"I couldn't understand why anyone would let somebody like me into their house": foster care for young people who have sexually abused

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Although the existence of children and young people who display harmful sexual behaviours has been established on the 'professional map' in the UK since the early 1990s (Hackett, 2004), surprisingly few studies exist which describe either how those who are unable to live within their own families fare in foster placements, or how foster carers respond to the challenges they present. It is recognised that such children and young people are being placed with carers and that they and their carers are reporting their experiences, in formal review processes, to their supporting social workers and to each other (Hardwick, 2005 and Milner, 2008), though to date, most of these descriptions, and the lessons they contain, remain within confidential case files and looked after children's review reports. This is unfortunate as it means that understanding of what happens within these placements, and whether what happens meets these children's needs and reduces the risks they present, is not shared widely. This study seeks to redress this by both exploring and reporting how foster carers who look after young people who have sexually abused experience foster care and perceive the role of their carers.

The study is informed by previous research in two fields spanning academic and professional practice; an established field with an extensive literature concerning *foster care* and a more recent field with a growing literature concerning *children and young people who have sexually abused*. The approach to the research is 'child centred' as it is asserted that children and young people should be seen, first and foremost, as individuals who are developing physically and emotionally, and who each have particular strengths and needs; the participants in this research therefore are seen not as 'sexual abusers' but, as the title suggests, as 'young people who have sexually abused' (Lovell, 2002) and with the capacity to change. The study also accepts that foster care is "a remarkable and paradoxically very ordinary activity" (Sinclair, Gibbs and Wilson, 2004, p.7) which seeks to meet the particular needs and circumstances of individual children at particular moments in their lives and is then a "kind of parenting, though parenting for a special task" (Quinton, 2004, p.85).

The study explores the complexities of this special task and identifies some of the challenges facing particular young people and carers within placements and concludes that foster care can and does provide supportive environments for young people who have sexually abused where they can be helped not to abuse others again and also with rich and valuable 'reparative family experiences' (Milner, 2008) which may prove to be 'stable foundations for the rest of their lives' (DfES, 2006, p3).

Thematic analysis of interviews with young people and carers suggests that both they and those who manage and support these placements understand the carer's role differently. These differences are understood to create tensions within placements and to

reduce their safety both for young people and carers. The analysis suggests a conceptual framework with which to understand and evaluate the carer's role which complements existing models informing professional practice. This emphasises how effective care of young people both *protects* and *enables them* to achieve their developmental tasks and suggests that less effective care fails to protect them, and *constrains* their development. The model highlights how the role of carers in providing *protection* encompasses the protection of the young person placed with them and other people as well as themselves. It also shows how carers are themselves either *enabled* and *protected*, or left *unprotected* and *constrained*, in their role of *enabling* and *protecting* young people, by other people (and specifically by their fostering social workers and their employing agencies). This has important implications for practice and by describing different professional roles in the same terms and emphasising the shared goals and similarities in carers' and social workers' responsibilities, the model may be able to facilitate a more open dialogue and stronger partnerships between professionals (Sinclair, 2005, p.120).

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