Foster care in Portugal: outcomes, needs, and challenges for deinstitutionalization

Acogimiento familiar en Portugal: resultados, necesidades y desafíos para la desinstitucionalización

Acolhimento familiar em Portugal: resultados, necessidades e desafios para a desinstitucionalização

Paulo DELGADO
Escola Superior do Instituto Politécnico do Porto

ABSTRACT: This paper assesses evidence of and challenges to the development of the foster care system in Portugal. It describes the evolution of the social policy adopted in the Portuguese child placement system, highlighting family placement in foster care, followed by an overview of the main institutional actors in the protection system and the supports provided to family carers. Then, based on available research developed in Portugal, a portrait of the experiences lived by foster families and children placed in foster care is presented, revealing children and carers’ opinions about well-being and personal development, education and leaving care process, foster care and residential care, and participation in decision-making. The analysis adopted identify the intensity and singularity of relationships in foster care, and the impact it has on children’s and foster families’ lives. They reveal an intense, unique experience that is unmatched by other educational and affective relationships established between adults and children. The article discusses implications for policies and practices, by considering the need for a shift from residential to family care to achieve a better balance in the system and move closer to international statements of good practices.

PALABRAS CLAVE: Acogimiento familiar; desinstitucionalización; Portugal

RESUMEN: Este estudio evalúa la evidencia y los desafíos del desarrollo del sistema de acogimiento familiar en Portugal. Describe la evolución de la política social adoptada en el sistema de acogimiento infantil portugués, destacando la colocación en acogimiento familiar, seguindo de una descripción general de los principales actores institucionales del sistema
1. Introduction

In this article, we assess evidence of and challenges to the development of the foster care system in Portugal, where the welfare system is one with the highest percentage of children in residential care in the European context and within the post-industrialised Western model (Courtney & Iwaniec, 2009; Del Valle & Bravo, 2013; EUROCHILD, 2020). In 2020, national data from CASA Report (Institute of Social Security, ISS, 2020) revealed that from 7046 children and youth in alternative care, 2.7% (n=191) were placed in family foster care, meaning that 97.3% (n=6855) were in residential care. It should also be noted that only 16 of the 867 children under six years were in family foster care, representing 1.8% of this age group.

The Portuguese childcare system is thus of particular interest in the international community (Palacios & Gilligan, 2018) and a paradox to the worldwide trend to favour family placement and reduce the percentage of children who are living in residential care (Opening doors for Europe’s children & Eurochild, 2015; United Nations General Assembly, 2009). This trend marks a gap between national practices and the principles advocated internationally by remarked entities (e.g., EUROCHILD, 2020) to guarantee as much as possible quality solutions for children placement in the context of proximity structures and with foster families, instead of entrusting children to institutional care.

The debate about the solutions provided by family foster care and residential care is extensive, and several studies have demonstrated more benefits in placing children in family foster care (Dregan & Gulliford, 2012; Lee et all, 2011; Smyke et al., 2012). Van Ijzendoorn and colleagues (2020), in an integrative and systematic review on the effects of institutionalisation and deinstitutionalisation found strong negative associations between residential care and children’s development, more prominent in physical growth, cognition and attention. Moving from residential to family foster care was associated with recovery on growth and cognition. The length of stay in institutions was also associated with an increased risk of more severe consequences and reduced probability of recovery.

In a meta-analysis focused on the comparison between residential and family foster care conducted in 2008, Van Ijzendoorn and colleagues have already found that children in residential care tend to present lower level of IQ in comparison to the ones in foster families. Reinforcing these findings, Li and colleagues (2019) found that children in family foster care have better experiences and fewer problems in perceptions of care, internalizing and externalising problems as compared to children in residential care.
In Portugal, the residential care system maintains 433 units, several of religious origin and many of which still follow an assistentialist culture. Beyond other challenges related to incomplete and part-time technical teams, lack of specialised training, and low pay of professionals (Rodrigues et al., 2013; Rodrigues, 2018). Overall, 60% of residential care facilities have more than 25 children, 30% have 12 or fewer children. According to Rodrigues and colleagues, many do not preserve privacy and individual identity or foresee children’s participation in processes and decisions in daily life (Rodrigues et al., 2013; Rodrigues, 2018). In more than half of the residential care facilities, gender segregation is still practised and there is a lack of external evaluation of the quality of their performance.

These national evidences are aligned with international data about institutions pointing to disproportional staff-to-child ratios (Van Ijzendroorn et al., 2020), staff’s little training (Groark & McCall, 2011) and children’s limited possibilities to “meaningful” participation in decision-making (McPherson et al., 2021).

In this context, this article describes the social policy that has been followed in the Portuguese child placement system, highlighting family placement in foster care and its advances and challenges. It is our aim to understand the causes that led to a different evolution of the Portuguese protection system and identify possible causes for the strengthening of residential care in Portugal. First, we discuss the key aspects of the evolution of family foster care system and the supporting policies. Then, we provide an overview of the main institutional actors in the protection system and the foster carers working conditions. We conclude by drawing from the available research conducted in Portugal a portrayal of the experiences lived by foster families and children placed in family foster care.

2. Method

With a multidisciplinary approach, this study draws on diverse sources including the legal framework of placement family care, political and institutional documents to contextualize the evolution of family foster care in Portugal, in comparison to international movements in this field. Our analytical approach calls on literature about foster families and children experiences with foster care as empirical data, considering the few research studies developed in Portugal since the beginning of this century about foster care. The period since 2005 was chosen to limit our results to contemporary discoveries in this domain. On the other hand, another argument that justifies this approach is the scarcity of research carried out in Portugal. The few works carried out are in this range.

The procedure carried out to select the included studies was (i) identify published articles, books as well as scientific report and thesis or dissertations about foster care since 2005; (ii) screened and considered for analysis all the pieces of information related to foster families and children experiences in foster care (iii) We excluded manuscripts that were guidelines for practice and theoretical publications, studies where the distinction between forms of care was not possible to be made, and publications identifying other types of out-of-home care, like kinship care. Finally, articles only related with parents’ and professionals’ point of view were also removed from the study; (iv) from this dataset, some examples revealing children and carers’ opinions about well-being and personal development, education and leaving care process, and participation in decision-making in foster care were selected.

The criteria followed to select the excerpts was an intent to identify the intensity and singularity of relationships in foster care, the impact it has on children’s and foster family’s life’s. They reveal an intense, unique experience that is unmatched by other educational and affective relationships established between adults and children (Cairns, 2002). Foster care placement resembles the construction of a multi-piece puzzle with advances and retreats, victories, and defeats, which must be assembled gradually for short or long periods, sometimes achieving permanence, and which gives different results when we compare them with outcomes in residential care (Beek & Schofield, 2004; Bell & Romano, 2017).

Data collection focused on two published articles (Delgado et al., 2018; Carvalho et al, 2020), three books (Delgado, 2007; Delgado et al., 2013; Delgado et al., 2016), one thesis (Diogo, 2018) and two dissertations (Batalhas, 2008; Gonçalves, 2017) addressing the experiences of main actors in foster care. The main characteristics of the selected studies are summarized in Table 1. When trying to map the experiences of foster families and children in Portugal, the paucity of available research data was evident. It was only possible to identify one study that took the perspective of the biological families (Delgado et al., 2016).
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<td>Analyse the child’s participation in the foster family on a day-to-day basis and the outcomes of foster care on their educational path.</td>
<td>Qualitative study</td>
<td>20 children in foster care from 12 to 16 years old and 20 foster families</td>
<td>Semi-structured interview, Survey by Questionnaire</td>
<td>Data revealed that foster care is a context of protection, stability and family life experience; The need to be implemented the participation of biological families in decisions and promoting reunification in a larger number of cases.</td>
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<td>Characterize and analyse foster care in Portugal; identify decisive quality criteria for the implementation of this type of social response.</td>
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<td>The urgent need for a foster care promotion policy that disseminates, recruits and accompanies new, dedicated and competent foster families; avoid an excessive number of children fostered in each foster family, potential indicators of overload situations and risk of exit the foster programme.</td>
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<td>Investigate the complexities and challenges that are associated with contacts and visits for children or young people, for foster carers, for biological families and for social workers.</td>
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<td>221 children in foster care in Porto district</td>
<td>Three data sources: Survey by Questionnaire, 3 Focus Group with children and interviews with 10 complete cases (carers, parents, and social workers)</td>
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3. Development and current state of child in out-of-home care in Portugal

3.1. Historical evolution of family placement in Portugal

Foster family care was formalised in 1979 with the enactment of the Decree-Law n.º288/79 which intended to ensure legal coverage of a practice similar to adoption that has always existed in Portuguese society, as an agreed family practice or as a destination for a group of orphaned or abandoned children, in large part from cases of assistance developed by the Catholic Church (Delgado, 2011).

In the 1990s and the early 2000s, there was a boom in family placement, in part sustained by kinship care. In 2004, of the 10714 who were placed, 1326 (12.3%) were in foster families and 1802 (16.8%) were integrated in kinship care families, representing at that time a total of 29.1% of children in foster/kinship families (ISS, 2020).

This period was marked by the reform of the child protection system in 1999, which abandoned a purely welfare/paternalist logic in favour of an intervention based on the principles of participation, respect for the condition of the child, and the promotion of autonomy, as set out in the Convention on the Rights of the Child (1989). Two legal frameworks contributed for changes in the protection system and marked it division into: protective measures integrated in the Law of Protection of Children and Young People in Danger (Law n.º147/99) and educational tutelary measures, as associated with the practice of crimes, provided for in the educational Tuteleary Law Law n.º166/99).

Until the legal reform of 1999, the protection system covered both juvenile delinquency and children and youth in dangerous situations. In all
cases, the same procedures and answers were foreseen, namely the most serious measure, internment, which was carried out jointly in the institutions. Later, the 2008 regulation on foster care – Decree-Law n.º11/2008 – led to a narrower classification of its scope, allowing placement only in the unrelated family (foster family care), which has significantly reduced the importance of foster/kinship care within the childcare system. This change in the law was probably decided for three fundamental reasons. A political reason, to produce an artificial reduction in the number of children in out-of-home care, which was an objective assumed by the government at the time; an economic reason, for the reduction of support available for kinship care; a legal reason, for the need to harmonize foster care regulations with the law for the protection of children and young people. Although the Decree-Law n.º11/2008 provides for the widening and deepening of the requirements and conditions in the selection process of new foster families, foster care has not been promoted since then, nor are there any new selection processes of foster care families (Delgado et al., 2016).

The application of stricter criteria in monitoring and evaluating the performance of foster families, coupled with their non-substitution as they were removed or ceased fostering, led to the progressive emaciation of foster family care and its near disappearance from the system (Gersão, 2013).

Between 2008 and 2017, despite a reduction of almost 25% in the number of children placed, from 9956 to 7553, residential care has increased in relative terms, from 91% to 97%, while foster family care dropped down from 9% to 3% (ISS, 2020). This reduction was motivated by the ‘removal’ of kinship care from the placement care system, with the implementation of Decree-Law n.º11/2008, as well as the adopted policy of divestment in foster care. The path that Portugal has been taking since, mainly 2008, seems to be in the opposite direction to the international movement to favour family care, which led several countries to reform placement care, remove or cease fostering, lead to the progressive emaciation or foster family care and its near disappearance from the system (Gersão, 2013).

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Intervention in the face of maltreatment is, according to the Protection Act (Law n.º147/99), primarily the responsibility of the community where the child and his/her family lives, representing the first line of intervention. This includes schools or educational organisations and health centres or hospitals, two particularly relevant areas for child protection. The responsibility lies with everyone on site, rejecting the idea of an assistentialist intervention (Gersão, 2013).

The Comissões de Protecção de Crianças e Jovens, CPCJ (Child and Youth Protection Committees) corresponds to the second line of intervention and are distributed throughout the national territory at the municipality level. Their intervention in cases of abuse precedes the third level, which are the courts and the teams that advise them (EMATS – Multidisciplinary Court Support Teams). The different levels of intervention embody a hierarchy that corresponds, in turn, to different functional competences: the entities in the first line intervene with their resources and within their activities, seeking to resolve problems as soon as they are detected; CPCJs, as official institutions of administrative competence, initiate, execute, and terminate promotion and protection processes; the courts, if it is not possible to remedy the situation at previous levels, apply protective measures and monitor their implementation through special teams, at which level the will of parents or representatives of parenting skills may be overridden (Delgado, 2011).

The placement of a child in foster family care is the responsibility of the CPCJ and the courts.

3.2. Main institutional actors in Portuguese protection system

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However, the former may only apply protective measures if they obtain the consent of parents, legal representatives, or guardians. Without consent, only courts can apply protective measures. In 2019, CPCJs across the country applied for 14,249 protective measures. Of these, 13,227 were in the natural environment, and 1022 were in out-of-home care, of which only 9 were foster care (CNPDPDCJ, 2020). Statistical data on protection proceedings that take place in the courts are not disclosed.

The ISS (Institute of Social Security) is a public body, part of the Ministry of Labour, Solidarity, and Social Security, which centralises the protection of the most vulnerable groups, namely children, young people, those with disabilities, and the elderly, as well as others in economic or social need. It is responsible for promoting the sustained improvement of the conditions and levels of social protection and well-being of children within the social action subsystem.

The management of the residential and family care system is the responsibility of the ISS and Santa Casa da Misericórdia in the Lisbon region. The former, in addition to being a manager, has its own foster care programme, which has the largest number of children placed. As a management entity, it may cooperate with Non-Governmental Organizations, NGOs, to act as framing institutions, as is currently the case with Mundos de Vida, a non-profit association in the north region of Portugal that develops its programme in the districts of Porto and Braga. In 2020, Santa Casa da Misericórdia started a foster care programme in Lisbon, generating the expectation that the capital will effectively contribute to the development of foster care in the country.

At present, the few existing foster care families operate under ISS through the district centres of the respective geographies, and Mundos de Vida. In 2018, it accounted for 43 of the 246 children and ISS the rest. Family care is mainly concentrated in the north in the districts of Porto, Braga, Vila Real, and Viana do Castelo. Some foster care families were also added in the island of Madeira. The evolution of the protection system is inevitably associated with this debate about the role that the state, through the ISS, and civil society, through NGOs, should play in the development of foster care.

The Portuguese childcare system does not have associations or organisations representing foster families, children in foster care, or care leavers. This is probably due to scarce civic and social participation, which does not exist also in residential care (Delgado et al., 2016).

Kinship care has remained almost invisible in childcare system since the legal changes introduced in 2008 in the regime of foster care enforcement, which led to a drop in the deinstitutionalised rate and cut expenses in the system. Thus, it is important to reflect on the nature and classification of foster and kinship care, as well as to reflect on the economic, educational, psychosocial, or other support available to extended family members who accept their grandchildren, nephews, or siblings. Most social, tax, and employment rights granted in foster care in Portugal are not provided for in kinship care, although they require the same care, time, and dedication that is legitimately required of foster families. However, recent research (Mateos et al., 2012; Montserrat, 2014; Coleman & Wu, 2016; Hill et al., 2018; Jedwad, Shu & Shaw, 2020) has highlighted the need to provide special training and support services for those carers, as well as specific evaluation processes for kinship care.

### 3.3. Supports to family carers

The foster family may be a single person, two people who are married or living in a union, or two or more people who are related and live in shared accommodation. The foster care regulation, published in September 2019 – Decree-Law n.º 139/19, does not recognise kinship care as a type of foster care, maintaining the option taken in 2008, with the Decree-Law n.º 1/2008.

Until 2019, the economic support scheme for foster family care was up to 153 euros a month for child support and 177 euros a month for services provided. This was doubled (354 euros a month) for children with special needs and problems related to disabilities, chronic illness, and emotional and behavioural problems, requiring extraordinary expenses. These values were taxed and included in the annual household income assessments, until 2019 reform.

The set of rights and duties that constitute the status of foster families was reformed in September 2019, imposing a social, fiscal, and labour framework that makes its performance attractive (Figueiredo, 2020). In fact, an adequate and efficient support and payment system helps to increase the range of foster families and increases the chances of placement for children who need a family to grow up. It increases the responsibility of the carer and the tasks to perform, particularly towards the biological family, by replacing a traditional model based solely on a spirit of volunteering with an intervention that combines that generosity with a scientific and technical ethic (Kelly, 2000; Berridge, 2001).

The foster family was given the right to deduct from tax the expenses incurred by the placement
4. The experience of foster families

The selected excerpts express the commitment that foster families make to the well-being of children and the way they mobilise within their family and in the community to promote the development of foster children at various levels. The future of the bonds they create is a central concern in their discourse.

4.1. Well-being and personal development

The motivation to foster expresses concern for the well-being of children and fundamentally reveals altruism and willingness to help.

“I like children very much. I like to give affection and to help” (Diogo, 2018, p. 130).

What matters is “the happiness of boys, watching them change for the better” (Diogo, 2018, p. 145).

“The first time she heard a beep from the supermarket checkout, she found it a huge joke... She was 9 years, had never been shopping... and this is also a pride for us. It was not we who taught her how to walk, but we took her to several places for the first time” (Delgado et al., 2016, p. 111).

The foster families reveal their concern to mobilise their extended family and neighbourhoods, trying to create a support network, as an important aspect to provide the experience of a typical family to foster children.

“My mother is their grandmother, my sisters are their aunts (laughs). It’s all family. They found John to be very intelligent. I even have a brother-in-law who plays a lot with them, as he was a soldier and went to war; he does some things, and they are all happy. I think this is important in the background. After all, the most important are the affections they have along the way” (Delgado et al., 2016, p. 112).

4.2. Foster care and RC comparison

Family care is assumed as an alternative to residential care. Foster families acknowledge benefits for children of being placed with them instead of in residential care, since they have more opportunities to establish a close relation with the children and attend to their individuality.

“I think in institutions they end up... I am suspicious, my father worked for a long time in an institution and told of situations that I was recording. Heavy one, and they were institutions of nuns. Things that did not please anyone. These children are lost” (Diogo, 2018, p. 131).

“I think a child in a foster family is much better than in an institution, has more affection. In an institution, there are many and one cannot be giving the necessary attention to each one” (Diogo, 2018, p. 133).

4.3. Education and leaving care process

Education is an area of concern and investment and seen as a tool for children autonomy in adulthood. Foster families express their effort to encourage children to get involved with school activities and work towards academic success.

“I sit by their side and go to work. I try to explain to her how studies should be done; if she cannot memorise or if she is distracted by reading, she should write things in her notebook and try to memorise” (Batalhas, 2008, p. 33).

The positive results are a source of great satisfaction, providing the sense of rewarding to foster families.

“When she first got 78% in history, which she had never taken (…) it completely changed; even the doctors said, it does not even look like B. My greatest joy is knowing that her grades, since she went home, have changed her behaviour completely” (Diogo, 2018, p. 156).

Along with education, learning a profession and transition to the labour market are important areas of concern.

“He took the pastry course, I got him a job’. And yet ‘we were going to help A grow up, be a woman, have
their memories of this period are diverse and
The experiences of children in foster care or
involvement of experienced and former caregivers.
should be addressed, using, as much as possible, the
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knowledge and perception of family care in the
promotion of family foster care culture should be
market. Academic outcomes are a central concern
leaving care, and a good transition to the labour
company the child to school, in completing home
provide individualised and permanent attention
family. Families' networks offer more affection and
in the general population concluded that participants
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ility foster care. The generosity and altruism that
motivate the decision to become a foster family
must be accompanied by a clear understanding of foster carers roles, duties and rights, that allow
to distinguish foster care from adoption or other forms of family placement.
This evidence highlights the necessity of con
sidering the extended family in the process of se
lection and supporting foster families. In foster car
giver training, educational and professional issues
should be addressed, using, as much as possible, the
involvement of experienced and former caregivers.
5. Children’s experiences in foster care
The experiences of children in foster care or
their memories of this period are diverse and
sometimes contradictory. They are a mix of pos
itive and negative feelings, but enriching experi
ences prevail that have contributed to a success
ful personal and social trajectory.

5.1. Well-being and personal development
From the outset, the possibility of living and be
longing to a family is part of a stable and secure support network, which includes the extended one of the carers, as we can check in the following excerpts.

"Being aware of what a family really is, because you
in the institution do not know this side, right? And then... knowing family patterns, you see? What is
having a father or mother...? That was fundamental
for me, because having family standards... no doubt!"
(Gonçalves, 2017, p. 103).
"The best thing is to be treated like a daughter, to
be treated like everyone else" (Carvalho et al, 2020).
It seems clear that sometimes placement cre
ates bonds that last for the rest of life.

"I was going to be 18 in two years... I never intended
to go back, always wanted to stay with that family and
continue to live with them" (Gonçalves, 2017, p. 101).
The relationship with the biological family emerges in the children’s discourses as one of
the most difficult aspects to manage during family
care, and it is often associated with feelings of fear,
sadness, abandonment, and disinterest on the
part of their parents and other family members.

"I ask her why she does not come to visit us and she
gets upset with me. Another time, when she was on
the phone, I asked her if she would come on that day,
and she said no, because she was going to the doctor,
and my foster mother told me to say she could come
in the afternoon; and my mother said the appoint
ment would take all day anyway. So, I said to her, ‘Oh
mom, so you are coming tomorrow morning?’ She
said no, but I insisted that she could come in the
morning, and she came. I liked it when my mother
came, but I was afraid, and I was sad that she only
came “because I insisted” (Delgado et al., 2016, p. 89)

5.2. Education and leaving care process
The description of the positive impact of family
care on schooling and on personal and social de
velopment is given in several excerpts.

"At the age of 17, I finished the 12th year in school, and
in maturity, I speak for myself. However, at 17, I can
have a conversation with my head and feet. And I feel that many people with my age cannot. They change ideas very easily, and I do not, I have my opinions” (Delgado et al., 2018, p. 4).

“What is better because I have new experiences; for example, a month or two ago I joined the fanfare, which I never had. I already have the art to study, something that my father did not give me, nor encouraged [...] now look at the route I have had, and I am having at school (Delgado et al., 2016, p. 107).

5.3. Foster care and residential care comparison

Throughout their course in the protection system, there are many cases of children who have experience living in residential units and who compare the two contexts.

“I think this is something that the foster family gets in relation to the residential units, because the residential staff, however much they want, they finish the shift at the end of the day and go to home. In the foster family, we are constantly with the family... if it goes well, it becomes our family, we constantly deal with them and eat with them at the table and we go out on Sundays with them” (Gonçalves, 2017, p. 103).

“In the institution, people don’t really care about us (...) in the foster family, if I take a negative mark, my aunt worries about me and punishes me, whereas at the centre it wasn’t like that” (Carvalho et al, 2020).

5.4. Participation in decision-making

Finally, children seek greater participation in decision-making, particularly in the pre-placement phase, and have access to information such as where the foster family lives and whether or not they have more children.

“I think a 10-year-old child can see, choose and say, I think this family is not right for me, I don’t feel well. I think if it goes to that one is better. It could give more choice” (Delgado et al., 2013, p. 145).

“When I moved to the foster family, I changed school and then, after a year, I went back to my mother and she wanted to transfer me to the school near where she lived, but I did not like it. I stayed at the school where I was when living in the foster family. My mother warned me that if I misbehaved, I would go back to school by the house” (Delgado et al., 2013, p. 152).

In summary, the testimonies collected in this study highlight the strong commitment of carers to their children, as well as the sadness and negative impact that withdrawal has on children’s lives. As we read in some excerpts, foster care can be an appropriate context for the child’s development when provides stability and a concept of the family that is being built or will be built later, in the future, with this experience. It also shows the difficulties in managing tensions between families and other persons involved, respecting identity and family histories, and maintaining a relationship based on affection and sharing whenever possible.

The data analysed in this study allow us to conclude that despite some negative aspects, foster care is an enriching experience which allows the reconstruction of paths that lead to emotional, affective, cognitive, and social development. Through being part of the foster family, a sense of belonging and permanence is a major outcome in children’s perspectives. Like Gilligan’s (2019a) findings, the data suggest that foster placements have an undeniable impact on school pathways and social development. So, it is essential to select and form new foster care families for a gradual shift from residential to family care. The priority placement of children up to six in foster families has been established in the law in 2015. At a later stage, after fulfil this obligation, there is a need to look for families who can accommodate older children for extended periods with specific problems and needs.

Conclusions

In this article we examined the evidence of and challenges to the child placement system in Portugal, highlighting family placement in foster care.

First, we described the evolution of the Portuguese protection system framed by a set of policies, followed by an overview of the main institutional actors. Then, we compiled the research data about the experiences of foster families and children placed in family foster care in Portugal.

For further research it would be important to explore whether the training and support of foster families by foster agencies have influence on families foster care experience. With regard to children in out-of-home care, it would be interesting to analyse how their profile (e.g. sex, age, nationality, length of stay in the actual placement) determines their possibility in going to a foster family or shifting from residential to foster care. Although in Portugal kinship care is not legally a modality of foster care, since 2008, the true is that a group of children continues to be delivered to the custody of their relatives, especially their grandparents. In future research, it will be useful to study kinship care and compare this with foster care. In future research, it also will be useful to compare Portuguese outcomes with other countries that might
confirm similar effects in foster care results face to residential care.

The Portuguese case suggests that deinstitutionalisation can be halted or delayed, even when social and cultural conditions would make this change possible. Portugal is an integrated country in the European Union, with an open economy and society and advanced social policies in many domains. It presents a social structure based on family, as part of the southern model of southern Europe, which Santos and Ferreira (2001) dubbed the Providence Society, because it mobilises resources to overcome the deficits of the state.

The description of the Portuguese family foster care system in this article using multiple sources and perspectives highlights its specificities and the way it distances itself from systems elsewhere in the world. Social justice and the principle of equal treatment require that Portuguese children receive the necessary psychoeducational and social support to promote their well-being and development. The paradigm shift in child protection in Portugal is yet to materialise and can hardly occur without the development of a deinstitutionalisation policy that takes place simultaneously with the promotion of family placement, which removes the risk of confusing it with the reconfiguration of institutions (Gilligan, 2019b). It is crucial to select a new generation of foster families and to consider the feelings and opinions of children about their role in the protection system and about decision-making that influences their lives. In this way, the state will protect and guarantee for each child the right to grow in a stable, affective family environment. It is time to move toward a deinstitutionalised system and we must act quickly because we have a considerable delay.

References


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AUTHOR’S ADDRESS


PERFIL ACADÉMICO

PAULO DELGADO
https://orcid.org/0000-0001-6977-8214
Graduated in Law, Master in Education Administration and PhD in Educational Sciences from the University of Santiago de Compostela, with Aggregation in Educational Sciences at UTAD – University of Trás-os-Montes and Alto Douro. Researcher at InED – Center for Research and Innovation in Education and member of the Center’s Management; Full professor at Escola Superior de Educação do Porto of the Instituto Politécnico do Porto, Portugal; President of the Pedagogical Council of the Escola Superior de Educação do Porto since April 2017.