local roots in the South West of England, East Anglia and the East Midlands;
• wealthy people living in the most sought after neighbourhoods such as inner suburbs in London or on the outskirts of big cities;
• successful professionals living in the outer suburbs of large cities or semi-rural dormitory villages;
• middle income families living in moderate suburban areas;
• couples with young children in comfortable modern housing living in London commuter belt; and
• active elderly people living in pleasant retirement locations on the coast or in rural areas.

Foster carers also live in areas characterised by average levels of deprivation. These middle-income communities include:
• young singles and couples in small modern starter homes in inner city locations;
• residents of rural communities who live in small villages, isolated farmhouses or cottages; and
• owner occupiers in older-style housing in ex-industrial areas scattered across England, the coal fields of the East Midlands and South Yorkshire, the Pennine fringes and the North East of England.

An analysis of the characteristics of the communities in which foster carers live may inform the recruitment activities of fostering services.
Conclusion

As noted throughout this report, research into the demographic characteristics of foster carers prior to 2000 has generally reported that foster carers present a more 'traditional' picture of family life. The evidence of this report shows that while there have been some small changes in demographic characteristics, foster carers are most likely to be:

- white;
- married or cohabiting couples with dependent children;
- in middle age;
- educated to GCSE level or below;
- receiving a gross household income below that of the national average.

The GIS analysis supports the findings of the literature review with regard to education, highlighting the fact that there are fewer than expected foster carers living in areas that are associated with the highest levels of education. While the literature review suggests that foster carers have a slightly lower than average (median) gross household income, the GIS analysis found that foster carers in England live in areas at all levels of deprivation. There is evidence to suggest that while the majority of main foster carers are female, these carers are increasingly employed outside the home. However, this change is slight, and a notable number of carers report that they are reliant on their income through fostering. The important role of male carers has also been noted throughout this report.

This report has shown that the majority of foster carers in the studies were in their forties and fifties. However, there is some evidence to suggest that foster carers are most likely to begin fostering in their thirties. A small number of studies have highlighted concerns regarding the population of foster carers. While older carers bring considerable experience to their role, an ageing population of carers may result in the loss of that experience through retirement (Clarke, 2009). The age of foster carers will increasingly become an important consideration given the trends towards longer term foster placements (Sellick, 2006; Clarke, 2009). This study had also highlighted that lone carers, most notably those who are separated, divorced or widowed are over-represented in the foster carer population compared to the national population of lone parents. Some BME groups, especially those from mixed backgrounds are underrepresented compared to the proportion of looked after children describing themselves as being from these groups.

The following motivations for fostering have been identified in the literature:
• having something to offer;
• fondness/liking for children;
• carers’ own childhood experiences in care;
• awareness of need for foster carers;
• suitability of fostering to current family circumstances;
• create/extend own family; and
• own children grown up/moved away.

Intrinsic rewards have also been identified as reasons for continuing to foster including:

• a sense of satisfaction;
• seeing children progress;
• love for the child;
• gaining a sense of fulfilment;
• doing something worthwhile and making a difference to a child’s life.

The barriers to fostering identified in the literature review include:

• lack of confidence;
• lack of understanding of what is involved in the role;
• fears of assessment/rejection;
• mistrust of social workers;
• lack of support;
• fears of accusations of wanting to make money from children;
• discomfort over children returning to their birth families;
• lack of suitable accommodation;
• fears of false allegations of abuse;
• media coverage and public perceptions of social care;
• placement breakdowns; and the
• high levels of stress involved in the role.

This report has also noted concerns regarding the supply of foster carers in the light of a rise in demand for services. Sellick (2006) notes that successful recruitment of foster carers is associated with targeted approaches (c.f. Sellick and Howell, 2003). Sinclair et al. (2004) note that the demographic information gathered in their study suggests a tendency towards conservativism on behalf of those selecting and approving foster carers, which may be
biased against those with younger children and cases in which the woman works full time. This view is supported in the wider literature (Triseliotis, Borland and Hill, 2000; Kirton, Beecham and Ogilvie, 2003). These studies point to a need for a wider base of foster carer recruitment and targeted campaigns to ensure that the kinds of carers recruited and placements approved reflect the needs of the growing care population.

**Implications for policy and practice**

*The recruitment of foster carers*

- It is evident from the analysis of the demographic information that recruitment campaigns targeted at foster carers from BME and mixed backgrounds, those in their thirties and male carers may be beneficial.
- The Centre for Social Justice (2008) suggest geographically targeted campaigns may be a successful strategy for recruiting carers with characteristics that will meet the needs of the population of children coming into care. However, the housing stock in some geographical areas may limit the number of foster carers with sufficient space available.
- A review of the profile of existing carers, children in need and the wider population within local authority areas may be beneficial to recruitment campaigns in order to target them toward meeting the specific needs presenting in each locality (Triseliotis, Borland and Hill, 2000).
- Word of mouth plays a crucial role in the recruitment of foster carers (Triseliotis, Borland and Hill 2000; Sheldon, 2002; Sellick and Howell, 2003; Sinclair et al. 2004). In Sheldon’s study (2000) 76% (n= 64) of the foster carers surveyed said they would recommend fostering to a friend. A number of authors propose that involving existing carers in recruitment may be beneficial (Butler and Charles, 1999; Sheldon, 2002; Sinclair et al. 2004).
- The inclusion of specific groups in the recruitment process may also help to increase the supply of carers for whom there are current gaps, such as male carers and those from ethnically diverse backgrounds (Wilson, Fyson and Newstone, 2007).
- Gilligan (2000) notes that fostering services may benefit from utilising male orientated recruitment and retention strategies.
- Better information about foster caring and improved payments were also identified by foster carers as possible strategies for improving recruitment (Collins and Butler, 2003; Swain 2007; Tearse, 2010).
• Given the high proportion of foster carers that either work or have previously worked in the caring and child care professions, these arenas may also be a beneficial source of prospective carers (The Fostering Network, 2012).

• The findings of a number of studies highlight the importance of informal support networks to existing foster carers (Butler and Charles, 1999; Fisher et al. 2000; McDonald, Burgess and Smith, 2003; Sinclair et al. 2004). This finding prompts Colton, Roberts and Williams (2006) to suggest that recruitment through religious and ethnic communities may also constitute an effective strategy for the recruitment of foster carers.

Retention

• Adequate payments to foster carers are identified as being essential to ensure that they are able to carry out the role (Swain 2007; Tearse, 2010).

• Sufficient and specialist professional support has also been highlighted as essential in helping to retain foster carers.

• Support after placement breakdowns and the payment of retainers to allow foster carers more time without a child in placement may help retain existing foster carers, without their feeling under pressure to resign from the role due to emotional or financial concerns.

• Sellick and Howell (2003) suggest that the use of ICT, payment for skills schemes and buddying schemes may also assist in the retention of foster carers (pp. 18-19).

Gaps in knowledge

• Colton, Roberts and Williams (2006) note that there is a dearth of knowledge on the characteristics of the foster carer population. As noted in the introduction, a number of the studies included in this literature review have included demographic analysis as part of a wider study. At present there are no comprehensive data sets regarding the demographic profile of foster carers and how far this profile matches that of the foster children. Given the importance of suitable matching, such an analysis would be beneficial.

• The scope of this report was to explore the demographics of the foster carer population as a whole and it has therefore not been possible to explore the differences in the characteristics between carers who provide different types of placements. However, a number of studies do explore specific types of placements, such as Farmer, Moyers and Lipscombe’s (2004) study of the foster carers of adolescents, and the MTFCE National Implementation Team (2010) annual project report on the implementation of
Multidimensional Treatment Foster Care. A number of studies such as Farmer, Moyers and Lipscombe also include substantive sub-samples of kinship carers which may warrant further analysis. Further exploration of the demographic characteristics of foster carers providing specific placement types, may be of value.

- The majority of the literature draws on samples of existing foster carers. Therefore, the existing evidence base is limited with regard to the barriers perceived by prospective carers and the reasons why foster carers leave. Research involving ex-foster carers or prospective carers who have made enquiries about fostering which have not been followed up, may make a significant contribution to the existing evidence base.
- Given the low proportion of carers from BME backgrounds and carers aged under 35, an analysis of the motivations and barriers for these groups may also help to advance the evidence base and inform recruitment strategies.
- The inclusion of male carers in research would also add to the current evidence base.
References


Appendix A: Information on data sets utilised for the GIS analysis

The English Indices of Deprivation 2010

‘The English Indices of Deprivation 2010 use 38 separate indicators, organised across seven distinct domains of deprivation which can be combined, using appropriate weights, to calculate the Index of Multiple Deprivation 2010 (IMD 2010). This is an overall measure of multiple deprivation experienced by people living in an area and is calculated for every Lower layer Super Output Area (LSOA) in England. The IMD 2010 can be used to rank every LSOA in England according to their relative level of deprivation.

The English Indices of Deprivation are a continuous measure of relative deprivation therefore there is no definitive point on the scale below which areas are considered to be deprived and above which they are not. In most cases, users concentrate on defining deprived areas by using a cut-off value beyond which areas are deemed to be the most deprived. For instance, a number of uses of the Index of Multiple Deprivation have focused on the most deprived ten per cent (most deprived decile) of LSOAs in England. Sometimes a different cut-off is more suitable depending on the purpose of the analysis. Deprived areas have been defined in this release as those LSOAs that are amongst the ten per cent most deprived in England according to the overall Index of Multiple Deprivation’ (Communities and Local Government, 2010).

The domains are Income, Employment, Health and Disability, Education Skills and Training, Barriers to Housing and Other Services, Crime and Living Environment.

For this analysis, in addition to the overall IMD2010, the domains utilised are Income, Employment and Education. This selection is based on the findings of the literature review which found that these domains are commonly examined in other research. Using the ranks for each domain and the overall IMD 2010, the LSOA were grouped into deciles, each containing ten per cent of LSOAs.

Experian’s Mosaic Public Sector Citizen Classification for the United Kingdom

Mosaic Public Sector Citizen Classification (MPSCC) classifies all individuals, households or postcodes in the United Kingdom into a set of homogeneous lifestyle types. The version used for this analysis is a snapshot at 2009 and classifies each LSOA into one of 69 household types and 15 groups. In addition, for each LSOA this dataset includes the total count of households and the median household income, which provide valuable background information.
MPSCC was used because it has been designed to identify groupings of citizen behaviour for individuals, households and postcodes (Experian, 2009). Consequently, the classification can provide the general characteristics of the households of the areas in which foster carers live.

**Regional distribution of carers:**

The data utilised for this analysis includes the database of foster carers’ postcodes provided by a national association of foster carers. The data were anonymised and encrypted. The data were shared in accordance to the data sharing protocols within the national association and the Loughborough University data protection and confidentiality policy (available http://www.lboro.ac.uk/admin/ar/policy/dpact/ludpp/).

The distribution of households with foster carers ranges from a minimum of 4% in the North East to a maximum of 15% in London. The regional distribution of foster carers has been compared to the general distribution of households in England and is shown in Table A.1 below.

### Table A.1: Regional distribution of foster carer households

<table>
<thead>
<tr>
<th>GOR</th>
<th>CARERS (counts)</th>
<th>% of foster carers in each region</th>
<th>Households with carers (counts)</th>
<th>% Households with carers</th>
<th>Households in England (counts)</th>
<th>% Households in England</th>
<th>Average (Median) HH Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>North East</td>
<td>1703</td>
<td>4%</td>
<td>979</td>
<td>4%</td>
<td>1099823</td>
<td>5%</td>
<td>26060</td>
</tr>
<tr>
<td>Yorkshire and The Humber</td>
<td>3492</td>
<td>9%</td>
<td>1990</td>
<td>8%</td>
<td>2474748</td>
<td>11%</td>
<td>27309</td>
</tr>
<tr>
<td>East Midlands</td>
<td>4009</td>
<td>10%</td>
<td>2376</td>
<td>10%</td>
<td>1856569</td>
<td>8%</td>
<td>27228</td>
</tr>
<tr>
<td>North West</td>
<td>4226</td>
<td>10%</td>
<td>2459</td>
<td>10%</td>
<td>3382340</td>
<td>15%</td>
<td>28020</td>
</tr>
<tr>
<td>South West</td>
<td>4668</td>
<td>12%</td>
<td>2655</td>
<td>11%</td>
<td>2182618</td>
<td>10%</td>
<td>28525</td>
</tr>
<tr>
<td>London</td>
<td>5249</td>
<td>13%</td>
<td>3495</td>
<td>15%</td>
<td>2989212</td>
<td>13%</td>
<td>32150</td>
</tr>
<tr>
<td>West Midlands</td>
<td>5549</td>
<td>14%</td>
<td>3262</td>
<td>14%</td>
<td>2290959</td>
<td>10%</td>
<td>36155</td>
</tr>
<tr>
<td>East of England</td>
<td>5578</td>
<td>14%</td>
<td>3217</td>
<td>14%</td>
<td>2873789</td>
<td>13%</td>
<td>33880</td>
</tr>
<tr>
<td>South East</td>
<td>5941</td>
<td>15%</td>
<td>3392</td>
<td>14%</td>
<td>3618934</td>
<td>16%</td>
<td>30283</td>
</tr>
<tr>
<td>Total</td>
<td>40,415</td>
<td>100%</td>
<td>23,825</td>
<td>100%</td>
<td>22,768,992</td>
<td>100%</td>
<td></td>
</tr>
</tbody>
</table>

As the table shows the regions can be divided in two broad groups. The first includes regions in which the percentage of households with foster carers is above the percentage of households in England (Table A.1). This group includes the West Midlands (4% above).
followed by the East Midlands, South West, London (2% above) and the East of England (1% above). The second group includes regions in which the percentage of households with foster carers is below the percentage of households in England. This group includes the North West (5% below), Yorkshire and the Humber (3% below), South East (2% below), and the North East (1% below).
Appendix B: Information on the GIS analysis

The three datasets (foster carers, IMD2010 and MPSCC) were linked together in a GIS environment using LSOA boundary data as the reference layer. Initially using the postcode, the records of foster carers were assigned to a LSOA. Each LSOA was then classified (using the IMD 2010 rank) in one of ten deprivation groups (deciles). As shown in Table B.1 (first column), the ten groups range from the worst deprived decile to the least deprived decile of LSOAs. The number of foster carers and households with foster carers was then calculated for each decile.

Table B.1 shows the percentage of households in each neighbourhood type and deprivation decile. The analysis of the association between deprivation deciles and Experian neighbourhood types was based on the calculation of correlation coefficients. The aim was to provide an overview of the neighbourhood types associated with increasing (or decreasing) deprivation levels rather than establishing the exact number of foster carers living in these areas.
<table>
<thead>
<tr>
<th>IMD 2010 Rank (deciles)</th>
<th>G01 %</th>
<th>G02 %</th>
<th>G03 %</th>
<th>G04 %</th>
<th>G05 %</th>
<th>G06 %</th>
<th>G07 %</th>
<th>G08 %</th>
<th>G09 %</th>
<th>G10 %</th>
<th>G11 %</th>
<th>G12 %</th>
<th>G13 %</th>
<th>G14 %</th>
<th>G15 %</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 - 10% Most Deprived</td>
<td>0.07</td>
<td>0.63</td>
<td>0.05</td>
<td>0.10</td>
<td>1.80</td>
<td>0.28</td>
<td>4.71</td>
<td>2.10</td>
<td>14.85</td>
<td>1.69</td>
<td>14.70</td>
<td>0.63</td>
<td>8.34</td>
<td>16.78</td>
<td>33.28</td>
</tr>
<tr>
<td>10 – 20%</td>
<td>0.18</td>
<td>1.56</td>
<td>0.16</td>
<td>0.31</td>
<td>4.49</td>
<td>0.76</td>
<td>6.27</td>
<td>4.51</td>
<td>19.62</td>
<td>5.37</td>
<td>20.22</td>
<td>1.21</td>
<td>8.58</td>
<td>13.94</td>
<td>12.81</td>
</tr>
<tr>
<td>20 – 30%</td>
<td>1.07</td>
<td>3.64</td>
<td>0.58</td>
<td>0.96</td>
<td>8.20</td>
<td>1.42</td>
<td>8.85</td>
<td>6.76</td>
<td>15.97</td>
<td>9.24</td>
<td>18.51</td>
<td>2.48</td>
<td>8.40</td>
<td>8.28</td>
<td>5.64</td>
</tr>
<tr>
<td>30 -40%</td>
<td>3.36</td>
<td>7.10</td>
<td>0.76</td>
<td>2.01</td>
<td>11.93</td>
<td>2.24</td>
<td>8.00</td>
<td>8.50</td>
<td>10.81</td>
<td>13.06</td>
<td>14.68</td>
<td>4.14</td>
<td>7.79</td>
<td>3.17</td>
<td>2.45</td>
</tr>
<tr>
<td>40 – 50%</td>
<td>7.13</td>
<td>11.21</td>
<td>1.13</td>
<td>4.10</td>
<td>13.78</td>
<td>3.44</td>
<td>7.64</td>
<td>8.73</td>
<td>6.05</td>
<td>13.59</td>
<td>9.41</td>
<td>5.22</td>
<td>6.11</td>
<td>1.35</td>
<td>1.12</td>
</tr>
<tr>
<td>50 – 60%</td>
<td>8.89</td>
<td>13.92</td>
<td>1.92</td>
<td>7.42</td>
<td>15.95</td>
<td>4.70</td>
<td>6.30</td>
<td>7.40</td>
<td>3.19</td>
<td>12.44</td>
<td>5.78</td>
<td>6.10</td>
<td>4.75</td>
<td>0.72</td>
<td>0.52</td>
</tr>
<tr>
<td>60 – 70%</td>
<td>9.61</td>
<td>15.44</td>
<td>2.16</td>
<td>11.36</td>
<td>17.49</td>
<td>6.44</td>
<td>4.63</td>
<td>7.26</td>
<td>1.46</td>
<td>10.93</td>
<td>3.23</td>
<td>6.01</td>
<td>3.32</td>
<td>0.31</td>
<td>0.33</td>
</tr>
<tr>
<td>70 – 80%</td>
<td>7.14</td>
<td>16.09</td>
<td>3.01</td>
<td>15.56</td>
<td>18.39</td>
<td>10.09</td>
<td>3.78</td>
<td>6.65</td>
<td>0.64</td>
<td>8.39</td>
<td>1.86</td>
<td>5.85</td>
<td>2.28</td>
<td>0.10</td>
<td>0.16</td>
</tr>
<tr>
<td>80 – 90%</td>
<td>4.70</td>
<td>15.49</td>
<td>4.27</td>
<td>19.73</td>
<td>19.17</td>
<td>13.93</td>
<td>2.83</td>
<td>5.80</td>
<td>0.32</td>
<td>6.02</td>
<td>0.99</td>
<td>5.23</td>
<td>1.39</td>
<td>0.04</td>
<td>0.08</td>
</tr>
<tr>
<td>90 -100% Least Deprived</td>
<td>2.35</td>
<td>12.29</td>
<td>8.11</td>
<td>25.41</td>
<td>15.99</td>
<td>21.13</td>
<td>1.93</td>
<td>5.01</td>
<td>0.07</td>
<td>2.56</td>
<td>0.27</td>
<td>4.18</td>
<td>0.66</td>
<td>0.01</td>
<td>0.02</td>
</tr>
<tr>
<td>Correlations coefficients</td>
<td>0.53</td>
<td>0.89</td>
<td>0.88</td>
<td>0.96</td>
<td>0.91</td>
<td>0.92</td>
<td>-0.69</td>
<td>0.27</td>
<td>-0.93</td>
<td>0.00</td>
<td>-0.93</td>
<td>0.76</td>
<td>-0.98</td>
<td>-0.87</td>
<td>-0.74</td>
</tr>
</tbody>
</table>
Experian’s Mosaic Public Sector Groups:

<table>
<thead>
<tr>
<th>Group</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>G01</td>
<td>Group A: Residents of isolated rural communities</td>
</tr>
<tr>
<td>G02</td>
<td>Group B: Residents of small and mid-sized towns with strong local roots</td>
</tr>
<tr>
<td>G03</td>
<td>Group C: Wealthy people living in the most sought after neighbourhoods</td>
</tr>
<tr>
<td>G04</td>
<td>Group D: Successful professionals living in suburban or semi-rural homes</td>
</tr>
<tr>
<td>G05</td>
<td>Group E: Middle income families living in moderate suburban semis</td>
</tr>
<tr>
<td>G06</td>
<td>Group F: Couples with young children in comfortable modern housing</td>
</tr>
<tr>
<td>G07</td>
<td>Group G: Young, well-educated city dwellers</td>
</tr>
<tr>
<td>G08</td>
<td>Group H: Couples and young singles in small modern starter homes</td>
</tr>
<tr>
<td>G09</td>
<td>Group I: Lower income workers in urban terraces in often diverse areas</td>
</tr>
<tr>
<td>G10</td>
<td>Group J: Owner occupiers in older-style housing in ex industrial areas</td>
</tr>
<tr>
<td>G11</td>
<td>Group K: Residents with sufficient incomes in right-to-buy social housing</td>
</tr>
<tr>
<td>G12</td>
<td>Group L: Active elderly people living in pleasant retirement locations</td>
</tr>
<tr>
<td>G13</td>
<td>Group M: Elderly people reliant on state support</td>
</tr>
<tr>
<td>G14</td>
<td>Group N: Young people renting flats in high density social housing</td>
</tr>
<tr>
<td>G15</td>
<td>Group O: Families in low-rise social housing with high levels of benefit need</td>
</tr>
</tbody>
</table>

For a full description of these groups, consult the document Experian, 2009.