



**SQUARE  
PEG IN A  
ROUND  
HOLE**

**A TOOLKIT FOR  
INCLUDING UNDER-  
SERVED CARERS IN  
FOSTERING SERVICES**

"I had sometimes felt marginalised in support groups and training... So finding a collective of people from different backgrounds and an open but structured environment allowed me to talk freely and with confidence about my experience so far and share my views on the [foster care] system... And this only served to strengthen my motivation to be the best foster carer I can be."



Co-authored by Rachael Stemp and Shayma Izzidien, June 2023

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## CONTACT US

For more information, or with any questions, please email [reflectivefostering@annafreud.org](mailto:reflectivefostering@annafreud.org) or visit our website at [www.annafreud.org/parents-and-carers/include](http://www.annafreud.org/parents-and-carers/include)

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Child Attachment and Psychological Therapies Research

A partnership of



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# INTRODUCTION

## WHAT IS THIS GUIDE ABOUT?

We know that fostering can be difficult at times, but that when it works well, it can transform children's lives. Inclusivity and diversity are vital components of children's social care systems, because an inclusive social care system is better able to meet the full range of needs that children bring. Engaging and supporting all carers equitably, regardless of their background or identity is central to successful service provision.

For many working in children's social care, inclusivity and diversity are already priorities; but there isn't always the right information out there about what carers themselves say this should look like. This guide aims to build on good policy and practice by providing an insight into what those working in fostering have identified as common barriers to engagement and support, especially for carers who are typically marginalised and under-served. It is built on their voices and stories. We hope this guide will help fostering and kinship services to think further about how best to support all carers in their communities, and especially those whose perspectives are less-often heard.

Each local authority or independent fostering agency is different, with unique circumstances and carer populations. This guide is about highlighting common learning across carers we have met with in producing this guide, which can then be explored further in your own context. We created it because the carers we met with said that such a guide was needed. Our overarching aim is to encourage better engagement and research with carers, with a particular focus on learning from those carers who may feel marginalised or misunderstood.

## WHY DOES THIS GUIDE MATTER?

Inclusivity matters. Under law, everyone has the right to equal access to services and to equally express their views [1]. Inclusive services mean people are more able to engage with services and support, without discrimination. Inclusive services help carers feel valued and supported. The well-being and support for carers ultimately affects how well they can care for children: carers who feel well supported, confident and equipped with knowledge and skills, will be able to provide a stable and supportive environment for a child in their care. Support and wellbeing also influence carer recruitment and retention, which is at crisis point in many fostering services [2].



# INTRODUCTION

## HOW DID THIS GUIDE COME ABOUT?

The InCLUDE project was set up in 2022 to explore the reasons why foster and kinship carers might feel unable or unwilling to take part in research. It was part of a wider study called the Reflective Fostering study, evaluating a support programme for foster and kinship carers (the Reflective Fostering programme)[3]. We noticed that in the study, some groups of carers were more likely to take part than others, and we wanted to better understand why. Through our data collection and when meeting with carers, we realised that the groups typically under-served in research are also often excluded throughout their fostering journeys, for example in their interactions with other foster carers, and in the support and training they receive from their local authorities. The InCLUDE carer advisory group suggested that a guide for local authorities would be the most effective way to communicate this information. They said, so we did!

## WHO IS THIS GUIDE FOR?

This is a practical guide aimed to help progress inclusion in fostering services. We hope it will be a reference point for anyone working with foster and kinship carers, including within local authorities and Independent Fostering Agencies (for example supervising social workers, support and staff and trainers), for service commissioners, and for research and evaluation teams within children's social care.



## SUMMARY

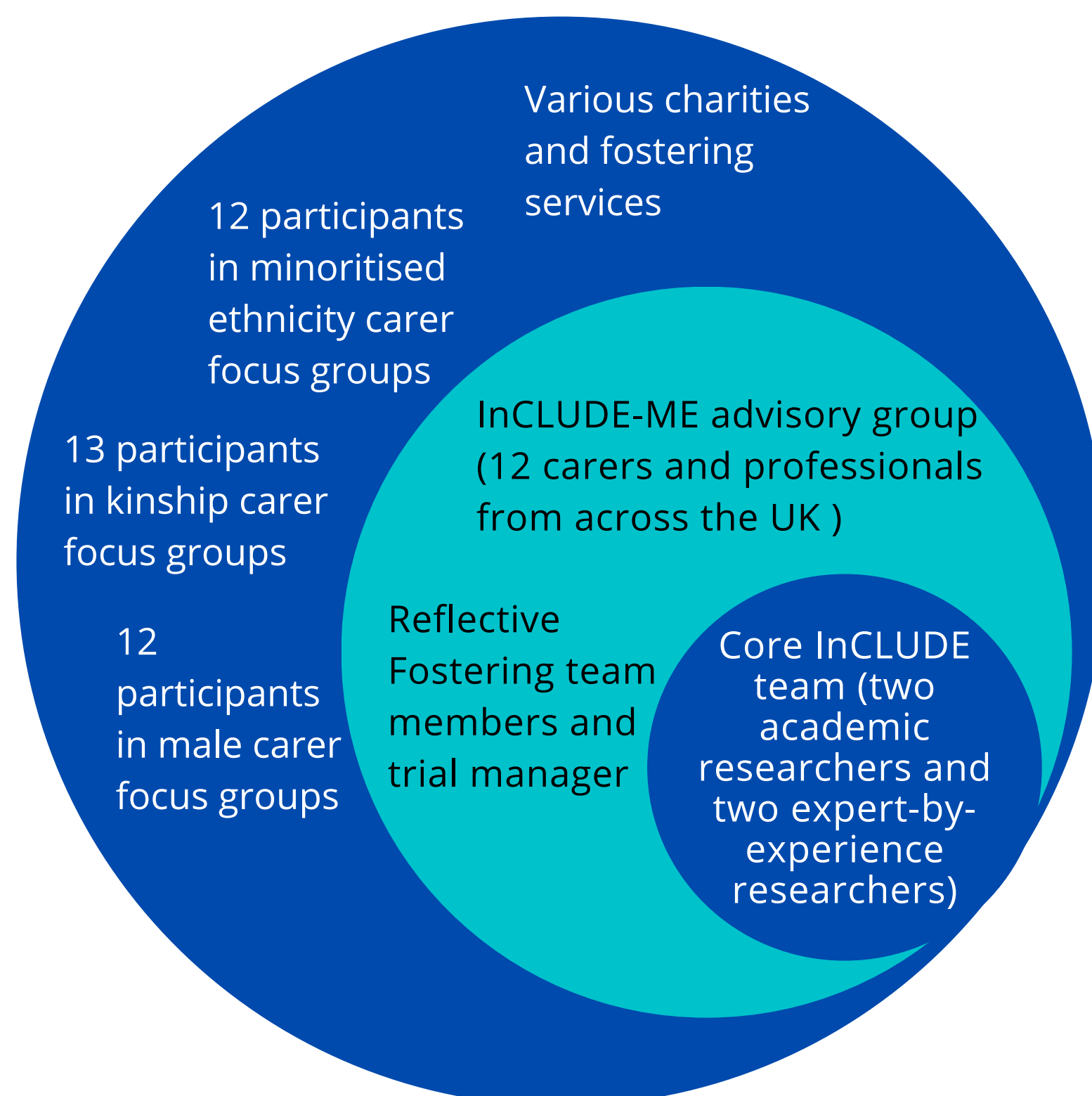
- Inclusive services mean that all carers feel able to access support, which helps them better care for children.
- This guide aims to highlight the voices of carers who are typically under-served or marginalised in fostering and kinship services, to learn from them about why, and how to increase inclusivity.
- This guide has been developed in collaboration with foster and kinship carers, and we aim to keep their voices and stories central throughout.

# METHODS

## HOW DID WE DEVELOP THIS TOOLKIT?

The development of this guide involved listening to carers and professionals through multiple opportunities to contribute their views. The content has been collaboratively produced and refined to offer practical tools for progressing inclusivity.

## PEOPLE WHO CONTRIBUTED:



## OUR METHODS:

FOCUS GROUPS WITH UNDER-SERVED CARERS

TERMLY MEETINGS WITH THE INCLUDE-ME ADVISORY GROUP

ONE-OFF MEETINGS WITH CHARITIES AND FOSTERING SERVICES

SHARE YOUR VOICE NATIONAL SURVEY ABOUT THE BARRIERS TO RESEARCH PARTICIPATION IN CHILDREN'S SOCIAL CARE

SCOPING REVIEW OF FOSTER CARER REPRESENTATION WITHIN EXISTING RESERACH

# WHO IS UNDER-SERVED?

The first step to increasing inclusivity for under-served groups is to identify who is under-served. By "under-served", we mean communities whose needs are not being fully met, or who are less included or represented than we would expect based on their population size. To explore these better, we ran a national survey called Share Your Voice. We also reviewed existing research with foster and kinship carers, to see who was taking part.

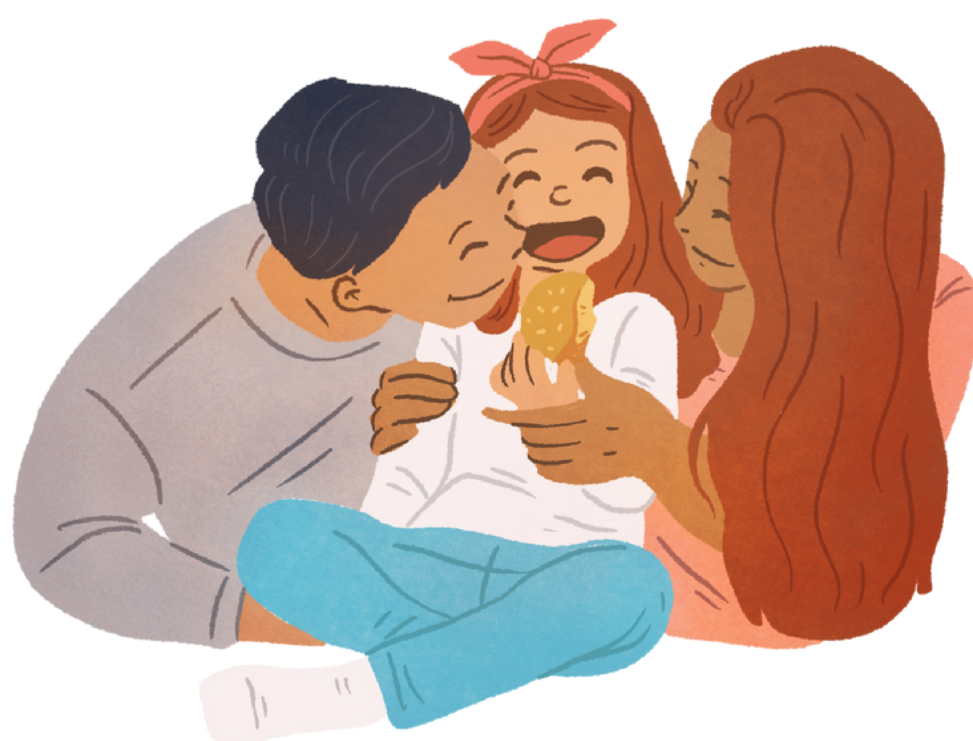
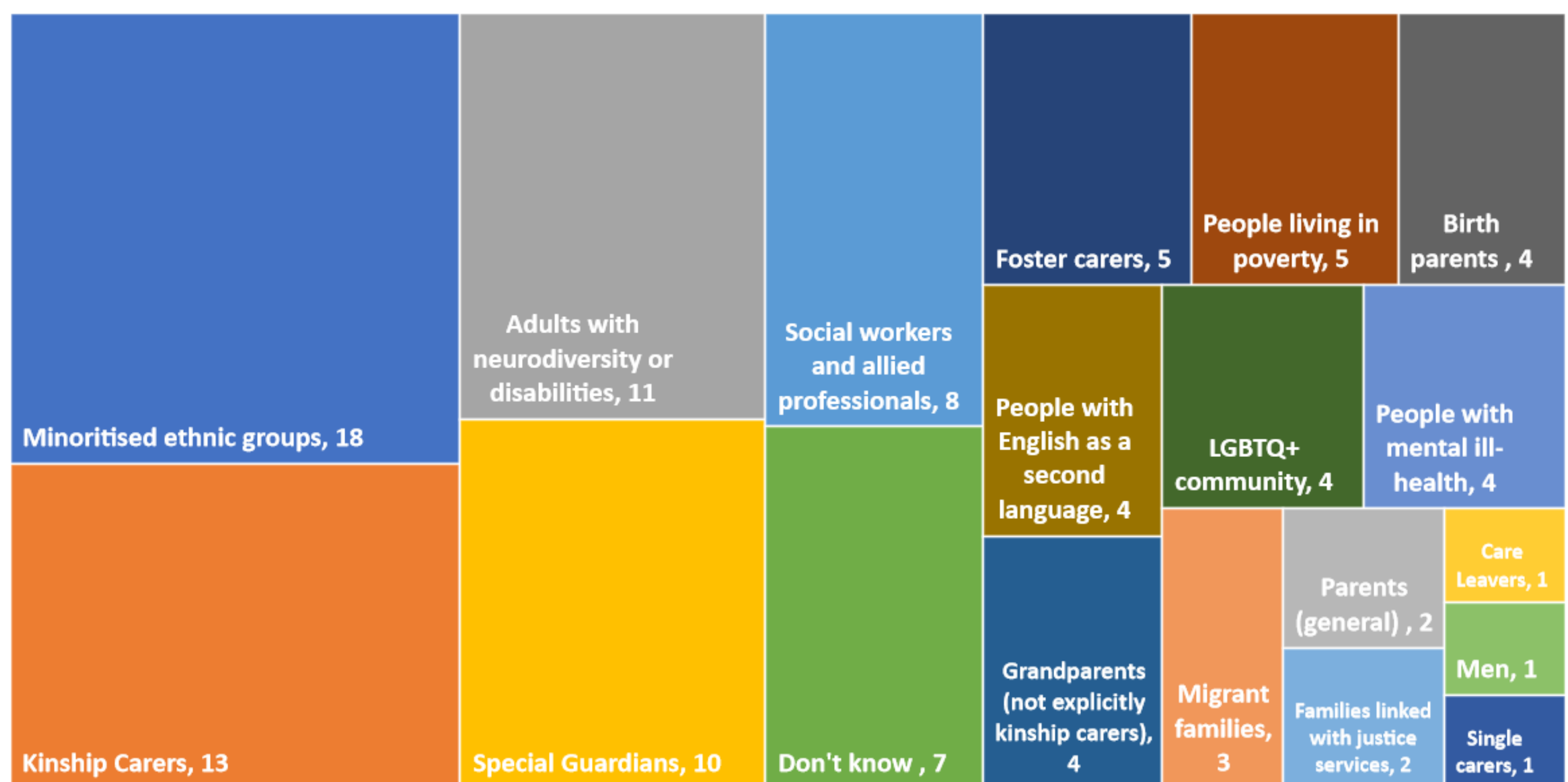
## SHARE YOUR VOICE SURVEY

- **What:** national online survey about barriers to research participation in children's social care
- **Information from:** 101 responses – 51 people had professional social care experience and 61 had personal care/caring experience (15 people had multiple connections).

## FINDINGS

- When respondents were asked who they thought was under-served in children's social care, there was a huge variety of responses (shown in the graph below).

Groups identified as underserved (not children-specific responses)



# WHO IS UNDER-SERVED?

## REVIEW OF EXISTING EVIDENCE

- **What:** review of published UK research to explore which carers are represented in research, and how this is reported.
- **Information from:** 77 papers with foster carers as participants

## FINDINGS

- The way research reports who takes part varies hugely, making it hard to monitor how inclusive research with foster carers is. For example, studies often report demographics like gender and ethnicity, but not sexual orientation or disabilities.
- When demographics are recorded, studies are often under-representing male carers, kinship carers and minoritised ethnicities.
- For other groups, such as carers with disabilities or carers living in poverty, there was not enough reporting to tell if they are under-served or not.
- 65% of the papers we reviewed didn't make any reference to inclusivity or representation in their research. Only 5% reported trying to increase inclusivity. This suggests that inclusivity has not been a priority for a lot of fostering research.

## WHAT THIS MEANS:

There is not much information in research about who is under-served in fostering, nationally, and who is seen as under-served varies. This means we must ask carers about their experiences, to understand representation within our local communities, and how we can respond to it.

## WHY FOCUS ON CERTAIN GROUPS?

As well as highlighting general barriers to inclusivity, this guide spotlights the specific experiences of male carers, kinship carers and carers from minoritised ethnicities.

This is because at the start of InCLUDE, these groups were statistically under-represented in the Reflective Fostering study, compared with national and local levels, and we were focussing on understanding why, and how we could improve inclusivity for these communities.

However, we know that there are other groups who are often under-served and whose unique needs should be explored, for example LGBTQIA+ carers and carers with disabilities. It is important to understand the carers in your community and who is under-served in your context.



# SPOTLIGHT: MALE CARERS

## IT'S A WOMAN'S WORLD

In this section, we share our learning about some of the unique challenges that male carers can face, as a typically under-served group of foster carers.

### SUMMARY



Society has seen a big shift in the way we view gender and parenting, and examples such as the [John Lewis 2022](#) Christmas advert are raising the profile of male foster carers' unique role in caring for children. However, many male foster and kinship carers still told us that they experience a foster care system which is biased towards women as carers. The male carers we spoke to shared that it felt to them that fostering culture is built around women, and support spaces are unwelcoming or inaccessible for men. This often leaves male carers feeling devalued and second-rate, both by society and their fostering organisations.



### BIASES AND STEREOTYPES

We heard that fostering is an empowering experience for male carers. However traditional gendered views such as women being more nurturing and able to care still exist. Some male carers still experience sexist remarks and stereotypes.

*"When I was levelling up to be an advanced carer, they said are you sure? You know men can't multitask as well as ladies. You're not taking too much on? And I'm like yes! You know, but we accept it."*

### SUPPORT AND TRAINING

Male carers told us that support and training spaces are often dominated by female carers. Male carers shared they can feel like "substitutes" for female partners, or feel like they don't add value. It can be hard to speak up in a female-dominated space. They felt that support and training groups also often don't meet men's needs or preferred ways of communicating - male-only spaces or male-specific training and support would be more appropriate.

*"And it was, that was day one or two of our [course name] and at that point I thought, is it for me? You know, if I'd been a single male, I wouldn't have continued. I had my support of my wife there, but otherwise it wouldn't have been for me."*

# SPOTLIGHT: MALE CARERS

## IT'S A WOMAN'S WORLD

### BEING THE "PLUS ONE"

Those we spoke with told us that local authorities often communicate with female carers, even when a male carer is the main or joint carer. As the 'plus one', men don't get emails, or invitations to events or research. This creates a cycle where male carers take the back seat, because it feels easier to take on this role than advocate against it.

*"I am the main carer, this is what I do. My wife, as I said, works, but [...] in all the emails, they're always addressed to my wife."*

### SAFEGUARDING OVER NURTURING

While recognising the importance of safeguarding, male carers said they felt that the safeguarding placed around them and children in their care was above and beyond that for women. They felt overly-scrutinised by fostering services (and society in general). This can lead to them being overly cautious about basic caring tasks and questioning their actions.

*"The men's role within fostering is to question everything you do and are you keeping yourself safe, then looking after the child. And it's so hard to do a job when your hands are tied. You know, you cannot give the children what they need because it's not normality."*

### TO NOTE:

Most of the men who took part in these focus groups were in different-sex partnerships. The experiences of single male carers and men in same-sex couples may be different to these. It's important to explore the individual circumstances of men in your service - these lessons are not universal, but are meant to be a starting point



# SPOTLIGHT: KINSHIP CARERS

## HIDDEN HEROES

### SUMMARY

Kinship carers take on a very different role to mainstream carers, taking in children that they already know and love, often with very short notice or time to prepare. Kinship carers are very aware of this difference. While many do access support, training, and research opportunities, this is often tagged onto mainstream opportunities, meaning that the unique identities of kinship carers are overlooked. This can lead to them feeling invisible or forgotten.

### RECOGNITION

In everyday life, there is much less awareness around kinship care than foster care, exacerbated by the lack of clear definitions of kinship care. The kinship carers we spoke to said that this can leave them feeling like a hidden entity. Sometimes, kinship carers are not recognised as foster carers and are left on their own without adequate support or training.

*"They just think you've got a member of your family living with you, so they don't understand that you're actually a foster carer."*

### SUPPORT

There is huge variation in the support given to kinship carers, depending on where they live. Carers shared that when they don't receive appropriate support, this can leave them feeling overwhelmed, isolated, and burnt-out. Carers shared that they are aware that mainstream foster carers receive more support (personal and financial), and this feels like they are being taken advantage of. It is also important to recognise that not all kinship carers want support.

*"Well, I've been caring for my grandchildren for eight years and I was never invited to anything like that or not aware of anything to do with kinship carers. Over the period of going through all the hoops I had to jump through I found out about things, I found out most of my stuff from other kinship carers, other grandmothers, things that I wasn't even told about, which I should have been told about."*



# SPOTLIGHT: KINSHIP CARERS

## HIDDEN HEROES

### UNIQUE ROLE OF KINSHIP CARERS

Kinship caring is very different to mainstream caring and these differences should not be underplayed. For example, kinship carers often don't choose to become carers and take on children at very short notice. Taking on a caring role changes the relationship with both the child and other family members as everyone adjusts to the new family dynamics, and this can be a long and emotional process. Nevertheless, the kinship carers we spoke with talked about caring as their duty, out of love for these children.

*"I think your normal foster carers who aren't related or aren't friends or family of the child, it's a completely different situation and the emotions are completely different."*

### TRAINING

Despite these differences, there can be a tendency to group kinship and mainstream carers together and for kinship carers to be "tagged on" to mainstream carer training, which doesn't meet their needs.

*"It's like [another participant] said about the training and everything, it's always geared for mainstream carers. It's not keyed in. Even all the forms, and that's what I've bought many times when I've done training. It's all geared up to, mainstream carers."*

### SPECIAL GUARDIANSHIP ORDERS

Kinship carers are not a homogenous group. The Special Guardians we spoke to shared they can feel especially unsupported and isolated, as they are not entitled to the same financial or personal support as kinship foster carers. For example, carers shared turning down pursuing SGOs so they could keep support and avoid conflict with family members.

*"Those holding a Special Guardianship Order can find themselves in a state of limbo. They're doing the same job as a Connected (Foster) Carer, but they're not afforded the same recognition, entitlements or support."*



# SPOTLIGHT: CARERS FROM MINORITISED ETHNICITIES

## EVERY CARER MATTERS

### SUMMARY



We met with carers from minoritised ethnicities, and while some felt included and valued, others shared that they still experience stigma and discrimination because of their ethnic identity, both in society generally and in fostering services. This reduces their confidence and willingness to step forward or speak up about their fostering experiences.



### CONFIDENCE

Carers from minority ethnic groups often felt disempowered and less confident in group settings because they see themselves as the minority. They felt less confident speaking up in group settings or when there is a disagreement. Confidence in their language ability can further exaggerate these feelings, especially among older or grand-parent carers when English is their second language.

*"I think some people do know English and they do understand it, but it's just that they can't express it that well themselves. They just got like a certain level of English and it's not as good as maybe the other people in the group."*

### MARGINALISED VOICES

Some carers told us that even when they have good English and confidence in their caring abilities, they still choose not to speak out as they feel their voice adds little value and has less impact or worth compared with White carers.

*"I speak good English, but I just feel what's the point of even putting my voice across? Because you've got the dominant white ladies who really control the chat and in a way they sort of shut you up if you do say something. And after a while you just feel like, what's the point? "*

### STIGMA

For some cultures, there is additional stigma around fostering and kinship care. Carers said that facing discrimination within their own community has a big negative impact on their emotional wellbeing, and their need for external support.

*"Being a kinship carer obviously means that children are not with their biological parents for whatever reason. And that's a bit of a stigma. And you know, especially within the South Asian community, you get a lot of people talking and stuff like that."*

# SPOTLIGHT: CARERS FROM MINORITISED ETHNICITIES

## EVERY CARER MATTERS

### EXPERIENCES OF DISCRIMINATION

Many minoritised ethnic carers shared how they come to fostering with their own experiences of discrimination and racism, both historic and current. This often means they are less inherently trusting of services, and may even anticipate experiencing discrimination. This can also result in low numbers of people registering to be carers, as they do not want their different cultural parenting practices being scrutinised, for fear of consequences.

*"And the children are coming to my care, I know I've sort of known their families as well, and they didn't want to take their own nieces and nephews because of the distrust of social services getting involved and they've just closed their door."*

### GAPS BETWEEN POLICY AND PRACTICE

Some carers told us that their expectations of inclusive services (for example through culturally-matched placements or placement preferences based on their cultural identities) were not always reflected in their experiences of services. Carers expressed how they often felt especially scrutinised for creating supportive cultural environments. Some also shared that their appearance or dress resulted in misjudgements or stereotypes from social workers.

*"I remember one of the harshest experiences we had. We had a foster child that came in as an emergency and the social worker came to our house and these were her words "It's like, ah, this ain't the right place." And I questioned, what do you mean? What did you expect? She goes "You're too religious". I didn't expect it to be like that. But do you see, so she made that assumption and after that it was a battle to keep that child."*



# THE TOOLKIT

## SUGGESTIONS FOR USING THIS TOOLKIT

This toolkit aims to provide practical suggestions for how to continue to build inclusivity into your fostering services. In each section, we start with a challenge which is commonly shared by under-served carers, then share tools for responding to this challenge, and a point for reflection. The tools can be used when designing or evaluating services, or reflecting on individual practice. The reflection points are designed to be used in team discussions and supervisions.

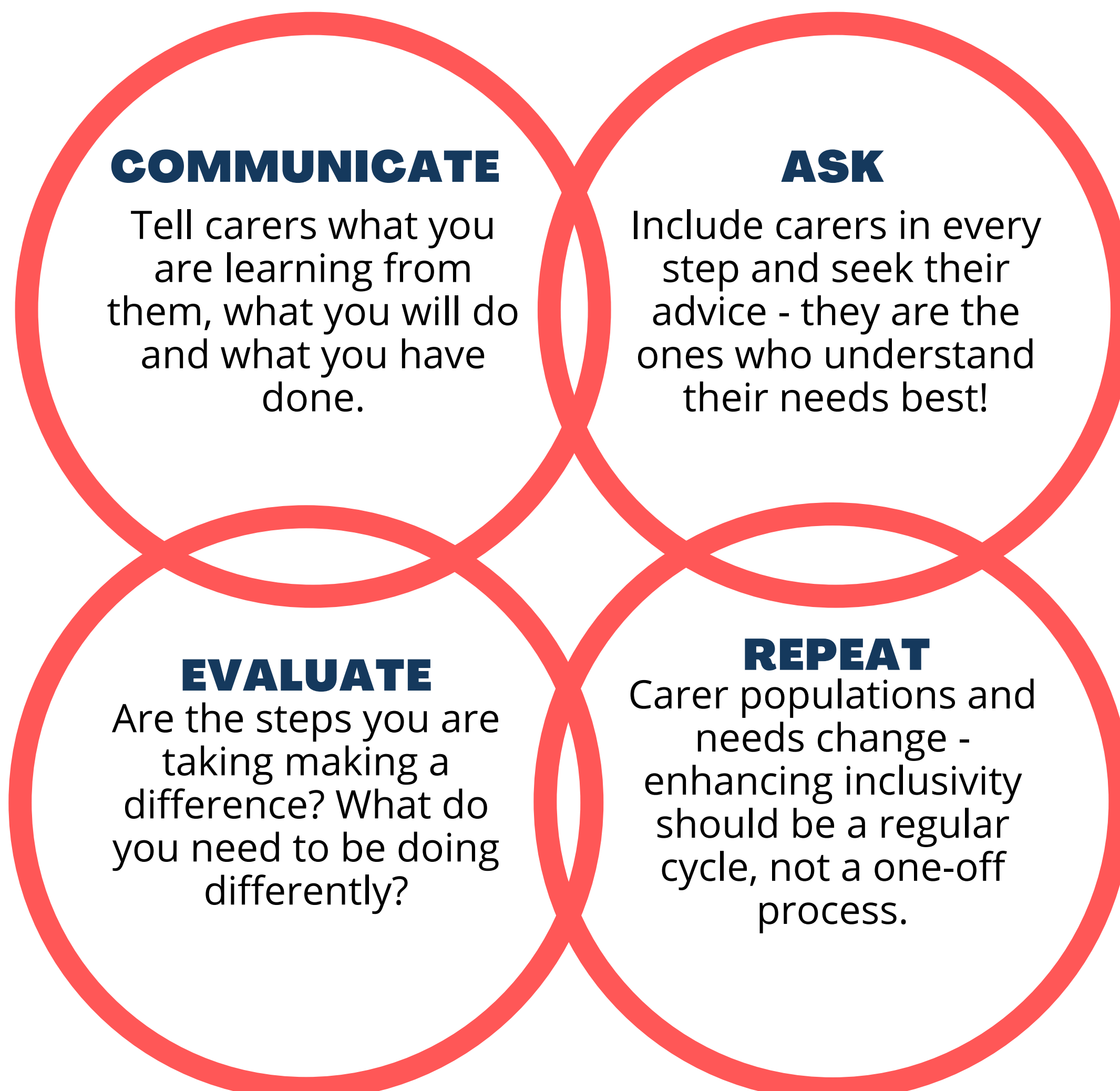
## UNDERSTANDING YOUR CARERS

All carers are unique, and all fostering services are unique. This guide shares the experiences of carers we spoke to, but these won't be universal. The best way to understand how to serve your carers is to ask them about their specific needs. Here are some things we have learnt about how to do this meaningfully and effectively:

- » Ask carers what they need - be open to new ideas and willing to be flexible, but also honest about your limitations.
- » Where possible, find someone who shares characteristics with communities of under-served groups to ask about their needs (for example people who share heritages or cultures). It can be easier to trust someone if they share aspects of our identity.
- » Once you receive feedback, act on it! Thank carers for their contributions, and tell them how you have used their insights, no matter how big or small.
- » Ensure there are multiple channels for carers to communicate their needs. Some people like surveys, others prefer phone calls and others informal meetings.
- » Don't forget that different carers have different needs. We all have multiple identities and it is the intersectionality of these identities which make us who we are. One person's opinion is unlikely to be representative of their whole community - it's important that we seek a wide range of voices.
- » Take time to build rapport with carers before diving in to asking about their experiences.
- » You don't have to do it alone. Working with community organisations or groups who are already supporting under-served groups is a great way to learn more about carers' needs.

# MAKING INCLUSIVE CHANGES

Building inclusive services and cultures takes time. It requires dedication and people to champion the importance of inclusivity. Monitoring is an important part of understanding how you are making progress and identifying where there is room for improvement. This model is similar to the one we used in InCLUDE to try and improve inclusivity within the Reflective Fostering study, It might be helpful for your services too.





# THE TOOLS

## NOT YOUR TYPICAL CARER

### THE CHALLENGE

We all carry stereotypes about what a foster carer is. Carers from under-served groups may be aware that they don't fit most people's idea of a "typical" carer. This can mean they choose to avoid joining support groups or carer spaces as they are worried about being judged or questioned by other carers with a different identity.

### WHAT CARERS TOLD US

*"They're not going to come forward if they feel like they're going to be judged or they're not going to be understood. They're not going to feel comfortable about discussing, you know, their views."*

*"I also think there is a hierarchy sort of, where most of our Asian carers do feel that other people are more important than them. Other people do it in a better way, or they do it in the right way. So even if their way is right, they're afraid to sort of share how they would do it because they sort of feel like it's not how it should be done."*

### TOOLS FOR INCLUSIVITY



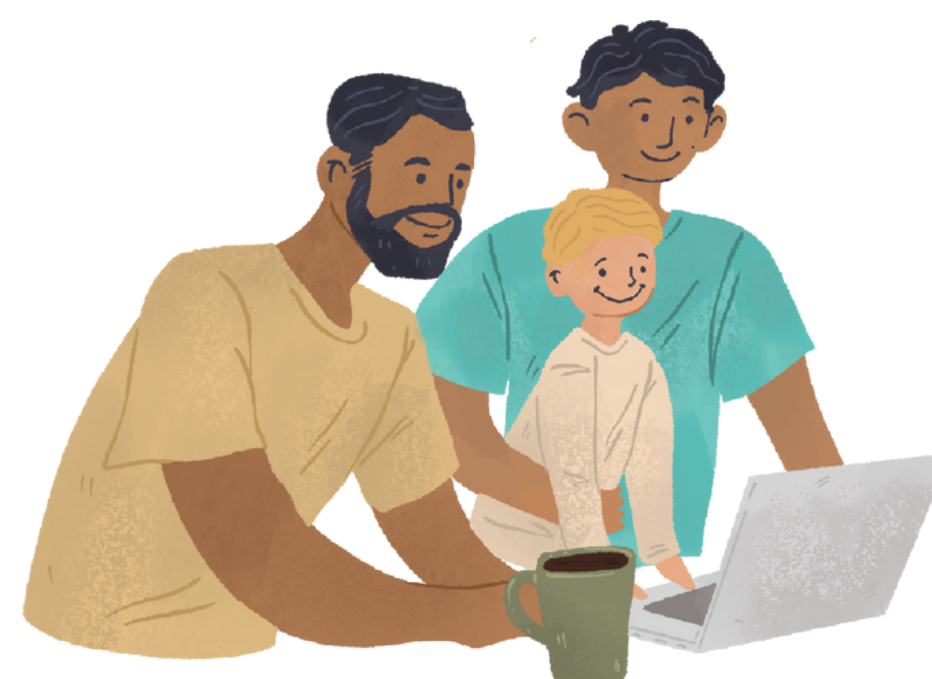
Ensure carers can see themselves represented in your services. This can be through representative advertising (e.g. diverse images and testimonies), or by explicitly stating that all carers are welcome in support groups and other spaces.

Take time to learn about the incredible diversity of carers in the UK. There are great podcasts/webinars you can access, as well as resources from charities and organisations.

### REFLECTION



Who do you consider a "typical" carer? Could this change? Are you making any assumptions?



# TRUST OR BUST

## THE CHALLENGE

Fostering services rely on trust and rapport between carers and social workers, and we know that social workers work hard to try and build such trust. But for many carers, experiencing years of discrimination and marginalisation in society can make it difficult to trust social workers, who are often seen as authority figures and represent the state. Unfortunately, some carers also shared that they experienced stereotyped and prejudicial judgements from services too, for example they felt that their motives for caring or parenting styles were questioned and this was linked back to their identity.

## WHAT CARERS TOLD US

*"And it is a slow process of building the confidence and the trust. Because until you've got that trust, you know, nobody's going to say [anything], or people who have been to through different hardships and trauma are probably less likely."*

*"When I was putting in boundaries, I was told I need to do cultural training because I didn't understand [the child in my care]. But as a carer it is my job and duty to look after her and make sure she makes good choices."*

## TOOLS FOR INCLUSIVITY



Look out for other inclusivity and diversity guides in other settings, especially healthcare, which often have transferrable lessons to fostering and kinship settings about how to build trust and rapport.

Connect with community organisations or faith leaders who carers already trust, and ask for their support in getting to understand carers better. For example, using safe spaces such as their buildings or support group meetings to build rapport with carers.

## REFLECTION



How can you show carers that you are trustworthy and reliable?

What are the qualities which make a good carer? How do our biases affect who we see as good carers?



# SAYING NOTHING SOMETIMES SAYS THE MOST

## THE CHALLENGE

Carers from minoritised groups told us that they often choose to remain quiet rather than speak up when they feel uncomfortable about the way social care is working. Some have been ignored time and again, so give up trying. Others think their voice has less weight because of their identity, and others recognise their experience goes against the norm, so are worried about being vilified if they speak up. Equally, there can be additional pressure when they choose to speak up to be the representative for their community.

## WHAT CARERS TOLD US

"The only way we will feel empowered is seeing that our voices are being heard. Because when you have decades of not being heard, you soon learn not to speak up."

"You don't want to be like a troublemaker. It's like you either have to go with the flow or just keep quiet and just not say anything at all, because you don't want to make it worse for everyone else or just cause problems."

## TOOLS FOR INCLUSIVITY



Speaking up in group setting or formal space can be intimidating. Start by asking people's opinions in a 1:1 setting.

When carers do share with you, show you have listened - let them know what you have done with their opinion, as soon as you can. Even a small text saying "thank you for sharing..." can go a long way.

## REFLECTION



What has it been like for you when you've made a suggestion and not heard anything back? How can you show carers that when they speak up, you listen? How can you demonstrate to carers that their feedback makes a difference?



# SECOND-RATE CARERS

## THE CHALLENGE

Usually one carer is identified as the "main carer" in two-carer households, but carers told us that this often doesn't map onto the realities of caring. For example, male carers felt that they are often presumed to be secondary carers and are excluded from communications. For minority ethnic carers, second carers can be excluded, especially if their English is not fluent.

## WHAT CARERS TOLD US

"Funnily enough, it's actually via the wife [that I heard about the male focus group]. She got the e-mail saying oh, we need men to participate, and then that got sent to me. Not that I got the e-mail because I'm the plus one".

"Sometimes you get two foster carers where one partner is really good at English and the other partner maybe is not fluent. So the first one usually does all the work which involves all the talking and the other one is just kind of in the background."

## TOOLS FOR INCLUSIVITY

Update mailing lists and messaging services so that communications are received by both carers as the default. Free online gender decoding tools can help check the inclusivity of language too.



Be curious: ask who takes on which roles in the household, don't just assume.

Discuss with your team how to connect with carers if their English is not fluent.

## REFLECTION



Have you ever been in a situation where you felt overlooked? What was that like for you? In two carer households, do you automatically contact one carer more than the other? Why? What assumptions have you made without asking?



# IT'S BETTER WHEN WE'RE TOGETHER

## THE CHALLENGE

Carers told us that they often feel more comfortable in groups where there are other people like them. For carers from under-served groups, it can be hard to find communities which they fit into. Lots of marginalised carers would prefer settings tailored for their community. They also want to interact with a diverse range of carers in an inclusive environment where they won't feel judged.

## WHAT CARERS TOLD US

"It's having areas where we know we can say things confidently and not be misunderstood, and it's just brilliant. I think this is like a support group, isn't it really?"

## TOOLS FOR INCLUSIVITY

If your service doesn't have the resources to provide tailored support groups, can you facilitate carers to set up their own groups? There may be carers with just the right passion and skills you need. Or if not, what could you do to ensure that your support groups are experienced as inclusive for everyone.



Link your carers with charities who can provide additional support tailored to their communities.

The hardest part of attending a group is often the first visit. Linking up similar carers who already attend support groups with those who don't can mean that new carers already have one friendly face when they arrive.

## REFLECTION



Are there colleagues or friends you can ask to help you better understand the tailored needs of marginalised groups in your community?



# NOT SO SOCIAL EVENTS...

## THE CHALLENGE

We heard that social events and training programmes for carers can be unintentionally exclusive, for example by not considering their dietary or cultural needs, or their availability at different times. Some geographic locations may not be accessible for all carers. Accessibility needs are not always visible. People often find it easier to just not turn up than to ask for adjustments, which can be perceived as “making a fuss”.

## WHAT CARERS TOLD US

"I've mentioned it a few times and even private messaged... and [the organiser] said “Oh maybe next time we'll arrange something that's not in the pub” but I just felt like they are empty gestures...”

"There's always either the vegetarian option or the vegan option, but the meats are non-halal option... so my husband he doesn't tend to go to these events because he doesn't like to eat vegetables...”

## TOOLS FOR INCLUSIVITY



Hybrid events can be great ways to increase accessibility - lots of people prefer face-to-face settings, but for some online is best.

Vary the times of day and locations of your events. Be aware of religious schedules (e.g. Friday prayers) keep a calendar of key religious events so you can plan around (or for) these.

Where possible, serve food and drink that everyone can enjoy.

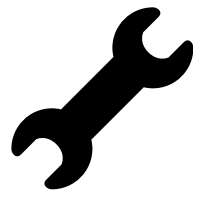
## REFLECTION



Not everyone feels able to ask for adjustments, sometimes it's easier to just not turn up. What changes can you make to your training or support services *before* being asked, to show carers that you value them?



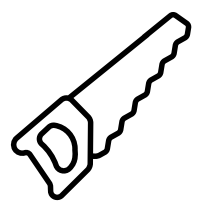
# ALL THE TOOLS: A SUMMARY



Ensure carers can see themselves represented in your services. This can be through representative advertising (e.g. diverse images and testimonies), or by explicitly stating that all carers are welcome in support groups and other spaces.



Take time to learn about the incredible diversity of carers in the UK. There are great podcasts/webinars you can access, as well as resources from charities and organisations.



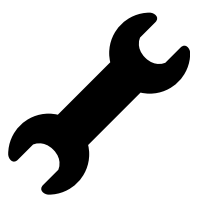
Look out for other inclusivity and diversity guides in other settings, especially healthcare, which often have transferrable lessons to fostering and kinship settings about how to build trust and rapport.



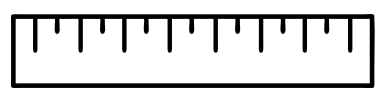
Connect with community organisations or faith leaders who carers already trust, and ask for their support in getting to understand carers better. For example, using safe spaces such as their buildings or support group meetings to build rapport with carers.



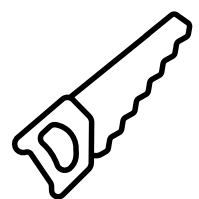
Speaking up in group setting or formal space can be intimidating. Start by asking people's opinions in a 1:1 setting.



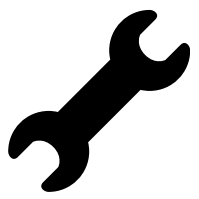
When carers do share with you, show you have listened - let them know what you have done with their opinion, as soon as you can. Even a small text saying "thank you for sharing..." can go a long way.



Be curious: ask which carers take on which roles, don't just assume.



Support carers with limited English by translating documents and offering interpretation services.



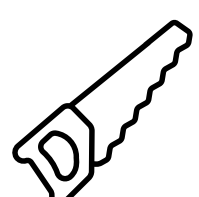
Update mailing lists and messaging services so that communications are received by both carers as the default.



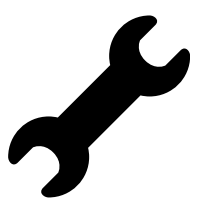
If your service doesn't have the resources to provide tailored support groups, can you facilitate carers to set up their own groups? There may be carers with just the right passion and skills you need.



Link your carers with charities who can provide additional support tailored to their communities.



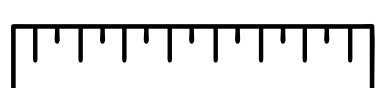
The hardest part of attending a group is often the first visit. Linking up similar carers who already attend support groups with those who don't can mean that new carers already have one friendly face when they arrive.



Vary the times of day and locations of your events. Be aware of religious schedules and keep a calendar of key religious events so you can plan around (or for) these.



Hybrid events can be great ways to increase accessibility - lots of people prefer face-to-face settings, but for some online is best.



Where possible, serve food and drink that everyone can enjoy.

## REFERENCES

1. For example: UK Human Rights Act 1998 ([www.legislation.gov.uk/ukpga/1998/42](http://www.legislation.gov.uk/ukpga/1998/42)) and Equality Act 2010 ([www.legislation.gov.uk/ukpga/2010/15](http://www.legislation.gov.uk/ukpga/2010/15))
2. Ott, E., Wills, E., Hall, A., & Gupta, S. (2023). Foster carer recruitment and retention in England. Centre for Evidence and Implementation and The Fostering Network. Available at: [www.thefosteringnetwork.org.uk/sites/default/files/2023-05/CEI\\_Report\\_Foster\\_Carer\\_Retention\\_and\\_Recruitment\\_May23.pdf](http://www.thefosteringnetwork.org.uk/sites/default/files/2023-05/CEI_Report_Foster_Carer_Retention_and_Recruitment_May23.pdf)
3. Midgley, N., Irvine, K., Rider, B., Byford, S., Cirasola, A., Ganguli, P., ... & Wellsted, D. (2021). The Reflective Fostering Programme—improving the wellbeing of children in care through a group intervention for foster carers: a randomised controlled trial. *Trials*, 22, pp.1-23.

## OTHER HELPFUL RESOURCES

[NIHR \(2020\) - Improving inclusion of under-served groups in clinical research: guidance for INCLUDE project.](#)

[Farooqi et al. \(2023\) - Increasing Participation of Black Asian and Minority Ethnic Groups in Health and Social Care Research](#)

[Traverse \(2020\) - Recommendations for inclusive engagement practice](#)

[Fostering Network \(2023\) - Equality, equity, diversity and inclusion: promoting inclusive practice in fostering](#)