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I am submitting herewith a dissertation written by Kathryn W. Rhodes entitled "Predicting Risk for Early Exit from Foster Care for Newly Approved Foster Parents." I have examined the final copy of this dissertation for form and content and recommend that it be accepted in partial fulfillment of the requirements for a degree of Doctor of Philosophy with a major in Social Work.

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PREDICTING RISK FOR EARLY EXIT FROM FOSTER CARE FOR NEWLY APPROVED FOSTER PARENTS

A Dissertation Presented for
the Degree of Doctor of Philosophy

The University of Tennessee, Knoxville

Kathryn W. Rhodes
August, 1998

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ABSTRACT

Family foster care is the most prevalent type of placement for children in protective custody. However, a shortage of foster homes has jeopardized the quality of services provided for this vulnerable population. Not only have agencies had difficulties recruiting qualified foster families, but 30 to 50 percent of foster homes close each year. Knowledge of risk factors associated with foster parent exits provides much needed information for developing effective recruitment, training, and supervision practices with new foster parents. However, little is known about the reasons some foster families leave the system and others do not.

This purpose of this study was to identify factors predicting risk for early exit from foster parenting. A longitudinal prospective panel design was used to sample cohorts of new foster mothers and fathers. During pre-service training, a battery of well-established standardized measures of parenting beliefs, family functioning, marital adjustment, mental health, social support, and perception of role responsibilities was administered, and demographic data were obtained. Also, foster care workers assessed foster parents' potential to foster. Six months after the completion of pre-service training foster parents were interviewed by telephone to determine if they planned to continue or discontinue as foster parents, and to explore reasons behind their decisions.

Logistic regression was used to determine predictors of intention to discontinue fostering at 6-months and to examine reasons expressed at that time for continuing or not continuing as foster parents. Results from variables measured during pre-service training indicated that interest in adoption and having appropriate developmental expectations for children were associated with reduced risk of discontinuance. Also, results indicated that those who provided placements for sibling groups and those who were satisfied with agency services were less likely to discontinue foster parenting.

TABLE OF CONTENTS

Chapter 1: Introduction 1
Overview of Family Foster Care . 3
Goals of Family Foster Care 4
Utilization of Family Foster Home Placements 4
Preference for family foster home placements 5
Models of family foster care 6
New Foster Parent Exits 7
Impact of New Foster Parent Exits on Foster Care 7
Disruption of caregiving relationships 8
Fewer placement options 7
Increased cost for recruitment and training 8
Explanations of Foster Home Exits 9
Previous Research on foster home closures 10
Purpose of the Study 10

Chapter 2: Review of the Literature 13
Foster Home Closures 15
Agency Policies Associated with Foster Parent Exits 16
Studies of Closed Foster Homes 18
Methodological critique 18
Descriptive studies of closed foster homes 21
Comparative studies of foster home closures 24
Summary of Findings of Studies with Closed Foster Homes 27
Foster Parent Recruitment and Retention 29
Foster parent training 29
Foster parent recruitment 32
Applicant attrition during recruitment and selection 32
Summary of findings from studies on retention 34
Foster Parent Roles 35
Role Responsibilities of Foster Parents 36
Day-to-day care of foster children 36
Relationships between foster children and their families of origin 38
Continuity for children's cultural and ethnic identity 39
Foster Parent Role Understanding 40
Role ambiguity 40
Role ambiguity in foster parenting 42
Foster Parent Role Development 44
Research on Foster Parent Roles 46
Methodological critique 47
Foster parent role conception 49
Role perception of kinship caregivers 50

Summary of findings from research on foster parent roles 51
Foster Parent Characteristics 52
Methodological Critique of Research on Foster Parent Characteristics 52
Sampling and data collection procedures 52
Measurement of foster parent characteristics 56
Findings from Studies of Foster Parent Characteristics 58
Parent mental health 60
Parenting attitudes 62
Marital adjustment 65
Family functioning 67
Social support 69
Characteristics unique to foster parenthood 71
Summary of the Theoretical Model 74
Research Questions 77

Chapter 3: Research Methods 82
Design 82
Agency Setting 83
Human Subjects Review 83
Sample Selection and Data Collection 85
New Foster Parents 86
Model Approach to Partnerships in Parenting (MAAP) 86
Benefits of recruiting subjects and collecting data during MAPP training groups 89
Procedures for assessing foster parent applicants 89
Recruitment strategies 91
Characteristics of foster and adoptive home applicants 92
Comparison of participant and non-participant applicants 96
Subjects excluded from analysis 99
Approved foster parents 100
Foster Care Workers 105
Administration of measures completed by foster care workers 106
Characteristics of foster care workers 106
Comparison of foster care workers 107
Measurement 108
Assessment of Foster Parent Applicants 108
Parent mental health 108
Parenting attitudes 110
Marital adjustment 112
Verbal abuse 113
Family functioning 114
Social support 115
Foster parent role understanding 116

Foster Care Worker Assessment of Foster Parents 117
Foster parenthood potential 117
Role expectations for foster parents 118
Foster Family Records 118
Telephone Interviews 119

Chapter 4: Data Analysis 124
Missing Data 124
Foster Parent Assessment Data 124
Scoring scales/subscales with missing item responses 124
Modified scoring procedures 126
Conditionally missing data 126
Descriptive Analysis of Approved Foster Parents' Experiences 128
Reasons for Fostering 128
Training 130
Source of Social Support 130
Placement Utilization 131
Intent to Leave Foster Care 132
Summary of Assessment Measures 133
Summary Statistics 133
Identification of Clinical Problem Areas 135
Differences in Foster Parent Couples 136
Interrelationships Among Assessment Measures 139
Logistic Regression Analysis 142
Procedures for Model Testing 142
Analysis of Pre-approval Predictor Variables 144
Predictor variable coding 144
Model comparison 145
Analysis of Post-Placement Predictor Variables 149
Normative family changes 149
Foster parent association meeting attendance 150
Satisfaction with the agency 150
Placement utilization 151
Predictor variable coding 151
Model comparison 151
Foster Parent Role Responsibility 155
Comparison of foster parents and foster care workers 155
Summary of Findings 158

Chapter 5: Discussion 161
Characteristics of Newly Approved Foster Parents 161
Predicting Risk for Early Exit 162
Reasons Placing Foster Parents at Risk for Early Exit 162

Predictors of Foster Parents at Risk for Early Exit 163
Interest in adoption 164
Developmental expectations for children 167
Satisfaction with agency services 168
Foster parent role responsibility 169
Placements for sibling groups 170
Conceptual model 170
Implications for Family Foster Care Services 172
Recruiting New Foster Families 172
Pre-service Training 173
Assessment of Foster Parents 173
Assessment battery 173
Assessing foster parent couples 174
Using assessment information for case planning 175
Supervising New Foster Homes 177
Study Limitations 179
Generality 179
Changes in Agency Policies 182
Sample Size 182
Measurement and Data Collection Procedures 183
Telephone interviews 183
Assessment measures 184
Study Design 188
Risk for Early Exit 188
Study Strengths 191
Sample Selection 191
Measurement 192
Design 194
Risk for Early Exit 194
Future Research Priorities 195
Conclusions 199

References 200

Appendices 219

Vita 258

LIST OF TABLES

Table		Page
2.1	Studies of Foster Home Closures	19
2.2	Summary of Findings from Studies of Foster Home Closures	28
2.3	Studies of Foster Parent Roles	48
2.4	Studies of Foster Parent Characteristics	53
2.5	Foster Parent Characteristics Included as Independent Variables in Studies of Foster Care Outcomes	59
3.1	Demographic Data for Tennessee Counties	87
3.2	Constructs Measured During MAPP Training	91
3.3	Characteristics of Eligible Participant and Non-participant Foster and Adoptive Mother Applicants	94
3.4	Characteristics of Eligible Participant and Non-participant Foster and Adoptive Father Applicants	95
3.5	Family Characteristics of Eligible Participant and Non-participant Foster and Adoptive Home Applicants	96
3.6	Application Experiences of Participant and Non-participant Foster and Adoptive Home Applicants	97
3.7	Comparison of Participant and Non-participant Applicants in the Larger Study	97
3.8	Approved Foster Mothers Employed in Helping Professions	99
3.9	Subjects Excluded from Primary Data Analysis	100
3.10	Demographic Characteristics of Foster Mother Applicants in the Study Sample	101
3.11	Demographic Characteristics of Foster Father Applicants in the Study Sample	101
3.12	Family Characteristics of Approved Family Foster Homes	103
3.13	Application Experiences of Eligible Participant Families	104
3.14	Comparison of County Approval of Foster Families for Adoption	105
3.15	Characteristics of Foster Care Workers	107
3.16	Variables Collected from Foster Parent Records	120
3.17	Variables Measured During Follow-up Interview with Foster Parents	120
4.1	Reasons for Fostering	129
4.2	Number of Children in New Foster Homes	131
4.3	Stated Reasons Placing Foster Parents at Risk for Exit	132
4.4	Summary Statistics for Measures Administered During MAPP Training	134
4.5	Foster Parents with Scores in a Clinical Range	136
4.6	Comparison of Means for Foster Parent Couples	138
4.7	Correlations of FPRP Subscales for Foster Mothers	139
4.8	Correlations of AAPI Subscales for Foster Mothers	139
4.9	Correlations Between AAPI Subscale Scores and FPRS, GSI, DAS, FAD, PASNP, and SSB Scores for Foster Mothers	140

4.10	Correlations between Assessment Measures for Foster Mothers	141
4.11	Coding for Dichotomous Variables for Analysis of Pre-Placement Predictors	144
4.12	Steps for Data Entry for Pre-Approval Predictors for Foster Mothers	146
4.13	Foster Mother Characteristics Predictive of Risk for Early Exit	147
4.14	Normative Family Changes	149
4.15	Foster Parent Satisfaction and Dissatisfaction with Agency Services	152
4.16	Placement Utilization of New Foster Homes at Risk and Not at Risk for Exit	152
4.17	Coding of Dichotomous for Analysis of Post-Placement Factors	152
4.18	Post-Placement Variables Predicting Foster Mother's Risk for Exit	152
4.19	Post-Placement Variables Predicting Foster Mother's Risk for Exit: Reconstructed Mode	156
4.20	Comparison of Foster Child Workers' and Foster Family Workers' Role Expectations for Foster Parents	157
4.21	Comparison of Foster Care Workers' Perceptions of the Roles of Foster Mothers and Foster Fathers	158
4.22	Comparison of Foster Mothers' and Foster Care Workers' Perceptions of Foster Mother Roles	159
4.23	Comparison of Foster Fathers' and Foster Care Workers' Perceptions of Foster Father Roles	159

LIST OF FIGURES

Figure		Page
2.1	Points of Attrition for Foster Parent Applicants	33
2.2	Sources of Foster Parent Role Understanding	45
2.3	Pre-approval Factors Predictive of Foster Parent Exits	76
2.4	Post-placement Factors Predictive of Risk for Early Exit	78
3.1	Sample Selection Process	88
3.2	Foster Parents Included in the Study Sample	93
4.1	Data Analysis Flow Chart	125
5.1	Pre-approval and Post-placement Predictors of New Foster Parents at Risk for Exit	171

Chapter 1: Introduction

Child welfare agencies have expressed concerns about maintaining an adequate supply of family foster homes for children in protective custody. According to Kid's Count data (Tennessee Commission on Children and Youth [TCCY], 1996), Tennessee State agencies were responsible for over 12,000 children in 1995. On a national level, the foster care population was 507,000 at the end of 1996, and an estimated 725,000 children were served during that year (Tatara, 1998). This represented a 26.8 percent increase in foster care caseloads since 1990 (Tatara, 1998). Child welfare experts have projected caseloads will rise another 26 percent by 2001 (Committee on Ways and Means, U. S. House of Representatives, 1996).

Two-thirds to three-fourths of children in protective custody have lived in temporary placements with approved family foster parents (Hill, Hayden, Lakin, Menke, & Amado, 1990; Tatara, 1993). However, fewer family foster homes have been available to accommodate foster care caseloads. An estimated 100,000 family foster homes were in service during 1990 compared to 147,000 homes in 1985 (National Commission on Family Foster Care [NCFFC], 1991).

Agencies have reported difficulties attracting and keeping new foster parents (Pasztor & Wynne, 1995). Time and resources spent for recruitment have resulted in only a handful of approved homes (Friedman, Lardieri, Murphy, Quick, & Wolfe, 1980). Thirty to 50 percent of licensed foster homes have closed each year (Chamberlain, Moreland, & Reid, 1990; Jones, 1975; Ryan, 1985; Titterington, 1990). Many of these home closures

have occurred during foster parents' first year as service providers (Baring-Gould, Essick, Kleinkauf, & Miller, 1983; Dando & Minty, 1987; Jones, 1975; USGAO, 1989).

Recruiting more foster parents provides only a partial solution to the problem of foster home shortages if newly approved individuals who are willing and qualified to be service providers leave foster care soon after they are approved. Foster care professionals have suggested foster homes closures are due to lack of training for foster parents, inadequate reimbursement rates, agency inaccessibility, and difficulties of managing foster children's behaviors (USGAO, 1989; National Commission on Family Foster Care [NCFFC], 1991; Pasztor & Wynne, 1995; U. S. Department of Human Services, 1995). However, current, systematic, empirically based knowledge about foster parenthood is insufficient to explain why newly approved foster parents leave foster care. Agencies need more information about the unique aspects of foster parenthood and the factors placing foster parents at risk for early exits in order to support foster parents and to train foster care workers who interact with them effectively.

The purpose of the study is to identify factors that influence new foster home closures. It asks what factors characterize foster parents at risk for leaving foster care soon after they are approved. A model for predicting foster parents at risk for early exit is hypothesized based on factors identified through child welfare practice and research. The model is tested for applicability in future research and practice with foster parents.

The first chapter provides an overview of family foster care, discusses how early exits affect service delivery to foster children, and outlines the purpose of the study. Chapter two summarizes what is currently known about home closures and about foster

parents in general. Review of relevant literature identifies salient variables for understanding new foster parent exits. Chapter three describes how the current study was conducted. Chapter four presents the results of data analysis. Chapter five summarizes the findings, considers limitations and strengths of this research, presents implications for practice, and suggests areas for future research in family foster care.

Overview of Family Foster Care

Family foster care is a critical component of comprehensive child welfare services for children and families. In most cases, children in foster care are there by court order giving protective custody to state agencies. Reasons for placement include neglect or maltreatment, the emotional or mental incapacity of their parents or guardians, or because of children's unmanageable behavior (Kadushin & Martin, 1988). Children in foster care often are from families facing economic hardship, substance abuse, homelessness, mental or physical illness, or imprisonment of a family member (Lindsey, 1994).

The National Commission on Family Foster Care (NCFFC) (1991) recommends that children and youth in foster care receive services to enhance their physical, social, and emotional development; to maintain safe healthy relationships with their families; and to facilitate reunification with their families of origin when possible. To address the goal of reunification, foster care encompasses interventions with families to ameliorate problems leading to placement (Pecora, Whittaker, & Maluccio, 1992). If efforts for reunification fail, practice standards prescribe alternative living arrangements for children to offer opportunities for permanent family ties rather than having them remain indefinitely in temporary custody (NCFFC, 1991).

Goals of Family Foster Care

Two overriding goals direct foster care practice: (1) assuring physical and emotional protection for children and (2) providing children with a sense of permanency. Child welfare agencies meet these goals by placing children in living relationships with the greatest likelihood of providing continuity over time. The preferred outcome is to improve the quality of care provided by birth families. Failing a return home, agencies seek legal termination of parental rights in order to free children for adoption by foster parents or other families. In cases where adoption is not appropriate, long-term foster care placement with an emphasis on independent living usually is the last resort (Pecora, Whittaker, & Maluccio, 1992).

1997 statistics collected through the Adoption and Foster Care Analysis and Reporting System (AFCARS) reported case plans for Tennessee's children in state custody on September 30, 1997 (U. S. Department of Health and Human Services, 1998). The plan for the majority of children (67 percent) was for reunification with parents. Six percent of children in foster homes were waiting for adoptive home placements; one percent were to leave foster care to live with relatives; four percent were in long-term care; and three percent had plans for emancipation. Case plans were not specified for 20 percent of children in care.

Utilization of Family Foster Home Placements

As a general term, foster care refers to all out-of-home placements for children and youth including care in family foster homes, group homes, and other institutions. The majority of children in foster care live with foster families. According to the American

Public Welfare Association (APWA) report based on placement data for 276,355 children in 28 states, at the end of 1990, 74 percent of children in substitute care resided in family foster homes; 16 percent were in group homes or emergency care settings; six percent were in other living arrangements; three percent were in non-finalized adoptive homes; and less than one percent lived independently (Tatara, 1993). AFCARS data on Tennessee's children in foster care indicated that, on September 30, 1997, 18 percent of foster children were living in relative home placements; 56 percent were placed in non-relative foster homes; and 26 percent were living with their families on trial home visits (U. S. Department of Health and Human Services, 1998).

Preference for family foster home placements. Ideally, family foster care offers children continuity in a family environment while agencies provide services to assure permanence with either their families of origin or another family setting. The NCFFC (1991) has summarized reasons for placing children with families rather than in group homes or residential centers. First, child development experts have considered family placements to be the best environments for nurturing and socializing children. Second, practitioners have observed that children experience less disruption when they are placed in settings that are somewhat familiar to them. Family foster homes have been the least restrictive placement available and most closely approximate children's family systems. Third, compared to group homes and residential facilities, family foster homes have had fewer restrictions and more flexibility to individualize service plans for children and families.

Models of family foster care. Efforts to individualize plans of care have led to the development of alternative models for service delivery. Foster care literature has distinguished three models of family foster care that differ from regular family foster care: (1) kinship care, (2) therapeutic foster care, and (3) long-term care.

The least restrictive model for providing a safe living situation while keeping family ties is for foster children to live with family members. Kinship care allows children in state custody to live with relatives who receive financial payment from foster care agencies for their support (Gleeson & Craig, 1994). The use of relative home placements has tripled since 1989, making kinship care the fastest growing type of out-of-home placement funded by child welfare agencies (Courtney, 1994).

Developmental and mental health problems of some foster children require more intensive interventions than are available in typical family settings. Therapeutic foster care models emphasize rehabilitation of specific identified problems and give more responsibility to foster parents for implementing children's treatment plans (Hawkins, 1989). Agencies providing therapeutic foster care expect foster parents to participate in specialized training, ongoing inservice education, and intensive supervision for the children placed in their homes. Usually, agencies reimburse foster parents at a rate somewhere between the board payments for regular family foster care and the salaries of professional staff members.

Long-term foster care meets goals for permanency planning when a child already integrated into a foster home cannot be reunited with his or her family of origin, is not available for adoption, or does not want to be adopted (McFadden, 1985). A long-term

placement provides a stable home environment through a contract among the foster parents, the child, and the agency specifying that the child will remain with a specific foster family until reaching the age of majority. In this way, a child can develop a sense of belonging and stability with a foster family while keeping relationships with his or her family of origin.

New Foster Parent Exits

Family foster care has been the most prevalent type of placement for children in state custody. However, the shortage of foster homes has led some child welfare experts to question if family home placements are the best alternatives for children (NCFFC, 1991; USGAO, 1989). With fewer individuals interested in being foster parents, high dropout rates of newly approved foster parents have added to the problems of placement availability.

Impact of New Foster Parent Exits on Foster Care

Child welfare experts have observed the negative impact of new foster parent exits on the quality of foster care services and the placement experiences of children. New foster parent exits have contributed to additional disruptions of caregiving relationships for children, limited case planning options for social workers, and increased costs of recruitment and training for child welfare agencies.

Disruption of caregiving relationships. Children in foster care already have suffered losses and instability associated with separation from their families of origin (McFadden, 1985). When foster parents exit, foster children living with them are subjected to additional losses and disruptions if they are re-placed with other foster families. These

types of unplanned moves from one foster home to another have compounded children's behavioral and emotional problems while in foster care (Fanshel & Shinn, 1978; Kadushin & Martin, 1988; Wiltse, 1985).

Fewer placement options. Exits of newly recruited foster parents have left agencies with fewer options when selecting placements for children. Practice strategies to maximize placement stability have included carefully selecting foster home placements to address children's psychosocial and developmental concerns (Pecora, Maluccio & Whittaker, 1992). With fewer homes to choose from, social workers have less opportunity to match children with optimal placements (Pasztor & Wynne, 1995).

When new homes close, agencies have overused the foster homes remaining in service (U. S. Department of Human Services, 1995). Overcrowded placements offer less individualized attention for children. Placement breakdown may result if foster parents are unable to attend adequately to children's needs (U. S. Department of Human Services, 1995).

If suitable home placements are not available for children when they enter care, agencies place them where beds are available. Children may live temporarily in more restrictive environments than their needs dictate. Agencies have had to re-place children when homes become available, adding to disruptions children already experience (USGAO, 1989).

Increased costs for recruitment and training. Finally, research with foster parents has found a positive correlation between experience gained from working with foster children and foster parents' abilities to provide stable foster home placements (Stone &

Stone, 1982). High dropout rates in the first year have perpetuated reliance on a newer, less skilled foster parents (Hurl & Tucker, 1995). When new foster parents cease to foster, others recruited to replace them are equally vulnerable to exit. Agencies lose already limited resources and social workers' time when recruitment, assessment, and training efforts result in early exits. Then, even more resources and time have to be spent recruiting and training replacements.

Explanations of Foster Home Exits

Child welfare scholars have attributed foster parent exits to individual, organizational, and societal factors. The stresses on foster families inherent in providing temporary foster care such as dealing with the inclusion and separation of children, coping with loss, responding to disturbing and unfamiliar behaviors of foster children that are associated with child maltreatment, maintaining relationships with child welfare and other support agencies, and being involved with children's families of origin have been well documented (Cautley & Aldridge, 1975; Eastman, 1982; Edelstein, 1981; Fine & Pape, 1991; USGAO, 1989; Wilkes, 1974). Authors also have cited increased demands on foster parents imposed by complex family situations leading to foster care, special needs and demands of foster children, and changes in child welfare policies toward an emphasis on prevention and permanency planning as reasons for home closures (Pasztor & Burgess, 1982; USGAO, 1989; Woolf, 1990). Finally, societal changes affecting families in general such as two-career households and single parenting have decreased the overall labor pool of volunteers from which foster parents come (Pasztor & Wynne, 1995; Pecora, Whittaker, & Maluccio, 1992; U. S. Department of Human Services, 1995).

Previous research on foster home closures. Though child welfare scholars have suggested reasons for foster parent exits, there has been little empirical support for these hypotheses. Previous research studies about foster parent exits have described characteristics of closed homes (Baring-Gould, et al., 1983; Jones, 1975; Ryan, 1985; U. S. Department of Human Services, 1995) or have evaluated training models and supplemental services (Chamberlain, Moreland, & Reid, 1991; Simon & Simon, 1982; Titterington, 1991, USGAO, 1989).

The majority of empirical knowledge for understanding foster parenthood has come from research on foster children's placement experiences. These studies have identified characteristics of active foster parents associated with providing stable, supportive, parental relationships (Dando & Minty, 1987; Hampson & Tavormina, 1980; Jordan & Rodway; 1984; Kraus, 1971; Ray & Horner, 1990; Rowe, 1976; Wiehe, 1981, 1982). However, knowledge about open foster homes cannot necessarily be applied to understanding foster home closures. Only two studies have compared foster parents who indicated intent to cease fostering with those who planned to continue providing placements (Rindfleisch, Bean, & Denby, 1998; U. S. Department of Human Services, 1995). Further investigations are needed to understand why some foster families leave the system soon after they begin foster parenting and others do not.

Purpose of the Study

Intensive study of factors placing foster parents at risk for early exit is needed to determine how families can be retained. This investigation contributes to an understanding of the dynamics of foster parenthood by testing a specific model of factors which have

either previously been associated with effective foster care placements or, from theory and practice experience, would be expected to identify new foster parents at risk for early exit.

Previous studies of foster parents have looked at discrete variables rather than attempting to establish conceptual and theoretical links between them. This study differs from previous research by applying role theory as a framework for examining characteristics predictive of new foster families at risk for exit. Role theory suggests that combined interactions of individual characteristics, organizational policies, and relationships between individuals and organizational representatives determine how individuals perceive their roles and influence decisions about leaving an organization (Beehr, 1987). In terms of foster parenthood, the interrelationships of individual and family characteristics of foster parents, how they perceive their responsibilities with children and the agency, and role expectations of foster care workers who supervise home placements would be determinants of foster parents' continuation or exit from child welfare service.

This study used a battery of standardized measures to examine if foster parent characteristics or combinations of characteristics could predict new foster homes at risk for exit. Foster parents' understanding of their roles, their interactions with others in the foster care system, and family changes added to understanding early exits. Role expectations of foster parenthood held by foster care workers also were considered as predictive factors.

Results of the study provide child welfare workers with much needed information about ways to reinforce and enhance new foster parents' capacities. The model presented

in this study supports an ecological approach for selecting and retaining foster parents. Foster parents begin fostering with a set of strengths and abilities in some areas. They need additional resources in others. An understanding of the characteristics of foster parents that put them at risk for exiting is necessary for social workers to individualize training and supervision during early stages of placement. By targeting foster parents who would benefit from increased monitoring, training, and other services, the risk of early exit can be reduced. This outcome in turn decreases the cost of recruitment and training for agencies and the negative impact of repeated moves and re-placement for foster children.

Current practice for assessing foster parents includes objective criteria such as age, health, income, and the availability of safe living space for additional children, and social workers' subjective judgments about the applicants' strengths and limitations for fostering (Kadushin & Martin, 1988). The battery of valid and reliable standardized measures of variables provides information about the utility of these measures for assessing and supervising new foster families.

Chapter 2: Review of the Literature

In order to understand new foster parent exits, it is necessary to consider what is known about foster parents in general. This chapter reviews previous research on foster parenthood. Specific objectives are (1) to present a theoretical framework with which to organize what is known about foster parents, (2) to identify variables from research and practice to explain exits of newly approved foster, and (3) to develop a testable model to predict foster parents at risk for early exit.

The review addresses research from three relevant areas. The first section discusses foster home closures. What is known in this area has come from studies with former foster parents and research on the effectiveness of retention strategies. Next, discussion of role theory provides an overarching framework for understanding foster parenting within the context of the foster care system. A model for foster parent role development is proposed. The third section presents information about foster parenthood learned through survey research of foster care. An ecological model of parenting highlights foster parent variables considered relevant to outcomes from this body of research. Finally, a model for predicting risk for exit is constructed from salient variables identified in this review.

The majority of foster care research has focused on outcomes for children in care such as length of time in care (Benedict & White, 1991; Lauder, Paulin, & Andrews 1986; Lindsey, 1994; Milner, 1987; Wulczyn & Goerge, 1992), if reunification with birth families occurs (Fanshel, Finch, & Grundy, 1990; Katz & Robinson, 1991), and if placements disrupt (Cautley & Aldridge, 1975; Cooper, Meier, & Peterson, 1987; Kraus,

1971). Though foster children spend more time with foster parents than with any other child welfare service provider, only a few studies have focused directly on foster parents. Much of the current knowledge about foster parenthood has come from practice observations and professional judgments of those working with foster children and foster families. This review incorporates knowledge from both arenas for understanding foster parenthood and factors placing new foster parents at risk for early exit.

A literature review found research studies with foster parents spanning a 30-year period. These empirical investigations have varied greatly in design, populations studied, sample sizes, measurement, statistical analyses, and quality. Inclusion of available reports allows for exploration of an area where empirical knowledge is developing. However, it is difficult to compare studies that are substantially different from others.

This review employs strategies similar to those used by McDonald, Allen, Westerfelt, and Piliavin (1996) for synthesizing foster care research. First, there is a distinction between descriptive studies that provide information about characteristics of foster parent populations and studies that draw conclusions about relationships between foster parent variables and family foster care outcomes. Second, the review categorizes studies into three areas of investigation: (1) foster home closures, (2) foster parent roles, and (3) foster parent characteristics. Studies in each category are compared and reviewed. In the first two categories, foster parents are the unit of analysis. The latter group of studies have either examined foster parent variables associated with outcomes for children or described foster parent samples. The third strategy for evaluating information is to

describe methodologies and discuss limitations of studies. When presenting findings, efforts are made to consider the scope and boundaries of each study.

Foster Home Closures

Foster care agencies have anticipated that a certain number of foster homes will close each year. Unforeseen changes in circumstances have interfered with families' intentions to provide foster care placements. Older foster parents have retired. However, home closures in some areas have exceeded expected attrition rates.

Because there has not been a uniform mechanism for reporting about foster homes, the actual number of closures remains unknown (U. S. Department of Human Services, 1995). Descriptive reports have provided some indication about the extent of the problem. Some state agencies have reported up to 50 percent of foster homes close each year (Ryan, 1985). Findings from samples of closed foster homes have indicated that 30 to 40 percent of foster parents discontinue fostering the same year they begin (Chamberlain, Moreland, & Reid, 1990; Jones, 1975).

Researchers have taken three directions when examining factors affecting the number of available foster home placements. First, studies have examined associations between agency policies and the supply of foster homes (Campbell & Downs, 1987; Hurl & Tucker, 1995). A second approach has gathered data from foster parents (Baring-Gould et al., 1983; Jones, 1975; Ryan, 1985; Rindfleisch, Bean, & Denby, 1998; Urquhart, 1989; U. S. Department of Human Services, 1995). Third, studies have examined the effectiveness of agencies' recruitment and retention strategies.

Agency Policies Associated with Foster Parent Exits

One factor thought to contribute to foster home closures has been the low reimbursement rate paid to foster parents (Pasztor & Wynne, 1995; USGAO, 1989). Campbell and Downs (1987) examined the relationship between economic incentives and the supply of foster homes. This study considered supply in terms of beds available in open homes rather than the actual number of open homes or if foster homes closed. Analysis of data from a survey of 1074 foster parents in eight states found that board rate alone did not influence the number of licensed family foster homes. A relationship was found between the level of board payment and the number of foster children in a home. Results of a logistic regression analysis comparing foster homes with placements and those without indicated that time available for fostering, lack of problems with the agency, and having more than a year of fostering experience increased the likelihood of having a placement.

Hurl and Tucker (1995) tracked trends of foster home entries and exits over a 20-year period. Using event history analysis, they plotted exits as the age of foster homes at the time of closing. Foster home closures were summarized in terms of the probability that a foster home remained in service until time t, or that closure did not occur and the home remained open. Historical happenings that influenced major changes in foster care policies over the 20 year study period were entered as covariates to analyze their effects. This analysis allowed for comparison of foster homes that closed after varying lengths of service to identify patterns of change. Of the 629 homes opened from 1968 to 1990, 81 percent left foster care. Trends emerged relating foster home exits to the time spent

fostering. Exits increased to a maximum after fostering for three years, decreased as foster homes were active for six years, and increased again after families fostered for nine years.

On an aggregate level, foster home closures differed based on the length of time spent fostering rather than on institutional changes in the foster care system. New foster homes had a greater propensity to close, while remaining open increased the likelihood that foster homes continued. Changes in policies, the demand for foster care placements, and a decrease in the number of available foster homes slightly increased the probability that foster homes remained open. When agencies did not have enough beds for children in care, they were less likely to close foster homes. The nature of care required for foster children had no significant effect on the probability of foster home continuance.

Hurl and Tucker (1995) further hypothesized that pre-existing family characteristics and behaviors increased continuance of foster homes. All families had a higher rate of exit during the first two to three years but those judged as having higher levels of commitment exited later. The combined effects of commitment and training extended the length of time until home closure by 10 percent. Family experience and foster mothers' employment status had no significant effects on exit rates.

Though these studies obtained large samples, the models tested were postdictive. Dependent variables of interest included the number of placements provided, if children were in the home, and how long the home remained open. Operational definitions for constructs were derived from data available in foster home records. For example, Hurl and Tucker (1995) defined commitment as the number of restrictions on conditions under which families stated they would care for children. Families with fewer restrictions were

rated as having a higher level of pre-entry commitment. Experience as a family unit was measured by the number of years foster parents were married. These variables did not capture concepts of families' interest in foster care and family functioning. It is likely important information for explaining differences in foster parents' experiences was missed.

Studies of Closed Foster Homes

Six studies asked foster parents about factors related to home closures (Baring-Gould et al., 1983; Jones, 1975; Ryan, 1985; Rindfleisch, Bean, & Denby, 1998; Urquhart, 1989; U. S. Department of Human Services, 1995). Three of these studies provided descriptive profiles of closed homes (Baring-Gould et al., 1983; Jones, 1975; Ryan, 1985). Three compared differences between open and closed foster homes (Rindfleisch, Bean, & Denby, 1998; Urquhart, 1989; U. S. Department of Human Services, 1995).

Methodological critique. The quality of studies should be assessed before considering what is learned from this body of research. Methodological limitations in sampling procedures, data collection, and data analyses have brought the reliability and validity of results into question. Table 2.1 presents a summary of the type of study, study samples, data collection procedures, and statistical analysis.

Results of these studies could not be generalized to other populations of foster parents. One study (Jones, 1975) was conducted in Great Britain. Differences in culture and child welfare policies have to be considered when applying results to United States foster families. Two studies used random sampling techniques for subject selection (Rindfleisch, Bean, & Denby, 1998; U. S. Department of Human Services, 1995). The

Table 2.1. Studies of Foster Home Closures

Study	Type of Study	Characteristics of Sample	Data Collection Procedures	Data Analysis
Baring-Gould et al., (1983)	Cross-sectional, descriptive	N = 88 Closed foster homes Response rate = 50 %	Mailed questionnaire	Descriptive
Jones, (1973)	Cross-sectional, descriptive	N = 90 Closed foster homes Response rate = 61 %	Focused interviews Case records	Descriptive Chi-square analysis of age at time of recruitment and length of service
Ryan, (1985)	Cross-sectional, descriptive	N = 84 Closed foster homes Response rate not reported	Telephone interviews	Descriptive
Rindfleisch, Bean, & Denby, (1998)	Cross-sectional comparison of closed and open homes Random sample	N = 804 Open homes, randomly selected Response rate = 68 % N = 720 Closed homes Response rate = 42 %	Mailed questionnaire	Logistic regression
Urquhart, (1989)	Cross-sectional comparison of closed and open homes	N = 275 Open homes Response rate = 43 % N = 101 Closed homes Response rate = 15 %	Mailed questionnaire	Chi-square
U.S. Department of Human Services (1995)	Cross-sectional comparison of closed and open homes Stratified random sample	N = 1572 Open homes Response rate = 69 % N = 282 Closed homes Response rate = 78 %	Mailed questionnaire Telephone interview	Descriptive Comparison of open and closed homes

remaining reports based findings on data from convenience samples of former foster parents. Agencies did not kept track of closed foster homes. Researchers drawing study samples from closed home lists reported difficulties locating former foster parents (Baring-Gould et al., 1983; Jones, 1975; Rindfleisch, Bean, & Denby 1998; Urquhart, 1989). Participation rates for closed homes have ranged from 13 to 78 percent. Though no reports compared respondents and non-participants, samples of closed homes are more likely to include former foster parents with strong positive or negative opinions rather than those with views that are more neutral.

Researchers have relied on mailed questionnaires for data collection (Baring-Gould et al., 1983; Rindfleisch, Bean, & Denby, 1998; Urquhart, 1989). Mailed surveys do not offer researchers opportunities to monitor test conditions or opportunities to clarify responses (Judd, Smith, & Kidder, 1991). The quality and accuracy of data were not known.

Four studies provided descriptive reports of data. Without inferential statistical analyses, findings might have only been chance observations. Two, more methodologically sound studies, compared open and closed homes. Urquhart (1989) used chi-square analysis to determine differences in responses between foster parents in open and closed homes. Rindfleisch, Bean, and Denby (1998) tested a predictive model for continuance using logistic regression.

Descriptive studies of closed foster homes. Descriptive reports provided information about reasons for closure from samples of former foster parents. Researchers

asked two questions. Why did ex-foster parents want to foster? What reasons did foster parents give for home closures?

Studies examining how reasons for fostering influenced home closures operationalized the construct differently. Baring-Gould et al. (1983) asked former foster parents why they started fostering. Twenty-eight percent reported being foster parents to provide for a specific child. After the child left foster care, they were not interested in providing placements for other children and asked that their homes be closed. Jones (1975) categorized responses from home study reports as (1) wanting to help children and (2) own family oriented reasons. In this sample, 52 percent of foster mothers whose homes later closed started to foster for family oriented reasons. Jones concluded that foster parents with family oriented reasons for fostering were more easily frustrated with agency policies than families with a more general interest of helping children. Without comparisons with open foster homes, any conclusions about how such reasons for fostering related to home closures were only speculation.

A second research question was why foster homes closed. Though child welfare agencies closed some foster homes, most foster parents made the decision to leave. Baring-Gould et al. (1983) reported that agencies initiated 18 percent of home closures. Fifty-eight percent of foster parents requested that their homes be closed. Twenty-four percent of homes closed by mutual agreement between foster parents and agencies.

Only limited information about home closures was available. Foster parents were the primary data source. Yet, their recollections were not always consistent with agency reports. For example, Jones (1975) found that 20 percent of foster mothers and 33 percent

of foster fathers removed from agency lists thought they were still active and awaiting placement. Statements about reasons for closure found in agency records were vague and incomplete. There was no information about agency-initiated closures or foster care workers' assessments of former foster parents' abilities to provide placements. Information from foster care agencies is necessary to make a distinction between homes that were providing adequate placements at the time of closure and those with substandard levels of care.

There were four main categories of reasons for leaving foster care. First, foster homes closed as a result of unexpected, normative life changes in families circumstances occurring after they were approved to foster. These changes had little to do with fostering experiences. Second, respondents cited dissatisfaction with foster care workers and agencies. Third, they reported being unprepared to deal with demands of caring for foster children. Fourth, respondents indicated that their perceptions of how caring for foster children affected their family influenced decisions about closure.

Across the studies reviewed, the frequency of family change as a reason for exiting foster care ranged from 62 percent (Baring-Gould et al., 1983) to approximately 20 percent (Jones, 1973; Ryan, 1985). Only one report provided demographic information about the sample. A comparison of sample characteristics to account for the wide range of findings could not be made.

Not all family changes resulted in decisions to leave foster care. Baring-Gould et al. (1983) found changes in family residence, foster mothers' employment, and pregnancy led to home closures. Other foster parents reported leaving because of old age, failing

health, or death of a spouse (Ryan, 1985). Jones (1975) reported higher dropout rates for foster parents under thirty years of age at the time they were recruited. Combined findings of these studies suggested that younger foster parents and those who are older are likely to encounter more normative life changes that interfere with their interests and abilities to provide placements for children. This was consistent with practice wisdom of selecting foster parents from individuals with stable life circumstances (Kadushin & Martin, 1988).

Foster parents' perceptions of their relationships with foster care workers also influenced decisions to exit. Over 25 percent of ex-foster parents identified lack of support from agencies and foster care workers as their primary reason for leaving foster care (Baring-Gould et al., 1983; Jones, 1975). More specifically, foster parents cited poor communication with foster care workers (Baring-Gould et al., 1983; Jones, 1975), delays in application and assessment (Baring-Gould et al., 1983), feeling left on their own after being approved (Jones, 1975), and lack of services (Baring-Gould et al., 1983). Though reports emphasized dissatisfaction, it is important to note that the majority of respondents were not dissatisfied with agency provisions for services and relationships with foster care workers.

A third area of inquiry was if former foster parents were prepared to work with foster children. Researchers determined preparation for fostering by asking respondents about their participation in specific training as foster parents. Less than half of respondents reported receiving training (Baring-Gould et al., 1983; Jones, 1975). Ryan (1985) found that 32 percent of foster parents with no training dropped out compared to only 11 percent of trained foster parents. The assumption was that receiving training prepared

foster parents. However, Jones (1975) observed that some foster parents thought they were unprepared even though workers reported having provided training. There was no indication of how former foster parents felt unprepared or of how those who received training thought training supported their efforts with foster children.

Finally, descriptive studies with closed foster homes examined how fostering affected foster families. First, investigators considered possible economic strain on families. Two studies asked about economic reasons for leaving foster care. Some 60 percent of ex-foster parents in Jones's (1975) sample reported they were employed after leaving foster care. However, few said they gave up fostering for financial reasons. Baring-Gould et al. (1983) reported 12 percent of foster parents cited inadequate financial payments as a reason for closure; 53 percent of closed homes were satisfied with the amount of financial assistance provided by the agency.

A second consideration was the relationships between foster children and biological children. Three-fourths of respondents in Baring-Gould et al.'s (1983) study had their children living with them. Seventeen percent of former foster parents cited problematic relationships between foster children and biological children as reasons for closure. Forty-four percent of ex-foster parents described relationships between foster children and biological children as positive.

Comparative studies of foster home closures. Descriptive studies provided information about closed homes. However, there was no indication of how the experiences of former foster parents differed from those who continued to foster. The

1989 National Survey of Current and Former Foster Parents (U. S. Department of Human Services, 1995) tried to answer these questions.

A mail/telephone survey was conducted with a stratified random sample of current and former foster parents in nine states to determine recruitment and licensing practices, services available to foster parents, and barriers to licensing and retention. Reasons for leaving the agency cited most frequently by former foster parents were being dissatisfied with agency policies and practices (37 percent) and having problems with foster children's behavior (24 percent), similar to findings of previous studies.

Comparison of experiences between current and former foster parents indicated that problems with children's behavior occurred almost as frequently in open homes as in closed home. Differences between open and closed homes provided a better indication of factors affecting home closures. The groups differed in three areas. First, 29 percent of former foster parents compared to nine percent of active foster parents reported dissatisfaction with agency services. Thirty-one percent of former foster parents believed workers did not understand their problems or the needs of foster children. Second, all foster parents responding to the survey indicated children in their care needed counseling services, however, former foster parents cited counseling as their primary service need. Third, active foster parents were more likely to be members of a foster parent association.

The two remaining studies asked more specific questions about differences between open and closed homes. Urquhart (1989) examined how separation and loss affected foster parents. Rindfleisch, Bean, and Denby (1998) tested factors that might predict continuance and discontinuance as service providers.

Urquhart (1989) surveyed a cross-sectional sample of 275 open and 101 closed foster homes about training, agency supports, separation uncertainties, feelings surrounding removal of foster children, and extra-agency supports at the time of removal. Chi-square analysis comparing open and closed homes found that groups were statistically different in their responses in two areas: (1) training and (2) level of involvement in case planning. Approximately half of the foster parents in both groups reported having received training. Thirty-six percent of those from open homes and 19 percent of those from closed homes reported having specific training for dealing with children's removal from their homes, a statistically significant difference. Respondents from open homes reported having more involvement in case planning decisions and being more active in preparing foster children for other placements than respondents from closed homes did. No causal relationships were determined to explain differences between groups.

Foster parents in open and closed homes shared similar views and experiences. Both sets of parents found separation and loss to be difficult. Respondents in both groups indicated the importance of support from their spouse for their efforts with foster children.

Rindfleisch, Bean, and Denby (1998) conducted a cross-sectional survey comparing data from 720 closed homes and 804 randomly selected open foster homes to predict the status of foster parents as continuing or no longer licensed. An important strength of this study was the development of a survey instrument for data collection based on extensive interviews with foster parents to measure the following sets of variables: (1) reasons for becoming licensed, (2) reasons they might cease fostering, (3)

foster parent's role and relationship with agency representatives, (4) their opinions about fostering, (5) training effects, (6) role clarity, (7) workload, and (8) social support.

A model for predicting continuance or discontinuance of fostering was tested using logistic regression analysis. Two variables predicted discontinuance: (1) if respondents wanted to adopt but were unable to do so and (2) if they had negative perceptions of agency procedures. Receiving less support from other foster parents, having more than one worker, and perceiving workers as not reaching out had modest odds ratios for predicting closures. Variables found to have low odds for predicting continuation included being named in an allegation of child abuse, not receiving enough money, having a significant personal loss, and seeing a child sent back to a negative situation. These variables did not predict home closures.

Several variables were not predictive of foster home status, which countered findings from other studies. These included reasons for fostering, training effects, opinions about fostering, length of time fostering, and entry into paid work. The absence of significant results suggested that foster parents who left and those who continued shared similar reasons for fostering and experiences in training.

Summary of Findings of Studies with Closed Foster Homes

Table 2.2 summarizes findings of studies with closed homes. Variables affecting decisions about fostering have included (1) interest in fostering, (2) changes in family circumstances, (3) adoption, (4) perception of support received from foster care workers, (5) lack of training, (6) foster children's behavior, and (7) having a role in case planning. Most former foster parents gave more than one reason for leaving programs. A single

Table 2.2. Summary of Findings from Studies on Foster Home Closures

Variable	Baring-Gould et al., (1983)	Hurl & Tucker, (1995)	Jones, (1973)	Ryan, (1985)	Rindfleisch, Bean, & Denby, (1998)	Urquhart, (1989)	U.S. DHS, (1995)
Length of service		X					
Commitment to foster care		X			X		
Training	X	X	X	X		X	X
Reason for Fostering	X		X				X
Normative Changes	X			X			X
Lack of Agency Support	X		X		X		X
Reimbursement Rates	X						X
Conflict with Foster Parents' Children	X						X
Separation and Loss						X	X
Foster Parents" Role in Case Planning						X	X
Adoption	X				X		X
Foster Child's Behavior				X			X
Membership in Foster Parent Association							X
Allegations of Abuse and Neglect					X		X

X indicates variables reported to influence foster home closures.

variable did not appear to be critical enough to determine whether individuals continued or left foster care. Decisions to exit may be dependent on a combination of variables, how foster parents perceive situations, and their personal resources to manage the demands of children's behavior and working within the child welfare system. There is a need to test these variables to distinguish those that are strong predictors of foster parent exits.

Foster Parent Recruitment and Retention

Research with closed foster homes has highlighted the lack of training as one reason foster parents leave foster care. Child welfare practitioners have agreed that inadequate training hinders foster parent retention (Boyd & Remy, 1979; Chamberlain, Moreland, & Reid, 1992; USGAO, 1989; Pasztor, 1985; Stone & Stone, 1983). In response, child welfare agencies have initiated various training models aimed toward increasing foster parents' knowledge about child welfare. Goals of training have been to improve foster parents' child management skills, to increase their functioning as team members, and to assure they have a clear understanding of what is expected of them as they work with children (Pasztor, 1985; Simon & Simon, 1982).

Foster parent training. Pre-service and inservice training potentially have prepared foster parents to handle the wide range of problems experienced by foster children and their families (Pasztor & Burgess, 1982). Most training models have addressed specific aspects of foster parenting. Common topics have included understanding foster parents' roles with children, agencies, and birth families; dealing with particular issues facing foster children, addressing loss, working with problematic behaviors, and preparing families for anticipated adjustments associated with caring for children on a temporary basis (Freund,

1976; Simon & Simon, 1982; Titterington, 1990; USGAO, 1989; Wasson & Hess, 1989). Content has covered why children are in foster care, how to work with children's families of origin, issues of separation and loss, physical and emotional effects of maltreatment, and specific intervention skills with children's behaviors (Duclos, 1987; Freund, 1976; Simon & Simon, 1982). Foster parent training has been associated positively with placement stability (Berry, 1988; Simon & Simon, 1982), foster parents' confidence in their abilities (Berry, 1988), frequency of contact between foster parents and foster care workers (Titterington, 1990), and therapeutic potential of placements (Berry, 1988; Steinhauer, Johnson, Hornick, Barker, Snowden, Santa Barbara, & Kane, 1989; Titterington, 1990). However, only one investigation specifically examined if training prevented foster parent dropout.

Chamberlain, Moreland, and Reid (1991) evaluated the effect of enhanced support and training, and stipends on foster home utilization. Foster parents providing therapeutic foster care through a private agency for 72 children in care between 1988 and 1990 were assigned randomly to one of three experimental conditions: (1) enhanced support and training consisting of a two hour group meeting with other foster parents one time per week, telephone contact three times per week from a foster parent trained to facilitate the group, and a $70-per-month supplement to the normal reimbursement; (2) the $70-per-month increase only; and (3) a control group that received neither enhanced support and training nor the stipend.

Researchers obtained foster parent dropout rates by asking the agency licensing staff which foster parents dropped out or had their home closed for any reason during the

two-year study period. Investigation found differences in exit rates between foster parents participating in the study and foster parents statewide. The overall dropout rate for the participating foster parents was 16.6 percent compared to the 40 percent statewide rate during the same time period. The dropout rate was not evenly distributed across the three experimental groups. Each of the groups receiving additional services had fewer dropouts than the control group: 9.6 percent for the enhanced support and training and increased stipend group and 14.3 percent for the increased stipend only group. Foster parents in the control group had a dropout rate of 25.9 percent.

Results suggested that a combination of ongoing support and training and increased payment were promising interventions for retention. However, reports of reduction in dropout rates were descriptive. No direct association was evident between interventions and dropout rates. Researchers speculated that results might have been due to additional attention given to foster parents during the study rather than the test conditions (Chamberlain, Moreland, & Reid, 1991). Data obtained from the agency about foster home closures did not specify reasons for the home closures or if foster parents or the agency initiated closures. Foster homes that dropped out were not contacted for follow-up. Without more information, investigators could only infer why some foster parents in the study persevered, and why others left the program.

The training model tested in the study used experienced foster parents as group leaders and mentors for individuals providing therapeutic placements. Other studies (Titterington, 1990; U. S. Department of Human Services, 1995) and practice reports (Pasztor & Wynne, 1995; Wasson & Hess, 1989) have suggested that support received

from foster parents is a factor in retention. Further investigation is needed to determine how types and sources of support may affect new foster parents' decisions about fostering.

Foster parent recruitment. Agencies have designed recruitment and selection programs to accurately inform interested individuals about the foster care system, children in care, and agency requirements for foster parents. Pre-service group training programs have provided potential foster parents with information about family foster care and agencies with a vehicle for assessing applicants' strengths and abilities to meet role demands for foster parenthood (Pasztor, 1985). Agencies have expected a certain number of applicants to self-select out of the program during training. Approval as a family foster parents has required completion of training, evidence that the applicant can meet agency standards for providing a safe home environment, proof of having sufficient family resources in terms of space and income, and willingness to adhere to agency policies.

Several authors have described pre-service training models (Davis, Morris, & Thorn, 1984; Pasztor & Wynne, 1995). Only two models were subjected to systematic evaluation. Stone and Stone (1983) evaluated the effects of the Nova model on service delivery patterns and replacement rates for children. Lee and Holland (1991) reported changes in parenting attitudes following participation in the Model Approach to Partnership in Parenting (MAPP) training. Evaluators did not ask if pre-service training decreased dropout rates.

Applicant attrition during recruitment and selection. Recruitment and retention literatures have targeted four points of attrition for potential foster homes (see Figure 2.1).

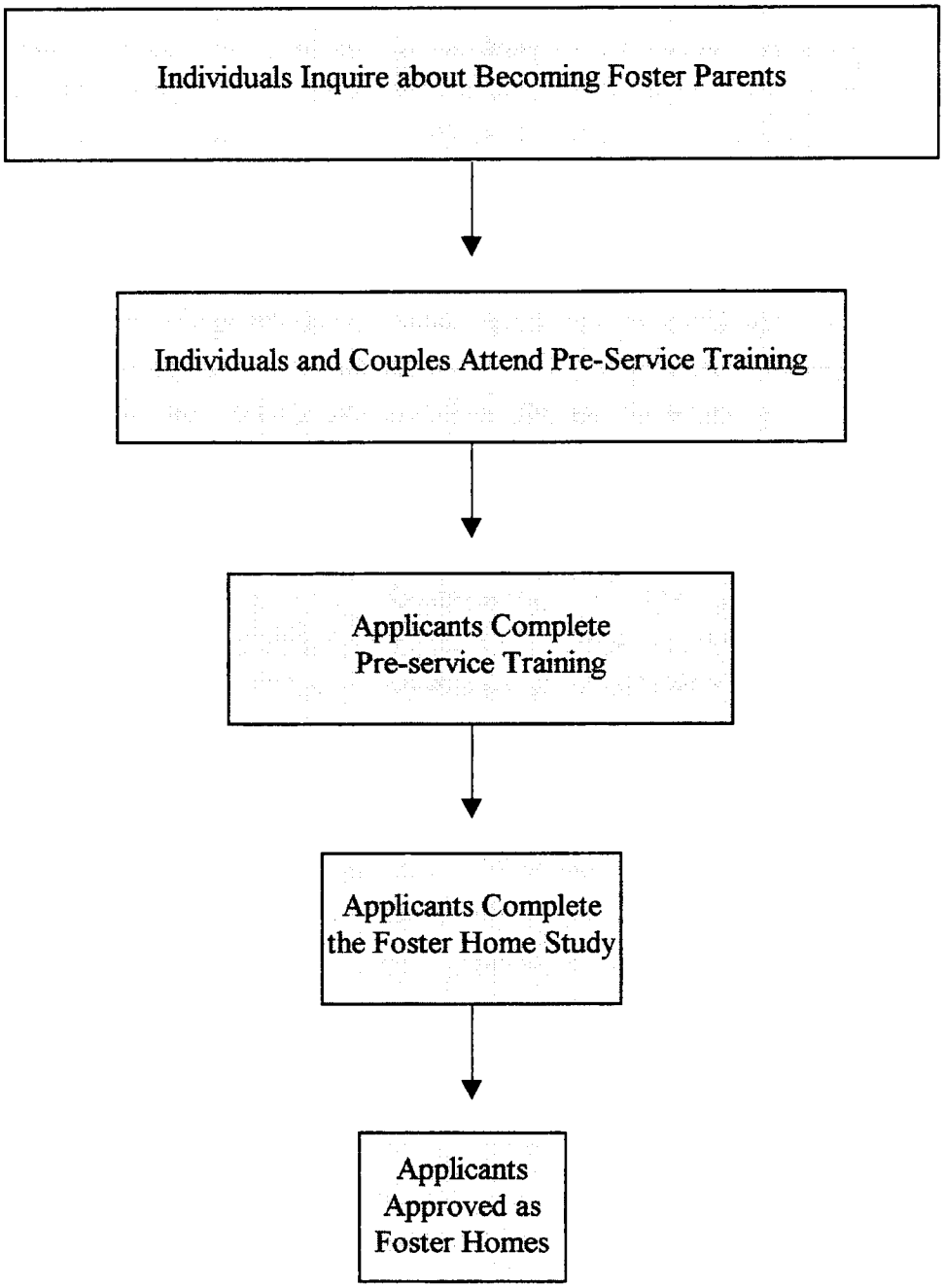


Figure 2.1. Points of Attrition for Foster Parent Applicants

First, many individuals interested in fostering have not followed through after their first few contacts with agencies (Friedman et al., 1980). Others have self-selected out during pre-service training (Davis, Morris, & Thorn, 1984; Pasztor, 1985). Agencies have expected these points of exit as part of the initial screening process for applicants. Agencies also have lost potential foster parents when individuals successfully complete pre-service training, then drop out before agencies complete home studies. It is not known if this group might have been approved. However, literature on recruiting and retaining minority family foster homes has emphasized the importance of working with applicants at this stage to maximize the number of potential placements (Davis, Thorn & Morris, 1984; Delgado, 1984; Schroeder & Lightfoot, 1983; Valiente, 1983). Finally, observations of dropout rates have indicated that foster families are vulnerable to exit from foster care during their first placement experiences (Chamberlain, Moreland, & Reid, 1991; Jones, 1975, Morrissette, 1994).

Summary of findings from studies on retention. Common practice recommendations for retention have included enhancing teamwork between foster parents and foster care workers and providing information and support to foster parents through pre-service and inservice training. However, studies of foster parent training have emphasized placement utilization rather foster parents exits. Foster parent exits have been a secondary concern. There has not been strong empirical support of practice observations that training increases foster parent retention. Other factors such as additional attention from the agency and increased interactions with other foster parents have provided alternative explanations for differences between trained and untrained foster parents.

Studies of closed foster homes have reported conflicting results about the effects of training. Though former foster parents have indicated a need for training (Baring-Gould et al., 1983; Ryan, 1985; Urquhart, 1989), it did not differentiate foster parents who continued from those who exited (Rindfleisch, Bean, & Denby, 1998).

The presence or absence of training may not influence new foster parents' exits as much as the degree of congruence between new foster parents' expectations and the realities they experience as service providers. Pasztor (1985) has observed that problems arise when foster parents are recruited and trained to be team members and then face agency ambivalence about their roles. Clear understanding of role expectations may help new foster parents deal with adjustments involved in caring for foster children.

Foster Parent Roles

Child welfare scholars have applied role theory to understand foster parents' behaviors in the context of child welfare settings (Galaway, 1972; McCoy, 1961; Mietus & Fimmen, 1987). Role theory explains behavior by roles and role expectations (Biddle, 1979). Roles are defined by sets of expectations applied to those who hold a particular position by others within and beyond an organization who communicate behavioral expectations about the role (Biddle, 1979). In the structure of an organization, each role relates to several others by virtue of the interdependence of tasks required for each context (Beehr, 1987). These interrelated roles form a role set. Interdependence among roles leads individuals performing each role to expect certain behaviors from others. Thus, individuals holding the role and others in related roles define role expectations. An individual's perception and understanding about the role he or she occupies is a role

conception. Behavioral expectations for the individual held by other members of the role set are role demands.

Role Responsibilities of Foster Parents

The NCFFC (1991) has summarized the responsibilities of foster parents based on role expectations as seen by social workers and foster care policy makers. Foster parenting has included responsibilities in three areas of service to children: (1) providing day-to-day care to meet developmental needs, (2) supporting positive relationships between foster children and their families of origin, and (3) providing continuity for ongoing cultural and ethnic identity development while children are in placements.

Day-to-day care of foster children. In terms of day-to-day care, agencies have expected foster parents to provide safe, nurturing environments to model healthy family living. They have required that foster parents use nonphysical discipline when responding to children's behaviors. Agencies have depended on foster parents to plan transportation, share information about progress toward case goals, participate in hearings regarding the children in their care, prepare older children for independent living, and advocate for the resources to meet the unique needs of children in their care. In conjunction with caseworkers, foster parents have taken an active role in assessing children's strengths and needs, providing emotional support and counseling related to attachment, separation and loss, and abuse and neglect; sharing information with children and their families about progress toward goals, monitoring visits, developing interventions, managing crises effectively, and supporting children in their transitions from foster care into either

permanent placements or independent living (Child Welfare League of America [CWLA], 1995).

Health and mental health problems of foster children have placed additional demands on foster parents. Children and youth in care have manifested complex physical, emotional and behavioral difficulties (Henry, Cossett, Auletta, & Egan; 1991; Hill, Hayden, Lakin, Menke, & Amado, 1990; Hochstadt, Jaudes, Zimo, and Schachter, 1987; Preston-Shoot, & Hanks, 1988; Rosenfeld, Pilowsky, Fine, Thorpe, Fein, Simms, Halfon, Irwin, Alfaro, Saletsky, & Nickman, 1997; Rosenthal, 1987; Swire & Kavaler, 1977). Studies have estimated that over half of pre-school foster children have serious health related problems including developmental delays, low birth weight, heart problems and HIV infection (USGAO, 1995). Screenings at intake have diagnosed over 90 percent of children with at least one health problem (Chernoff, Combs-Orme, Risely-Curtis, & Heisler, 1994). Specific mental health problems of children in placement have included disturbance in conduct such a poor anger management, destructive actions, lying, and stealing; depression; behaviors associated with the consequences of sexual abuse, learning related disabilities, and developmental delays (Benedict & White, 1991; Inglehart, 1993; Klee & Halfon, 1987).

Though some agencies have distinguished between children with special needs and those in regular foster care, most children placed with regular foster parents have manifested many of the same difficulties as children in more specialized placements (Pecora, Whittaker, & Maluccio, 1992). Foster care agencies have relied on foster parents to observe and assess problem areas that emerge as children adjust to family foster home

placements. When additional services are recommended, foster parents have arranged appointments, provided transportation, and worked with other service providers on behalf of children in their care.

Relationships between foster children and their families of origin. Permanency planning activities have called for birth parents' involvement after children are placed with foster families. Continued contact between children and their families has enhanced children's adjustment to out-of-home care (Fanshel & Shinn, 1978; Milner, 1987; Simms & Bolden, 1991) and has increased the possibility of reunification (Benedict & White, 1991; Fanshel & Shinn; 1978; Hess, 1987; Mech, 1988; Milner, 1987; Rzepnicki, 1987; Schatz & Bane, 1991). Visits, telephone calls, and letters between children and their families of origin have helped children to maintain emotional connections with their parents. Visits also have given parents opportunities to demonstrate new parenting skills and to be involved in service plans (CWLA, 1995). In cases where no changes occur, parental contacts have helped parents and children to accept termination of parental rights so that other options for permanency can be pursued (McFadden, 1985).

The CWLA (1995) has recommended that foster parents be responsible for helping children keep positive images of their families, see their birth families' strengths, and deal with ongoing family contact. The level of foster parent involvement has ranged from preparing children to spend time with their families of origin to arranging visits and serving as role models to birth parents. While maintaining family connections has benefited foster children, these contacts also have been a source of distress for foster children and foster parents (Gean, Gilmore, and Dowler, 1985; Mauro, 1985; Paulin, 1985).

In practice, foster parents have taken less of a role with biological family members than depicted in the literature. Only a few pilot projects have trained and paid foster parents to work with the families of foster children (Lewis & Callaghan, 1993). More often, foster care workers have taken sole responsibility for working with birth families.

Continuity for children's cultural and ethnic identity. Children of minority heritage whose families face poverty have been over represented in foster care (Stehno, 1982). Forty nine percent of children in foster care have come from minority backgrounds (Alber, Reilly, & Rittner, 1993). Lindsey (1994) found that African-American and Hispanic children entered foster care for dependency twice as often as Caucasian children. Reports from 1997 AFCARS data for Tennessee reported that 62 percent of children in foster care were Caucasian, and 36 percent were African-American (U. S. Department of Health and Human Services, 1998).

Current foster care practice standards have recommended that children be placed with foster families of the same racial and cultural heritage (CWLA, 1995). Because of the over representation of African-American and Hispanic children in foster care, there has been a shortage of foster homes for these children (U. S. Department of Human Services, 1995). When foster homes of the same racial and cultural background have not been available, placement success has depended on foster parents' understanding of the cultural differences between themselves and foster children (Foloran & Hess, 1993; Mortland & Egan, 1987).

Foster Parent Role Understanding

In theory, scholars have defined foster care as a partnership among foster parents, agencies, and foster care workers (e.g. McFadden, 1985). Foster parents' responsibilities have included providing stable, safe family environments; enhancing children's physical and emotional development and cultural identity while they are in placements, coordinating a variety of services for children, and working supportively with families of origin. Prescribed behaviors of foster parents and foster care workers with whom they interact have been based on understanding child development, permanency planning, the impact of separation and loss, behavior management, diversity, and the importance of involving children's families (Pecora, Whittaker, & Maluccio, 1992).

However, disparity between the ideal and reality has been evident. Typically, while in foster care, children have lived with more than one foster family and have had limited contacts with their families of origin (Fanshel, Finch, & Grundy, 1990; Pardeck, 1982; 1985). The special needs of children in temporary placements have created a distinct set of demands for foster parents. Familiar forms of behavior management and pre-existing attitudes about parenting that have been effective with their children may be ineffective with foster children. In practice, there has been insufficient clarity to direct how foster parents actually perform their roles.

Role ambiguity. Unclear information about expectations associated with a role, about methods for fulfilling these expectations, and about consequences of role performance has resulted in role ambiguity (Kahn, Wolfe, Quinn, Snoek, & Rosenthal, 1964). Absence of clear role expectations to direct behavior and uncertain role demands

have elevated individuals' stress levels to the point that they have left organizations (Beehr, 1987). Findings of cross-sectional and longitudinal studies of the effects of role ambiguity have concluded that lack of role clarity about behavioral expectations has led to concern about one's work performance, less group involvement, lower job satisfaction, and unfavorable attitudes toward those expressing role demands (Caplan, & Jones, 1975; Fisher & Gitelson, 1983; Jackson & Schuler, 1985). Research also has linked role ambiguity causally to employee decisions to leave an organization (Beehr, 1995; Fisher & Gitelson, 1983; Jackson & Schuler, 1985) and to job turnover (Johnson & Graen, 1973; Lyons, 1971).

Correlation studies considered the impact of role ambiguity in human service occupations. Bartodlus, Gillery, and Sturges (1989) found that role ambiguity and role conflict influenced the level of job satisfaction and turnover rates of home care workers for the elderly. Joseph and Conrad (1989) found role clarity to be associated positively with satisfaction with the medical social work role. Drolen and Harrison (1990) reported a significant positive relationship between role ambiguity and the level of discrepancy between the way psychiatric social workers saw their jobs and the way they wanted them to be. Siefert, Jayaratne, and Chess (1991) found role conflict and role ambiguity to be significant predictors of emotional exhaustion and that emotional exhaustion was associated with greater likelihood that medical social workers would make an effort to find another job within the year. Role ambiguity also was predictive of the frequency and intensity of emotional exhaustion, depersonalization, and burnout in childcare workers (Boyd & Palsey, 1989). Starnaman and Miller (1992) reported a significant positive

relationship between the levels of role ambiguity, emotional exhaustion, and occupational commitment of teachers.

Role ambiguity in foster parenting. Role ambiguity has been inherent in a system where foster parents function as parents for children on a temporary basis (Meyer, 1985). Eastman (1982) has described foster parenting as a non-normative parent arrangement in which the parental responsibility that is usually given to parents alone has to be shared among child welfare agencies, birth parents, and foster parents. Foster parents have served as substitute parents while sharing in joint responsibility with an agency that has the ultimate decision making authority for children living with the family (McCoy, 1961). Role ambiguity has occurred when the parental relationships and responsibilities are not understood clearly by all of the parties involved (Eastman, 1982).

The broad range of behavioral expectations for foster parents has contributed to role ambiguity. Agencies simultaneously have viewed foster parents as clients, colleagues, contract service providers, and members of the child treatment team (Mietus & Fimmen, 1987). Foster parents have had a wide span of control in the day to day care of children with minimal supervision. However, agencies have had authority to make decisions for foster children, not foster parents (McColgan, 1989).

Foster parents have tended to view themselves as parents rather than as specialized service providers for children in custody (Meyer, 1985). Often they have described their primary role as taking care of children (Pasztor, 1985). Agency selection practices have reinforced this perception by emphasizing parenting rather than treatment aspects of foster care (McColgan, 1989).

Ambiguity is also evident in foster family roles. Wilkes (1974) has described foster families as always in transition. The placement and exit of foster children have changed family interaction patterns in unforeseen ways. Siblings often have felt obligated to befriend foster children, show acceptance toward them, and not express hostile feelings. Parents have had difficulty exercising control over their own children when discrepancies existed between behaviors of their children and foster children. Acceptance of foster children as part of the family system has required that family members form attachments and relate in open, loving ways with foster children while knowing that these relationships will end. When family members are unsure of who is in and out of the family, the resulting boundary ambiguity has increased the family's level of stress (Boss, 1988).

Finally, the unpredictable consequences of foster parenting and anticipated loss have added to role ambiguity. Foster parents have invested in children's development; but, unlike with their children, typically, they will not see foster children grow into adulthood (Edelstein, 1981). Family members, friends, and other foster parents have expected that they form attachments to support foster children's psychological growth, but not get too attached to children who maintain other family ties (Robertson & Robertson, 1977). Foster parents have received little support from friends, family, or workers for grieving losses when children leave due to conflicting roles and unrealistic expectations (Berman, 1986). Those who deal successfully with losses have reconciled that they contributed to a child's future by providing several months of good care even if they never know the eventual outcome for the child (Burke & Dawson, 1987).

Foster Parent Role Development

Two models for foster parent development were found in the literature. Pasztor and Wynne (1995) suggested a competency-based model for inservice training addressing the following goals of foster care: (1) protecting and nurturing children, (2) meeting the developmental needs of children, (3) supporting relationships between children and their families (4) connecting children to safe, nurturing lifetime relationships; and (5) participating as a team member. Morrisette (1994) outlined behavioral indictors for four stages of foster home development: (1) pre-contact, (2) contact, (3) stabilization, and (4) collegial. Neither of these approaches has incorporated the multiple sources that influence how foster parents understand and enact their roles.

Role theory offers a framework for incorporating information from recruitment and training literature to explain development of newly approved foster parents. New foster parents tend to be sympathetic toward the circumstances of children and interested in making a difference in the life of a child. As seen in Figure 2.2, they enter foster care with preconceived ideas about parenting from their own family experiences, and with personal and family characteristics that affect how they approach parenting. They also have ideas about foster parents and child welfare shared by the community at large (Molin, 1989).

Pre-service training experiences impart information about the foster care system, what foster parents do, and specific concerns of children in care (Pasztor & Wynne, 1995). During training, foster parents become familiar with agency policies and procedures. They are able to ask questions, clarify any misconceptions about the role of

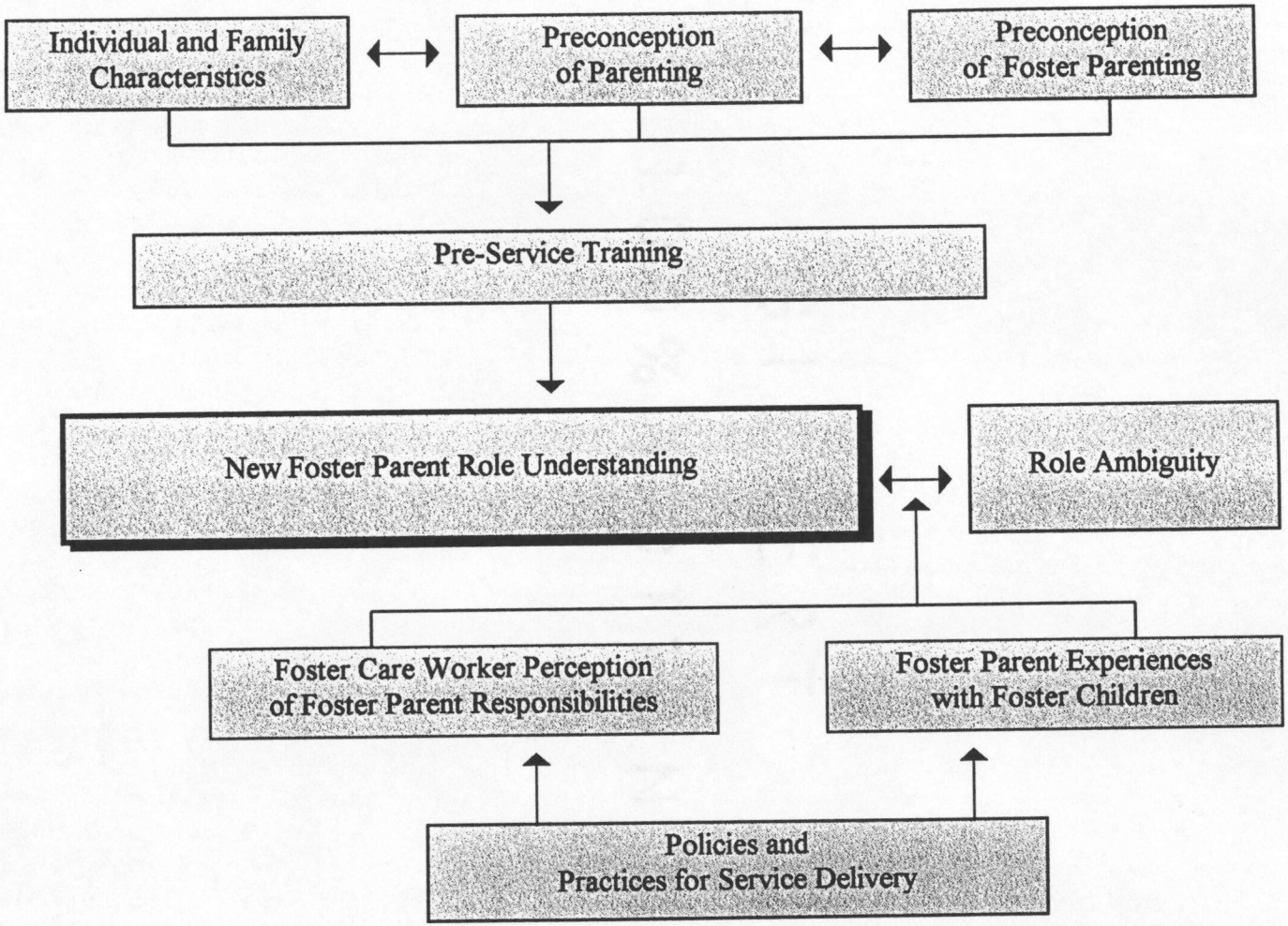


Figure 2.2. Sources of Foster Parent Role Understanding

foster parents with the agency, and adjust their perceptions to accurately reflect agency policies. Requirements for participation in group discussion and completion of assignments set the expectation for teamwork.

When a child is placed in the home, foster parents begin to implement skills learned during training. Foster care workers are the primary source of feedback about role performance (Kadushin & Martin, 1988; McFadden, 1985; Fine & Pape, 1991). They provide new foster parents with direction and support for trying new child management techniques consistent with case planning goals. Foster care workers help foster parents clarify their roles with children, families, the agency and other service providers, and the larger child welfare system.

Placement experiences with children and agencies further influence role development. Often, the realities of implementing foster care services differ from the intent of child welfare policies. Foster parents may experience ambiguity about the scope of their responsibilities. When they receive conflicting messages about what they are supposed to do from several sources, they can become unclear as to whose expectations must be met. Ambiguities and inconsistencies have resulted in some foster parents feeling frustrated and viewing the agency and foster care workers in a negative light (Pasztor, 1985).

Research on Foster Parent Roles

Six studies have applied role theory as a framework for understanding foster parenthood. Fanshel (1961; 1966) related foster parents' role orientation to foster care workers' ratings of role performance. Other studies described role conceptions of foster parents (Tinney, 1985), foster fathers (Davids, 1973), and foster parents who adopted

children in their care (Proch, 1982). Erkut (1991) interviewed foster parents about their views on the rewards of being a foster parent. Le Prohn (1993; 1994) compared role expectations of kinship care providers and non-relative foster parents. Table 2.3 summarizes the type of study, sample size, sample characteristics, data collection methods, measurements, and statistical analyses of studies using role theory.

Studies of foster parent roles have varied in terms of research questions, context, and quality. Fanshel's (1966) early study defined foster parenting as similar to parenting one's children rather than in the more recent view as a goal-oriented partnership. Others provided descriptive reports of foster fathers (Davids, 1973) and foster parents who adopt (Proch, 1982). The three remaining studies (Erkut, 1991; Le Prohn, 1993; Tinney, 1985) took into account a more family centered orientation of family foster care as a means to rehabilitate children and their families. These studies were included in the review.

Methodological critique. Results from the studies were based on data collected from specific populations of foster parents. Tinney (1985) surveyed foster parents belonging to the Canadian Foster Parent Association (N = 415). Foster parent associations have tended to attract more experienced, committed foster parents (Wiehe, 1981). Le Prohn (1993) drew her sample from foster parents with the Casey Foundation, a private organization providing long-term foster care. Erkut (1991) obtained a voluntary sample of agency foster parents by obtaining names of families for possible inclusion, then contacting families referred by the first set of foster parents. These samples may not be representative of new foster parents providing temporary placements for public foster care agencies.

Table 2.3. Studies of Foster Parent Roles

Study	Type of Study	Characteristics of Sample	Data Collection Procedures	Assessment Instruments	Statistical Analysis
Davids, (1973)	Cross-sectional, descriptive	N = 40 Foster fathers Response rate = 100%	Focused interviews with foster fathers, mothers, and workers	None	Descriptive
Erkut, (1991)	Cross-sectional, descriptive	N = 41 foster mother and 13 foster fathers Skipped link selection	Telephone interview	None	Descriptive
Fanshel, (1960; 1966)	Cross-sectional, related foster parent characteristics to role performance	N = 101 Foster parent couples Response rate = 99%	Interviews with foster parents Foster care worker ratings	Parent Attitude Research Instrument, Foster Parent Appraisal Form (test-retest reliability = .51), Global ratings	Multiple regression
Le Prohn, (1993; 1994)	Cross-sectional, compared relative and non-relative foster parents	N = 129 Relative foster parents N = 175 Non-relative foster parents, Stratified random sample Response rate = 76%	Mailed questionnaire Follow-up telephone interview	Foster Parent Role Perception Scale (reliability = .86-.49)	Multiple regression
Proch, (1982)	Cross-sectional, descriptive	N = 29 Foster parents who adopted, Randomly selected Response rate = 22%	Interviews	None	Descriptive
Tinney, (1985)	Cross-sectional descriptive, compared foster mother and foster father responses	Active foster parents belonging to Canadian foster parent associations Response rate = 48%	Mailed questionnaire	Role Perception Questionnaire	Chi-square

Erkut (1991) conducted telephone interviews with foster parents. The other studies mailed questionnaires to foster parents as the primary method for data collection so there was no guarantee who completed the survey instrument, or if foster mother and foster fathers compared responses. Tinney (1985) reported a response rate of 48 percent. Le Prohn's (1993) 76 percent response rate was attributed to the program setting from which the sample was drawn.

Foster parent role conception. Though Erkut (1991) did not ask directly about role conception, foster parents' reports of satisfaction with their fostering experiences suggested that foster parents gained the most reward from parenting aspects of foster care. Their concerns and frustrations echoed concerns of other parents about their children. Erkut concluded foster parents were less interested in professional status with the agency than attaining respect and having support so that they could be effective parents.

Tinney (1985) investigated foster parent role conception in light of the changing role demands associated with policies for permanency planning. Respondents selected items describing their perceptions of foster parent roles and ranked their selections in order of importance from a questionnaire listing 13 possible roles. Differences in role perception were found in role conception among foster parents. As a group, respondents ranked roles of "substitute parent", "homemaker", and "equivalent to natural parents" as first, second, and third in order of importance. Chi-square analyses compared the responses of foster fathers and foster mothers. Foster fathers were significantly less likely to select or assign high rankings to the term "homemaker", probably due to gender based

phrasing. Second, foster fathers were significantly more likely to equate themselves with natural parents while foster mothers selected role descriptions suggesting a professional orientation such as "advocate", "teamworker", "child care counselor", and "consultant to natural parents." That foster fathers more frequently associated their role with biological parents and foster mothers had more professional role conceptions may have indicated that foster fathers were less aware of the role directives for foster parents.

Asking foster parents to comparatively rate role descriptions relied on the relative judgments of foster parents. However, the list of foster parent roles was not inclusive of all foster parenting tasks. Some respondents added role descriptions such a friend, consultant to adoptive parents, and family support worker to their questionnaires. One-word descriptors and brief phrases left interpretation of roles to respondents without an opportunity to clarify responses. There was no indication that foster parents considered the same constellation of behaviors when evaluating the importance of a role description.

Role perception of kinship caregivers. Le Prohn (1993) built on Tinney's (1985) research by comparing the role perception of kinship caregivers and non-relative foster parents. She developed a survey instrument with the help of foster care staff workers to measure role conception. Relative and non-relative foster parents rated their perception of foster parent involvement in performing activities from five areas: (1) facilitating with birth families, (2) assisting in the social and emotional development of children, (3) partnership with the agency, (4) parenting, and (5) promoting spirituality. Follow-up telephone interviews to respondents supplemented data collection by asking further questions and clarifying responses about role conception.

Both relative and non-relative foster parents saw themselves as promoting spirituality and in assisting with children's social and emotional development. Foster parents reported having the least responsibility in activities such as the recruitment and training of foster parents and planning foster care services. Analyses of data using step-wise multiple regression found role perception to be related to relative status. Compared with non-relative foster parents, those providing kinship care saw themselves as having more involvement with birth families. Ethnicity also accounted for variance in role perception between relative foster parents and non-relative foster parents. Relative and non-relative foster parents in the sample differed significantly in terms of ethnicity. Seventy percent of relative foster parents were minorities including African-Americans, Native Americans, and Hispanics, compared to only 28 percent of non-relative foster parents. For the subscale of "Assist with Social/Emotional Development", foster parents' ethnicity accounted for more variance than did relative status, with non-white foster parents having higher scores.

Summary of findings from research on foster parent roles. Findings from these studies have emphasized the complex role identities held by foster parents. Descriptions of roles have ranged from being professionals to equating foster parents with birth parents (Le Prohn, 1993; Tinney, 1985). Individual characteristics such as gender, relative status, and ethnicity have influenced how foster parents view their role (Le Prohn, 1993, Tinney, 1985).

However, these studies sampled active foster homes. Research with closed homes (Rindfleisch, Bean, & Denby, 1998) and practice reports (Biggerstaff & Rodwell, 1993;

Pasztor & Wynne, 1995) have offered lack of role clarity as one explanation for why some foster parents decide to leave foster care. The influences of foster parent role concepts, and congruence between foster mothers and foster fathers and between foster parents and foster care workers need to be tested to determine if role understanding is predictive of early exits.

Foster Parent Characteristics

The majority of studies with foster parents have questioned how foster parents influence outcomes for children in foster care. Toward this end, studies have examined foster parents' qualities and attributes associated with placement stability (Cautley, 1980; Cautley & Aldridge, 1975; Dando & Minty, 1987; Hampson & Tavormina, 1980; Kraus, 1971; Rowe, 1976; Walsh & Walsh, 1990). As with other areas of foster parent research, methodological incompatibilities have made it difficult to compare and evaluate this body of research. Outcomes have varied in type and definition. Researchers have chosen foster parent variables based on general concepts of parenting and practitioners' insights specific to foster parenthood rather than from relevant research. In order to integrate and compare findings, it is necessary to evaluate when comparisons can be made and how a particular study's findings might generalize to other settings and populations.

Methodological Critique of Research on Foster Parent Characteristics

Table 2.4 compares type of design, sampling, data selection, measurement, and methods of data analyses for studies of foster parent characteristics.

Sampling and data collection procedures. Researchers rarely have had access to large numbers of foster parents. Typically, subjects who have volunteered to participate

Table 2.4. Studies of Foster Parent Characteristics

Study	Type of Study	Characteristics of Sample	Data Collection Procedures	Measurement	Statistical Analysis
Cautley, (1980)	Longitudinal panel, correlated foster parent characteristics with placement duration	N = 145 New foster parent couples, Response rate = 100%	Interviews at six month intervals for 18 months	Global assessment rating	Multiple regression
Cohon & Cooper, (1993)	Cross-sectional, compared characteristics of current foster parents, those asked to leave, and rejected applicants	N = 16 Current foster parents, N = 7 Foster parents asked to leave program, N = 13 Rejected applicants	Assessment measures Semi-structured interview	Rorschach, Maternal Attitude Scale, California Psychological Inventory, Family Environment Scale, Internal Control Index, Social support measure	Bi-nomial z-tests Chi-square
Corser & Furnell, (1992)	Cross-sectional, compared attitudes of foster parents, parents, and workers toward biological parents	N = 26 Foster parents, Response rate = 30%; N = 20 Parents matched to foster parent characteristics; N = 15 Social workers, Response rate = 47%	Mailed questionnaire	Case vignettes of circumstances leading to placement	ANOVA
Dando & Minty, (1987)	Cross-sectional, compared foster parent motive to worker ratings	N = 80 Foster mothers, Response rate = 90%	Interview	Foster parent rating	Chi-square

Table 2.4. Studies of Foster Parent Characteristics (continued)

Study	Type of Study	Characteristics of Sample	Data Collection Procedures	Measurement	Statistical Analysis
Doelling & Johnson, (1990)	Cross-sectional, associated parent and child temperament characteristics to worker ratings	N = 51 Foster mothers	Assessment measures	Dimensions of Temperament Survey (reliability = .54-.91), Family Environment Scale (reliability = .61-.86), Foster Placement Evaluation Scale (reliability = .88; inter-rater reliability = .65)	Chi-square
Groze, McMillian, & Haines-Simeon, (1993)	Cross-sectional, compared characteristics of foster parents of HIV infected children and foster parents providing regular care	N = 21 Foster parents of children with HIV, N = 12 Foster parents providing regular care	Mailed questionnaire Semi-structured interview	None	t-test
Hampson & Tavormina, (1980)	Cross-sectional, descriptive; associated motive with length of placement	N = 34 Foster mothers	Interview	None	Descriptive Chi-square
Jordan & Rodway, (1984)	Cross-sectional, associated personality characteristics to worker ratings	N = 486 Foster parents	Assessment measure Case records	Heimler Scale of Social Functioning, Worker ratings (reliability = .86)	ANOVA
Kraus, (1971)	Retrospective, variables with placement duration	N = 172 Foster home placements	Case records	None	Chi-square

Table 2.4. Studies of Foster Parent Characteristics (continued)

Study	Type of Study	Characteristics of Sample	Data Collection Procedures	Measurement	Statistical Analysis
Martin et al., (1992)	Cross-sectional, descriptive	N = 64 Foster parents Response rate = 48%	Open-ended interview	None	Descriptive
Ray & Horner, (1990)	Cross-sectional, related characteristics to worker ratings	N = 14 Foster parent couples	Assessment measures	16 PF, Foster Parent Effectiveness Scale	Regression
Rowe, (1976)	Cross-sectional, related parent attitudes expectations of children	N = 60 Open and recently closed homes Response rate = 51%	Mailed questionnaire	Foster parent rating scale, Global rating	Regression
Sanderson & Crawley, (1982)	Cross-sectional, compared foster parent scores to worker ratings	N = 32 Therapeutic foster parents	Mailed questionnaire	Holland's Vocational Preference Inventory	t-test
Shapiro, (1976)	Retrospective, descriptive	N = 616 Foster care placements	Case records	None	Descriptive
Stone & Stone, (1983)	Retrospective, related characteristics to placement breakdown	N = 64 Foster care placements	Case records	None	Multiple regression
Walsh & Walsh, (1990)	Retrospective, related characteristics to placement maintenance	N = 51 Foster care placements	Case records	Foster parent rating	Multiple regression
Wiehe, (1981; 1983)	Cross-sectional descriptive	N = 117 Foster parents Response rate = 52%	Mailed questionnaire	Holland's Vocational Preference Inventory	t-test

have come from a small pool of foster parents affiliated with an agency. When sample sizes are small, relationships among variables go undetected.

Investigators used two strategies to increase sample sizes of studies with foster parents. First, by obtaining data from case records, researchers had access to information about larger numbers of family foster homes over a period of time. One-fourth of studies relied on case records as the primary source of data (Kraus, 1971; Jordan & Rodway, 1984; Shapiro, 1976; Stone & Stone, 1983; Walsh & Walsh, 1990). However, the accuracy, reliability, and completeness of record data were unknown and conclusions from data were drawn retrospectively.

Second, researchers mailed questionnaires to all foster parents in a group or geographic region. One-fourth of the studies collected data by this method (Corser & Furnell, 1992; Groze, McMillian, & Haines-Simeon, 1993; Rowe, 1976; Wiehe, 1981; 1982). Response rates to mailed surveys ranged from 47 to 51 percent. Researchers did not report if study participants represented foster parent populations. Mailed surveys have not allowed researchers to control question order or the context of responses so that the accuracy of responses and misinterpretation is unknown (Judd, Smith & Kidder, 1991).

Measurement of foster parent characteristics. Researchers used specific measures of foster parent effectiveness. One-third of the studies developed instruments for caseworkers to rate foster parents along various dimensions (Cautley, 1980; Cohon & Cooper, 1993; Dando & Minty, 1987; Doelling & Johnson, 1990; Fanshel, 1966; Jordan & Rodway, 1984; Ray & Horner, 1990; Walsh & Walsh, 1990). Types of assessments ranged from global ratings scales (Fanshel, 1966; Jordan & Rodway, 1984; Sanderson &

Crawley, 1982; Walsh & Walsh, 1990) to instruments measuring specific aspects of foster parenting (Cohon & Cooper, 1993; Dando & Minty, 1987; Doelling & Johnson, 1990; Ray & Horner, 1990; Rowe, 1976). Only four researchers reported reliability for these measures (Cautley, 1980; Doelling & Johnson, 1990; Fanshel, 1966; Jordan & Rodway, 1984).

Investigators assumed that foster care workers possess the expertise to accurately rate foster parents' abilities. However, studies reporting reliability data indicated these measures had low levels of inter-rater reliability (Cautley, 1980; Fanshel, 1961; Jordan & Rodway, 1984; Rowe, 1976). Ratings measured caseworkers' retrospective judgments rather than recent experiences with foster parents (Walsh & Walsh, 1990). Also, caseworker ratings showed very little variability in scores. The selection process to become a foster parent already has screened out those who are considered to be inadequate, so most active foster parents rate at the high end of scales (Dando & Minty, 1987; Doelling & Johnson, 1990).

Studies operationalized concepts of effective foster parenting differently. Most studies defined the problem as placement disruption. Successful foster parenting was associated with the length of placements. However, placement continuance is not necessarily a measure of success. Some placements may continue to the determent of children. When shorter placements end in reunification or adoption, children benefit. Success also has been operationalized as foster care worker ratings of the quality of placements. Varied definitions have made it difficult to compare results and build upon the findings of previous research.

Findings from Studies of Foster Parent Characteristics

A theoretical framework is needed to look across results of varied studies and provide an integrated perspective in order to identify patterns from findings. An ecological model is useful for this purpose because of its application in child welfare practice and in explaining differences in parenting behaviors. Child welfare experts have recommended using an ecological model to assess adoptive parent home environments (Cohen & Westhues, 1990; Hartman, 1979), to assess foster parents (Cohen & Westhues, 1990), and to plan interventions with parents of children in foster care (Howe, 1983).

An ecological perspective also has provided a broad lens for organizing data from literature on family functioning and child rearing practices (Cicchetti & Howes, 1991; Belsky & Vondra, 1989). According to the tenets of the model, parenting outcomes are determined by multiple, interrelated factors rather than being direct outcomes of single antecedents. Characteristics and abilities of parents, attributes of children, and contextual stresses and resources of parent-child relationships contribute to differences among parents' approaches. Evidence from a number of sources has supported that multiple factors affect parental behavior. These factors have included parent mental health (Crnic, Greenberg, Ragozin, Robinson, & Basham 1983; Polansky, Gaudin, Ammons, & Davis, 1985) marital satisfaction (Belsky, 1980; Pedersen & Zill, 1986; Porter & O'Leary, 1980), family functioning (Burgess & Conger, 1978; Weinraub & Wolf, 1983), and social support (Dunst, Trivette, & Cross, 1986).

Table 2.5 presents a summary of foster parent characteristics included as independent variables in studies of foster care outcomes. By far, parenting has been the

Table 2.5. Foster Parent Characteristics Included as Independent Variables in Studies of Foster Care Outcome

	Foster Parent Variables						
Study	Personality Attributes	Parenting Attitudes	Marital Adjustment	Family Functioning	Social Support	Reasons for Fostering	Satisfaction with Agency
Cautley, (1980)		X	X	X		X	X
Cohon & Cooper, (1993)	X	X		X	X		
Corser & Furnell, (1992)							
Dando & Minty, (1987)		X	X			X	
Doelling & Johnson, (1990)		X		X			
Groze, McMillian, & Haines-Simeon, (1993)							
Hampson & Tavormina, (1980)		X				X	X
Jordan & Rodway, (1984)	X						
Kraus, (1971)						X	
Martin et al., (1992)						X	X
Ray & Horner, (1990)	X	X					
Rowe, (1976)		X					
Sanderson & Crawley, (1982)	X						
Shapiro, (1976)		X					
Stone & Stone, (1983)		X					X
Walsh & Walsh, (1990)		X	X				
Wiehe, (1981; 1983)	X						

X indicates foster parent variables included in the study.

most frequently studied foster parenting variable. Fifty nine percent of the studies found foster parents attitudes and beliefs about parenting to affect foster care outcomes for children. Thirty percent of studies assessed foster parent personality attributes. Other studies considered variables that were unique to foster parenthood including reasons for fostering and satisfaction with the agency. Foster family characteristics that provide the context for parent-child relationships such as marital adjustment, family functioning, and social support available to foster families received much less attention in research.

Parent mental health. Within the domain of parent mental health, research has identified internal locus of control, an active coping style, and parental well-being as determinants of parenting behavior (Leventhal, Egerter, & Murphy, 1984; Mondell & Tyler, 1981; Reis, 1989). Depressive symptoms have received a great deal of attention in parenting literature. Previous research has identified depressive states as modulating parents' levels of empathy with children (Belsky, 1984), consistency in discipline (Downey & Coyne, 1990), restrictive parenting styles (Nolen-Hocksema, Wolfson, Mumme, & Guskin, 1995), unrealistic expectations of children (Cummings & Davies, 1994), and negative perceptions of children's behaviors (Lovejoy, 1991). Symptoms of depression such as self-involvement and lack of emotional availability have interfered with parents' abilities to respond to children (Vondra & Belsky, 1993). Developmental theory also has suggested that depressive states may be exacerbated by the stresses of parenting (Auerbach, Lerner, Barasch, & Patti, 1992).

No foster care research examined foster parents' mental health as a variable. Studies have associated placement success with single measures of personality attributes

including Holland's Vocational Inventory (Sanders & Crawley, 1982; Wiehe, 1981), the Heimler Scale of Social Functioning (Jordan & Rodway, 1984), and the Sixteen Personality Factor Questionnaire (Ray & Horner, 1990).

The most methodologically sound of these studies assessed foster parents with multiple measures. Cohon and Cooper (1993) compared attributes of active foster parents providing care to medically complex, drug exposed, and HIV infected infants with those of foster parents asked to leave the program, rejected applicants, and the general population. All applicants completed the Rorschach, scored with Exner's Comprehensive System, which can be coded and scored in a standardized format. Foster parents who remained in the program for one year completed the California Psychological Inventory (CPI), which categorizes types of personality organization; the Internal Control Index (ICI), measuring decision making style; the Family Environmental Scale (FES), to measure family functioning; and a measure of social support. Agency staff rated foster parents abilities as a caregiver and cooperation with agency staff.

Data analyses were based on a sample of 36 individuals in three groups: (1) those approved who remained in the program (N = 16), (2) those who were asked to leave (N = 7), and (3) applicants not accepted in the program (N = 13). Applicants approved for the program were a group of experienced, older foster parents. Years of prior experience ranged from three to 32 years with an average of 11 years. Comparisons with population norms and across groups characterized foster parents as lacking comfort with emotionally complex situations, simplifying emotional and cognitive complexities, having difficulty modulating affect, and being self focused. Those continuing in the program gave more

responses indicating cooperative interactions than rejected applicants did. Because only 14 subjects completed valid measures for the CPI and the ICI, no comparative analyses were performed. Results from these measures indicated foster parents in the sample were private, reflective, content to rely on their own values, and wanted to be viewed favorably by others.

Findings of studies including variables to assess foster parent personality characteristics have concurred with conventional wisdom that agencies should select emotionally mature individuals to be foster parents. Descriptions of foster parents included being realistic, socially oriented toward helping others, insightful into personal relationships (Wiehe, 1982), equally introverted and extroverted, self disciplined (Ray & Horner, 1990), able to deal with emotions, and willing to rely on others when addressing problems (Cohon & Cooper, 1993).

While greater psychological maturity may be predictive of more competent parenting (Belsky & Vondra, 1989), negative affectivity, or greater mental health impairment, is associated with less competent parenting. General psychological adjustment and well being determine the psychological resources available for parent-child relationships. Individuals with greater psychological resources are better able to respond to the needs of children in their care. The presence of symptoms suggests that psychological resources needed for parenting may be compromised.

Parenting attitudes. Parenting has been the most frequently explored variable, and one in which there is some agreement. Research has found that consistency in parenting practices (Ray & Horner, 1990), basic knowledge of child development (Ray & Horner,

1990; Doelling & Johnson, 1989), parent responsiveness to children (Ray & Horner, 1990; Shapiro, 1975; Walsh & Walsh, 1990), and the ability to deal with difficult behaviors (Cautley, 1980; Doelling & Johnson, 1989; Hampson & Tavormina, 1980; Rowe, 1976) are associated with better placement experiences for foster children. Parent experience with either one's own children or with foster children has correlated positively with worker ratings of foster parent ability (Campbell, et al, 1980; Cautley & Aldridge, 1975; Stone & Stone, 1983).

Cohon and Cooper (1993) assessed foster parent applicants using the Maternal Attitude Scale and found no significant difference between the study sample and the general population. Other investigators developed specific rating scales to assess parenting ability based on parenting practices highlighted in the literature. Items measured consistency of parenting practices (Ray & Horner, 1990), basic child care, bonding with the child (Doelling & Johnson, 1989; Ray & Horner, 1990), parent responsiveness to the child (Rowe, 1976), the ability to deal with difficult behavior (Doelling & Johnson, 1989), and special capacities for working with foster children such as helping children cope with loss (Dando & Minty, 1987). Several aspects of parenting have received specific emphasis: (1) developmental expectations for children, (2) discipline of foster children, and (3) acceptance of the foster child's behavior.

Other research has related problems in parenting to unrealistic expectations of child development (Burgess & Conger, 1978; Leventhal, Egerter, & Murphy; Stevens, 1984). Parents who are punitive in their parenting style have been found to be less knowledgeable of children's developmental milestones (Twentyman & Plotkin, 1982).

Haines, Schumm, and Kennedy (1981) questioned if foster parents have realistic expectations for child development. They compared attitudes of foster care workers and foster parents about expectations for foster children. In general, foster care workers thought children were able to take on tasks and responsibilities at an earlier age than foster parents did. Whether the differences found between the attitudes of foster care workers and foster parents were due to lack of awareness of developmental expectations or tolerance on the part of foster parents was not clear. Because there was no independent judge of foster children's developmental levels, there was no way to determine whose perceptions were accurate.

Two studies asked more specifically about discipline practices. Hampson and Tavormina (1980) provided a descriptive analysis of responses from 34 foster mothers. Most subjects reported taking some discipline action with children. The most frequently reported discipline behaviors were talking and reasoning with children and setting up rules to follow. Cautley (1980) found a positive association between foster parents' abilities to handle difficult behaviors of children such as defiance and withdrawal without the use of strict discipline and placement duration.

Foster parents' flexibility and willingness to accept children's values from their family of origin that may oppose foster parents' own beliefs were associated positively with placement duration (Rowe, 1976; Walsh & Walsh, 1990). Other attributes of successful foster parents included being child centered, having concern for understanding the child, and balancing control and permissiveness (Shapiro, 1975; Walsh & Walsh, 1990).

Doelling and Johnson (1990) addressed measurement problems of other foster care research by administering instruments with known reliability. Foster mother's temperament was measured using the Dimensions of Temperament Survey - Revised Adult (DOTS-R ADULT). Workers rated anxious foster mothers as having less successful placements. Chi-square analyses identified placement matches or mismatches with foster children. Children's scores on the Dimensions of Temperament Survey-Revised Child (DOTS-R CHILD) were categorized as difficult or easy, while foster mothers' scores were categorized on flexibility-rigidity and approach-withdrawal DOTS-R dimensions. Inflexible mothers with negative mood children and mismatches of mothers with children who did not meet their expectations of mood were associated with of poorer placement ratings.

Studies with foster parents have found flexibility and tolerance for children's behavior to be related to placement success. However, foster parents in these studies have already existing placements. Sampling cohorts of new foster parents, measuring parenting attitudes with valid, reliable measures; and following foster home development over time could obtain results that are more powerful.

Marital adjustment. The relationship between marital adjustment and foster care outcomes has been less clear. Research on parenting in general has supported the hypothesis that marital conflict disrupts parenting (Belsky, 1980). Difficult behaviors of children have been a source of marital distress (Emery & Tuer, 1993). At the same time, satisfying marital relationships have provided emotional support and instrumental assistance to spouses as they function in a variety of roles (Vondra & Belsky, 1993).

Foster parents may be able to better deal with emotionally demanding situations when their personal needs are met through satisfying marital relationships.

Several investigations have included foster parents' marital relationships as a variable. Levels of satisfaction with fostering changed in relation to how foster parents saw placements affecting their marital relationships. Greater levels of dissatisfaction were reported if negative impacts were seen on the marriage (Cautley, 1980; Dando & Minty, 1987). Foster mothers reported the demands of fostering to be rewarding if her husband was not stressed, and foster children did not demand too much attention from foster fathers (Cautley, 1980). Foster fathers also expressed satisfaction in terms of lack of negative outcomes for their wives (Cautley, 1980; Fanshel, 1966).

Walsh and Walsh (1990) found significant relationships between certain aspects of foster parents' marriages and placement disruption. First, the number of years of marriage correlated negatively with placement breakdown (Walsh & Walsh, 1990). Foster parents with longer marriages were more likely to have successful placements. Second, foster care workers characterized successful foster parent couples as comfortable in their current family roles and not using foster care to avoid a new phase of marriage.

In these studies, marital relationship was one of many variables found to account for variance in placement duration. Investigators measured marital adjustment as time married, or by foster care workers' observations rather than with systematic measures of constructs. Martial adjustment may serve as a protective factor of foster parents. For example, Urquhart (1989) reported foster mothers relied on their spouses for support in dealing with loss. In turn, stresses of fostering may exacerbate already existing marital

discord. Further investigation of how marital adjustment relates to exits is warranted using valid and reliable measures.

Family functioning. Family foster care practice has conceptualized family functioning in several ways. Foster home evaluations have focused on home environments, stressing community conditions, sleeping and living arrangements, conditions for child health and safety, and resources the family has to draw on in terms of income and employment (CWLA, 1995). Families also have been assessed as systems, with a shared history and characteristic ways of relating to each other. Family patterns may constitute strengths for fostering or may create problems as families integrate foster children in the system.

Practice literature has described foster families as boundary-maintaining systems with rules, roles, and patterned interactions among members (Eastman, 1982; Molin, 1994; Wilkes, 1974). Families experience changes in roles and communication patterns when family members enter or leave. Adaptation to changes in family membership requires that family members form new alliances with each other, with extended family, and with the community (Brant, 1989; Molin, 1994). When family members are added or leave through normative transitions, the process of adaptation occurs slowly as roles and functions of family members change over time (Olson, 1988). The placement of a foster child abruptly disrupts a family's already established patterns of interaction (Wilkes, 1974). With an increase in a foster family's interactional subsystems, new alliances among family members form quickly. Foster family members and the foster child have to address issues about what the child will call foster parents, how to explain foster care status, and

family expectations within the first few weeks of placement (McFadden, 1985). A family who fosters has to establish new ways of coping with role relationships and interactions. Success may depend on the family's ability to adapt to changes quickly.

Family systems theorists have proposed that clear boundaries facilitate families' adaptations to change (Boss, 1988). Eastman (1982) has observed successful foster families to be open family systems with flexible boundaries and sufficient role clarity to maintain the family identity while coping with the issues of inclusion and separation inherent in temporary foster family care. Compared to families with open boundaries, those with closed boundaries have reported greater concern about foster children taking resources that would have previously gone to parents' own children (Molin, 1994).

Reports from foster parents have indicated benefits of foster parenting for families. Fostering has added children, expanded the experience of the family and its members, and brought in additional income (Cautley, 1980). Similarly, foster parent have terminated foster care placements based on perceived negative affects on their families. They have attributed placement disruptions to conflicts among foster children and biological children, viewing foster children as having a negative influence on their children, and increased marital conflict (Cautley, 1980).

Two studies assessed foster families using the Family Environmental Scale (FES) (Cohon & Cooper, 1993; Doelling & Johnson, 1990). Doelling and Johnson (1990) found no significant correlation between FES scores and worker ratings of foster parents. Cohon & Cooper (1993) reported FES mean subscale scores for 14 active foster parents and found them to be "support-oriented" family types. When compared with population

norms, program foster parents scored significantly higher on Cohesion, Expression, and Cultural Orientation subscales.

Fostering requires time and emotional commitment on the part of family members. Families abilities to solve problems, exchange information, and complete instrumental and emotional tasks may help them assume new roles as foster families. No previous research has assessed pre-placement family functioning of foster families.

Social support. A growing body of literature has suggested that parenting is directly and indirectly influenced by social support (Vondra & Belsky, 1993; Trivette & Dunst, 1987). Research has reported positive associations between social support and family well-being (McCubbin & Patterson, 1983), adaptations to life crises (Moos, 1986), satisfaction with parenting (Crnic, Greenberg, Ragozin, Robinson, & Basham, 1983), styles of parenting, (Trivette & Dunst, 1987), and help seeking (Mitchell & Trickett, 1980). Two types of social support have been defined in response to an individual's need for assistance: instrumental and emotional (Cohen & Syme, 1985; Crockenberg, 1988; Dunst, Trivette, & Deal, 1988). Instrumental assistance has included providing information, helping with routine tasks, and assisting financially. Emotional support has referred to the interpersonal acceptance received from others, either through statements of caring or as a result of considerate actions.

Crockenberg (1988) has identified four processes to explain how social support affects parenting behaviors. First, instrumental support reduces the number of stressful events by providing relief from the daily burdens that have accumulative effects on parents. Second, social supports buffer responses to stress. Parents with social support are

affected less negatively by stressful events. As a result, they are better able to maintain satisfactory child rearing routines during difficult times. Third, social support generates active coping strategies for parents through suggestions from others. Finally, having emotional support affirms parents' sense of being capable of providing care for others.

Cohon and Cooper (1993) measured foster parents' levels of satisfaction with specified sources of social support. Respondents indicated they were satisfied with social relationships, rated satisfaction with intimate relationships about the same as with friendships, and rated satisfaction with relationships with other foster parents and community slightly lower. Two other studies with foster parents made mention of social supports. Rodwell and Biggerstaff (1993) asked about sources of social support in a study about patterns of foster home utilization. Their findings regarding social supports were not reported. Titterington (1990) considered social networks of foster parents when evaluating a peer-group training model. Foster parents in this sample knew half the people in their social networks for more than one year, and contacted half of their social networks more than one time per month. They relied on friends, family, and neighbors to help more frequently than they contacted their caseworkers if they needed to have something done.

The instrumental and affective support from extended family, friends, and neighbors may augment the formal support provided by the child welfare agency and other professionals involved with foster children. Foster parents with access to certain types of social support from their existing social networks may find that their already available supports are sufficient. Extended family and friends may assist new foster parents by

providing enough instrumental and emotional resources to alleviate stresses brought about by the day to day demands of caring for foster children.

Characteristics unique to foster parenthood. In addition to variables associated with successful parenting, studies with foster parents have assessed factors unique to foster parenthood. These have included (1) reasons for providing foster care placements and (2) foster parents' relationships with foster care workers.

Child welfare researchers have given considerable attention to why individuals want to foster. Motives have included the opportunity to be altruistic, identification with or knowing a foster child, wanting to add children to the family, and having the opportunity to work at home (Cautley, 1980; Fanshel, 1966; Martin et al. 1992; Proch, 1982). Several studies have examined whether reasons for fostering were associated with quality of foster parenting.

Kraus (1972) found associations between foster mothers' motivations and placement duration. Data from foster care records of 142 children were analyzed using t-tests. Statements of general interest in the program such as caring for a child, sharing her home with a child, and helping a child because one of the foster parents had been a foster child correlated positively with length of placement. Wanting company for one's own child correlated negatively with placement duration.

Hampson and Tavormina (1980) interviewed 34 active foster mother to obtain their perceptions of fostering. They divided foster mothers' motives into two categories: (1) social, such as love of children and the desire to help someone and (2) private, such as wanting a child to care for and wanting a companion for their own children. Chi-square

analysis compared the length of placement among the categories. Foster mothers who had been fostering the same child for over two years were more likely to list social motivations for fostering. In contrast, those with no foster children or less experience with the foster child were more likely to list private motives.

The study's small sample size limited statistical analyses. Only two groups of foster parents were compared: those with the same children for over two years and foster mothers with shorter placements or no children. It was not known if foster mothers with more recent placements or without children at the time of the study maintained longer placements with previous foster children or continued to provided adequately for children living with them. Without some indication of foster mothers' placement histories, results can not be interpreted.

Dando and Minty (1987) considered the quality of foster home placements rather than duration. They associated foster parent motives with performance ratings completed by workers of role understanding, basic child care, and special capacities associated with fostering such as handling the child's identity difficulties, coping with discrepancies between chronological and developmental age, working with biological parents, and communicating with difficult and withdrawn children. Cross tabulation of motive and foster care worker rating found that motives most frequently associated with excellent and good ratings were being childless, altruism, and identification with the child. A chi-square analysis found a significant association between the motive of wanting to look after children and a rating of barely adequate when compared with all other motives together.

Though the study tried to determine how motivation was associated with effective fostering, foster care workers rated only 13 percent of the sample (N = 80) as barely adequate. Low ratings did not mean that placements were unsatisfactory for children in these homes. Rather, foster parents in the sample were adequately providing for children. Foster parents who dropped out in less than a year were excluded from the sample.

Results of studies about motivation have suggested that individuals with social or child-oriented reasons have more success maintaining a given foster care placement. Findings of studies with closed homes have indicated that foster parents initially interested in adopting and those interested in caring for a particular child are at greater risk to cease fostering (Baring-Gould et al., 1983; Rindfleisch, Bean, & Denby, 1998), but they have served the needs of at least one child. Further investigation is needed to determine how interest in fostering predicts continuation or exit of foster parents.

The foster parent-foster care worker relationship has received more attention in practice literature than in research. Descriptive reports have indicated that most foster parents are satisfied with agencies and workers (Hampson & Tavormina, 1980; Martin et al., 1992). Expressed dissatisfactions have been based on foster parents' perceptions of infrequent contact and lack of information about foster children. Stone and Stone (1982) found that foster parent rapport with the agency accounted for variance in length of time children remained in foster home placements. The source of data for determining satisfaction was foster care records rather than directly asking either foster parents or workers.

The quality of foster parents' relationships with workers is thought to influence their decisions about foster parenting. However, dissatisfied foster parents continued in service (Hampson & Tavormina, 1980; Martin et al., 1992) and the majority of closed homes did not express dissatisfactions with agencies (Baring-Gould et al., 1983; U. S. Department of Human Services, 1995). Relationships with their workers may be more critical to some foster parents than to others. Given the high turnover rate of foster care workers and agency policies that assign more than one worker to foster families, one important aspect of how foster parents relate to workers may be clear role expectations that are consistently reinforced by all agency staff working with a foster home.

Summary of the Theoretical Model

Agencies need reliable, stable family foster homes as placements for children in care, most of who have already experienced disruption of primary caregiving relationships through maltreatment by and subsequent removal from their families of origin. Many children in foster care have severe psychosocial problems or are at risk for developing such problems. Foster parents provide a primary source of therapeutic intervention for children through their day-to-day care. When psychosocial services are provided, foster parents are often the first to recognize a problem, advocate for services, provide transportation, and coordinate with service providers. Having enough qualified foster homes available directly affects placement outcomes for children.

Foster families, like all families, are subject to adjustment and adaptation in response to changing family circumstances. The temporary addition of a child in a foster care placement changes internal family roles and relationship patterns as a child becomes a

member of a family and then leaves (Eastman, 1982; Molin, 1989; Wilkes, 1974). In addition, when families begin the process of being foster parents, their home environments expand to include the foster care delivery system (McFadden, 1985). By becoming foster parents, families become part of the agency. At a minimum, once they accept a child for placement, foster parents have contact with foster care workers and interact with children's birth families, either directly or indirectly through casework activities for reunification.

With fewer individuals applying to be foster parents, it is imperative that agency policies and practices maximize potential for interested, qualified applicants to be licensed and to continue as family foster care providers. Various factors have been associated with more favorable outcomes for children. In combination, these variables contribute to favorable family foster care environments. Absence of these characteristics places individuals at risk for discontinuing as service providers. Foster parents' mental health, parenting attitudes consistent with program expectations, marital adjustment, family functioning, and available social supports from family and friends may constitute a set of resources that predispose foster parents to adapt better to role demands. Other factors specific to foster parenthood that also may be predictive of foster parent exits including (1) interest in adoption and (2) role understanding. Pre-approval factors predicting risk of exits for new foster parents are presented in Figure 2.4.

Literature has identified post-placement factors thought to predict new foster parent exits. These include (1) foster parents' early placement experiences, (2) post-approval training, (3) satisfaction with the agency, (4) interactions with other foster

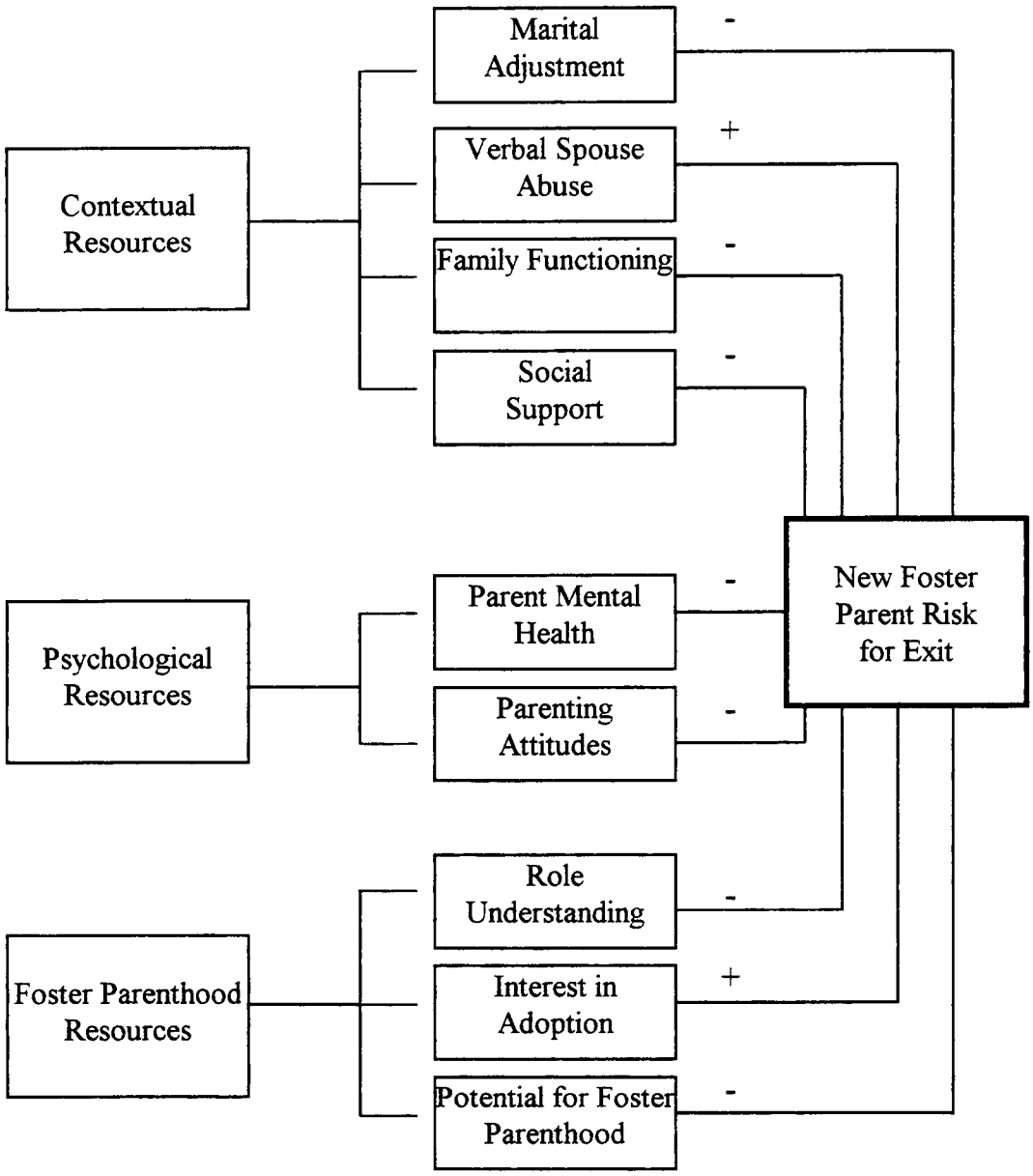


Figure 2.4. Pre-approval Factors Predictive of Foster Parent Exits

parents, and (5) normative life changes in the foster family. In addition, discrepancies between how foster parents and foster care workers perceive foster parent responsibilities may predict risk for exit. Figure 2.5 presents the model.

Research Questions

The primary intent of the study was to identify pre-service individual and family characteristics of new foster parents and post-placement experiences likely to predict early exit from foster care. A secondary question asked if differences were evident among how new foster parents perceive their roles during pre-service training and the perception of foster parenthood held by foster care workers. Practice and research suggested the following research questions with foster parents.

Research Question 1

Are the foster parent pre-approval characteristics of parents' mental health, parenting attitudes, marital adjustment, verbal spouse abuse, family functioning, and social support predictive of risk for early exit?

Hypothesis. There is a negative relationship between parents' mental health and risk for early exit.

Hypothesis. There are negative relationships between risk for early exit from foster care and (1) appropriate developmental expectations for children, (2) empathy for children, (3) alternatives to using corporal punishment, and (4) appropriate parent-child roles.

Hypothesis. There is a negative relationship between risk for early exit and marital adjustment.

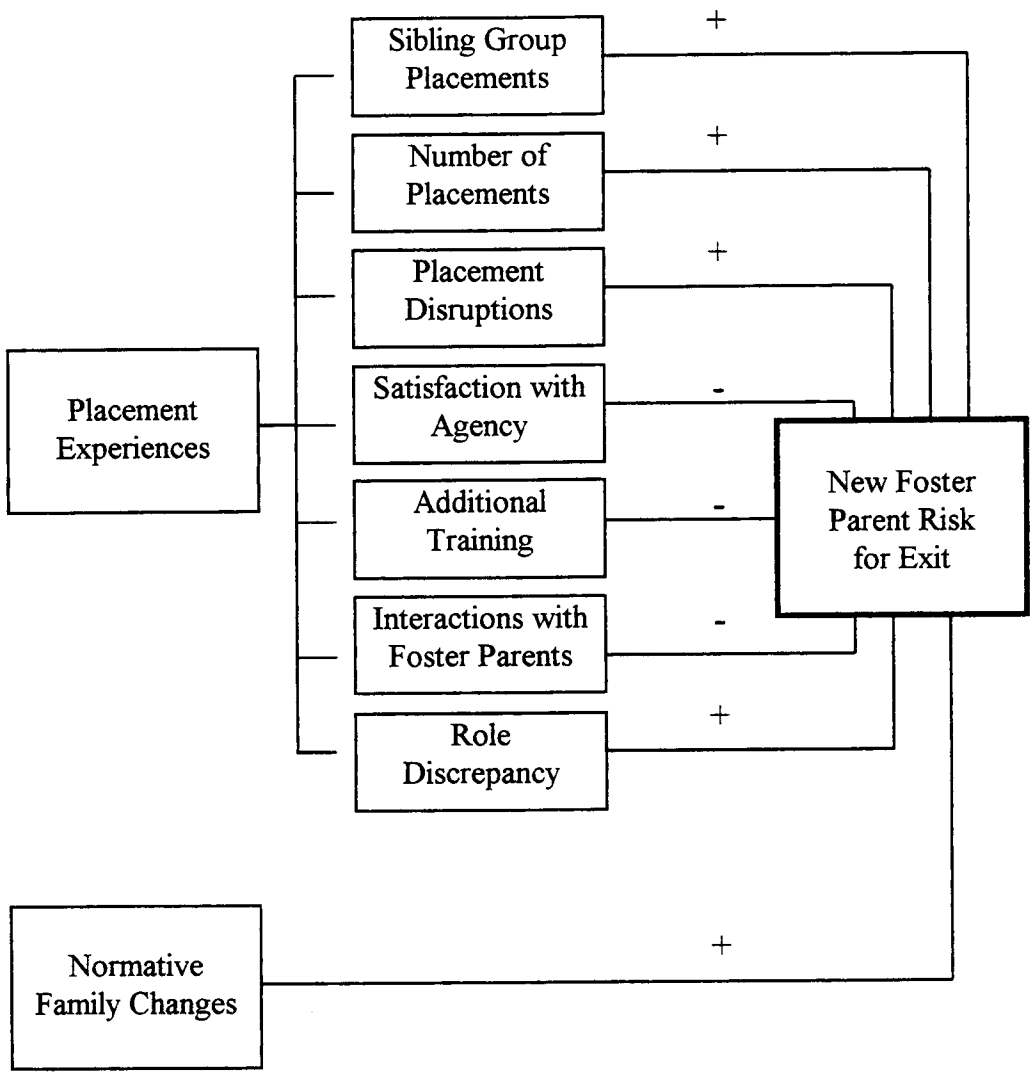


Figure 2.5. Post-placement Factors Predictive of Risk for Early Exit

Hypothesis. There is a positive relationship between risk for early exit and verbal spouse abuse.

Hypothesis. There is a negative relationship between risk for early exit and foster family functioning.

Hypothesis. There is a negative relationship between risk for early exit and perceived social supports available to foster parents.

Research Question 2

Do new foster parents at risk for exit from the foster care system and those who intend to continue to foster report different role conceptions of foster parents?

Hypothesis. There are negative relationships between risk for early exit and foster parent perception of role responsibilities for (1) partnering with the agency, (2) facilitating relationships with birth families, (3) parenting, (4) promoting children's social and emotional development, and (5) promoting spirituality.

Research Question 3

Do new foster parents at risk for early report different interests for being foster parents than those who intend to continue?

Hypothesis. There is a positive relationship between risk for early exit and foster parents' interests in adoption.

Research Question 4

Do normative family changes occurring after pre-service training influence new foster families' risk for exit from foster care?

Hypothesis. There is a positive relationship between risk for exit and normative family changes experienced by foster families after pre-service training.

Research Question 5

Does foster parent satisfaction with the agency influence new foster parent risk for exit?

Hypothesis. There is a negative relationship between risk for early exit and foster parents' reported level of satisfaction with agency services.

Research Question 6

Do early placement experiences including (1) number of placements, (2) caring for sibling groups, and (3) if placements are terminated as a result of disruption predict foster parent risk for exit?

Hypothesis. There are positive relationships between risk for early exit and placement experiences of (1) number of placements, (2) providing placements for sibling groups, and (3) placement disruption.

Research Question 7

A secondary concern of the study is foster parent role understanding. Are there differences in how roles of foster parenting are perceived by new foster parents, foster care workers providing training and completing home studies, and foster care workers assigned to foster children placed with foster parents? Are differences in role perception predictive of new foster parent exits?

Hypothesis. There are significantly different role perceptions of foster parenthood based on occupied roles of (1) new foster parent, (2) foster family worker, and (3) foster child worker.

Hypothesis. There is a positive relationship between risk for exit and discrepancy between foster parent and foster care workers' role perception of foster parenthood.

Chapter 3: Research Methods

The present study is an analysis of survey data collected from January, 1996, through December, 1997. The study examines the relationships of foster parent risk for early exit and pre-service and post-placement factors that could predict early exits from foster care. Quantitative and qualitative data were collected by four methods: standardized questionnaires completed by foster parent applicants, telephone interviews with foster parents six months after their completion of pre-service training, abstraction from foster parent records, and questionnaires completed by foster care workers.

This chapter describes methods used to conduct the study including the study design, subject selection, data collection, and measurement.

Design

This study used a longitudinal prospective panel design to obtain data from successive cohorts of foster parent applicants. As part of a larger study, foster parent applicants were assessed during pre-service training, and then re-interviewed six months after completion of training. During the interview foster parents indicated if they were approved, and if so, if they planned to continue to provide foster care placements, and reasons behind their decisions.

Several child welfare researchers have recommended longitudinal panel designs for studying the effects of services on the well being of children and families. Cautley (1980) used a longitudinal panel design in her study of placement experiences of new foster parents. Wulczyn (1996) cited two advantages of longitudinal designs for child welfare research. First, subjects have shared common historical backgrounds. Second, comparison

at points in time gives a more reliable measure of movement through the system than sampling at a single point in time.

Agency Setting

The sample was drawn from a population of foster parent applicants with the State of Tennessee Department of Children's Services (DCS). The agency is a public child welfare service responsible for approximately 75 percent of children and youth in state custody (TCCY, 1996). Though some children in DCS foster homes are placed voluntarily by parents, most children and youth are adjudicated as neglected, abused, or unruly by the juvenile court. Direct services to children and their families include protective services and regular foster care placements. The agency recruits, trains, certifies, and supervises family foster homes.

Human Subjects Review

Data for this study came from data collected in a larger study of foster parents. The University of Tennessee Institutional Review Board approved both the larger study and this study (IRB 5250-B). The only risk to research participants was that personal information might be revealed to others. Several procedures assured subjects' confidentiality. First, subjects received a unique identification number assigned consecutively as case data were entered into a data base. All data collected for the study were stored using these identification numbers. Second, research personnel signed statements assuring they understood issues of confidentiality and guaranteed they would not reveal names or other information observed as part of the research project to anyone outside the project, nor discuss information in public or in the presence of anyone outside

the project (see Appendix A). As a third protection for subjects, names, addresses, and telephone numbers needed to follow foster parents were kept by research team members in files separate from other data. These data will be destroyed at completion of the study.

Study participants were informed of the larger study verbally and in writing. Questions about the study were answered in a group and individually as requested. Participants received a letter explaining the project, requirements for participation (see Appendices B, C, and D) and a consent form with instructions to return the consent form to the research team member in each county.

Foster mothers and foster fathers signed consent forms giving permission for the researcher to administer assessments and use data obtained (see Appendix B). They also agreed to let researchers read and abstract information from their foster home files. Six months after MAPP training groups ended, a letter was mailed to participants who completed the baseline measures informing them the they would be contacted about their experiences as foster parents (see Appendix E). When contacted by telephone, subjects were informed again of the purpose for the interview. Verbal assent to participate was obtained before beginning the interview.

Foster care workers agreed to complete a questionnaire on their perception of foster parent responsibilities and provide demographic information about themselves. Foster care workers completing home studies also agreed to complete a measure of foster parenthood potential for foster families in the study. Consent forms for foster care workers are presented in Appendices C and D.

Subjects were informed of their rights to withdraw from the study without reprisal. Foster parents' participation did not affect their foster home applications. Refusal to participate did not affect subjects' treatment or receipt of services from the DCS, the University of Tennessee, or any other state agency. Participants' individual responses were not revealed to DCS.

Sample Selection and Data Collection

Data for the study were obtained from two groups: (1) new foster parents and (2) foster care workers. The following discussion outlines procedures for recruitment and selection of the study samples of approved foster parents and foster care workers and how data were collected from these groups.

The sample of 52 approved foster families in this study is a sub-sample of the 105 family applicants who agreed to participate and provided data for the larger study to date. Subjects from the larger study were included in this study sample based on the following criteria: (1) they completed pre-service training between January, 1996, and June, 1997, and (2) DCS approved their family foster home application.

Descriptive analyses provide specific information about the sample in this study. First is a comparison of eligible study participants and non-participants in the sub-sample of program applicants attending pre-service training groups between January, 1996 and June, 1997 from which subjects were recruited. This comparison determines how well eligible participants represented new foster parent applicants in the data collection sites. Second, descriptive analysis of the sub-sample used in this study provides information about foster parent applicants, about newly approved foster parents, and about the foster

care workers who train and assess applicants, supervise homes, and provide case work services for children in care.

Foster parent applicants and foster care workers were recruited from Davidson, Hamilton, and Knox Counties. These counties are three of the largest counties in the state, representing the urban areas and surrounding rural communities of Nashville, Chattanooga, and Knoxville respectively. Each county forms its own service region with DCS and has a demographically diverse group of foster families and foster children. DCS supervises approximately 200 family foster homes in each county. Table 3.1 presents relevant data from the 1990 census for each of the three counties and Tennessee (TCCY, 1996; University of Tennessee Knoxville Center of Business and Economic Research, 1996).

New Foster Parents

The sample of approved foster parents was obtained from a pool of foster and adoptive parent applicants attending pre-service training. Figure 3.1 outlines the process for sample selection. Pre-service training groups served as a vehicle for contacting potential participants. All eligible applicants who agreed to take part in the larger study completed a battery of baseline assessment measures during training. Applicants approved as foster parents by DCS comprised the sub-sample of approved foster parents. This was the group of primary interest for this study. Follow-up data were collected from parents in approved foster families.

Model Approach to Partnerships in Parenting (MAPP). All non-relative foster parents in Tennessee must successfully complete the Model Approach to Partnerships in

Table 3.1. Demographic Data for Tennessee Counties

Characteristic	MAPP Training Sites			Tennessee
	Davidson County	Hamilton County	Knox County	
Total Population[1]	510,784	285,536	335,749	4,877,185
Living in Urban and Rural[1]				
Urban	99.0%	87.8%	78.0%	60.9%
Rural	1.0%	12.2%	22.00%	39.1%
Race[1]				
White	74.7%	79.6%	89.8%	83.0%
African-American	23.4%	19.1%	8.8%	16.0%
Other	1.9%	1.3%	1.4%	1.0%
Children < 18[1]	24.9%	24.2%	22.4%	24.9%
Families[1]	132,152	79,031	91,357	1,356,342
Family Households with Children < 18[1]				
Married-couple	68.4%	74.7%	77.9%	77.0%
Male household	4.0%	3.2%	3.5%	3.5%
Female household	27.6%	22.1%	18.6%	19.5%
Median Family Income[1]	$34,785	$32,185	$32,614	$25,546
Educational Level[1]				
High School	75.9%	72.5%	74.6%	67.1%
College	19.7%	24.4%	23.9%	16.0%
Families Below the Poverty Level[2]	10.0%	10.2%	10.2%	12.4%
Children < 18 years old Living in Poverty[2]	19.4%	18.4%	18.2%	20.7%
Children in Custody[2]	995	787	738	12,258

Data Sources:
[1]University of Tennessee Knoxville Center of Business and Economic Research, 1996
[2]Tennessee Commission on Children and Youth Report, 1996

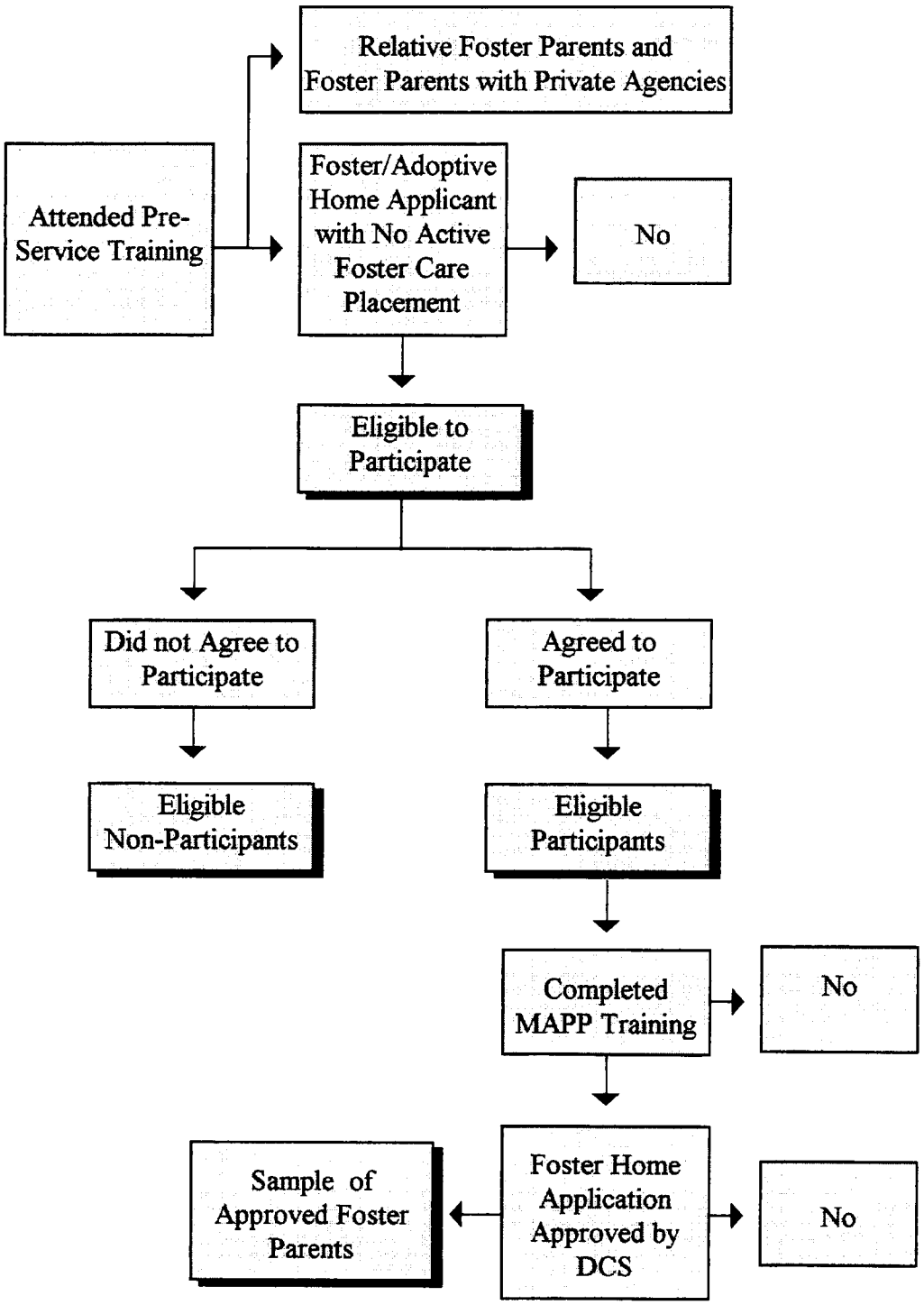


Figure 3.1. Sample Selection Process

Parenting (MAPP) training program (Pasztor, 1987). MAPP consists of 30 hours of group training over 10 3-hour sessions. Group sessions include presentations, role plays, and dyadic instruction about foster care policies and procedures, foster parents' roles with the agency, understanding loss, child development, attachment, the importance of birth parents, and family systems. Specifically trained social counselors lead MAPP groups. Regulations require that both potential foster mothers and fathers attend at least eight out of 10 sessions for successful completion of training. A description of MAPP program meetings is presented in Appendix F.

Benefits of recruiting subjects and collecting data during MAPP training groups. Recruiting subjects from MAPP training groups offered several advantages. First, MAPP training provides subjects with a similar background about agency procedures and foster parent roles. Second, training groups serve as a common point for recruiting subjects. Third, additional burdens on agency personnel for identifying possible participants and for data collection are minimized by recruiting subjects and collecting data through normal agency activities. A fourth advantage is that potential foster parents' enthusiasm and interest in helping children increases the likelihood they will participate in an agency-based research project. Fifth, training groups provide controlled conditions for administration of a battery of self-report measures in a standardized fashion. Moreover, investigators are able to establish rapport with subjects to increase motivation for accurate, thorough responses and to control for collusion and sharing of responses among spouses.

Procedures for assessing foster parent applicants. Eight members of the research team for the larger project collected data from foster parent applicants during MAPP

training. Team members assessing foster parents included four Ph.D. level and four master's level researchers. Team members were trained in two areas before administering measures. First, researchers completed MAPP training to become familiar with the program. Second, the research team developed a manual outlining procedures to follow for data collection (Orme, 1997). Research team members were trained about how to administer the battery of self-report measures and referred to the manual to ensure standardization and fidelity of the administration procedures. The group reviewed data collection procedures during team meetings to assure consistency.

Research team members coordinated with supervisors and trainers at each site to attend MAPP group meetings and to determine when best to administer measures to participants. Team members adhered to trainers' suggestions of how to minimize disruptions to group process. MAPP trainers in Knox and Davidson Counties asked that participants complete the measures before MAPP sessions began. In Hamilton County, measures were administered during a break midway through group sessions.

Self-report measures of parenting beliefs, mental health, martial adjustment, marital conflict, family functioning, social support, and foster parent role responsibilities were administered during MAPP sessions three through eight. Two points were taken into account when considering the order for administering measures. First, measures of variables likely to change in response to MAPP training were collected at later sessions. Second, less threatening measures were administered earlier in an attempt to reduce dropouts from the research. Single foster parents were not asked to complete measures for marital adjustment or marital conflict. Family functioning of single foster parents living

alone was not assessed. Table 3.2 presents constructs measured during each MAPP session.

Recruitment strategies. Subjects in the larger study were recruited from MAPP training groups in Davidson, Hamilton, and Knox counties. The study included several strategies to maximize participation. First, all potential foster and adoptive parents attending MAPP training were asked to participate voluntarily in the study. The exception was a small number of foster parents who were already providing placements for children before taking MAPP training. DCS trains foster and adoptive home applicants together. Some individuals start MAPP training with the intention of applying for one program. As they learn more about foster care and adoption, they decide also to apply as both foster and adoptive homes. Inclusion of foster and adoptive home applicants assured that potential subjects were not overlooked. Second, recruiting subjects during training took advantage of their interest and enthusiasm in foster parenting. Third, foster families received a $25.00 gift certificate from the larger study

Table 3.2. Constructs Measured During MAPP Training

MAPP Session	Agenda	Construct Measured
3	Losses and Gains: The Need to be a Loss Expert	Social support
4	Helping Children with Attachments	Marital adjustment
5	Helping Children Learn Appropriate Behaviors	Family functioning Marital conflict
6	Helping Children with Birth Family Connections	Parent mental health
7	Gains and Losses: Helping Children Leave Foster Care	Parenting beliefs
8	Understanding the Impact of Fostering or Adopting	Foster parent role responsibilities

for completing the battery of self-report measures. Foster parents are not well compensated for working with foster children, so they were paid for the time required to participate in the larger study beyond the time they already volunteer with DCS.

Figure 3.2 depicts foster parents in the study sample. According to attendance records for MAPP groups, 298 families started MAPP training in the three training sites between January 1996 and June 1997. Of these families, 132 eligible participant families (44.30 percent) completed training. Despite strategies for recruiting subjects, some foster parent applicants did not agree to participate. Reasons for not participating are not known.

Eighty eligible participant families (60.60 percent) volunteered to be in the study. Twenty-six families were recruited from five groups in Davidson County; 20 families agreed to participate from four groups in Hamilton County; and eight groups in Knox County yielded 34 families. The sample of eligible participants included 78 women, 51 men, and 49 foster parent couples.

Characteristics of foster and adoptive home applicants. Information about age, race and ethnicity, educational attainment, marital status, and family type were gathered for all persons attending MAPP training who were eligible to participate in the study. Additional data about individuals and families were obtained from foster family home records of approved foster families. The following discussion of characteristics of foster home applicants first summarizes data about applicants eligible to participate in the larger study who attended MAPP training groups between January 1996, and June 1997. Next, a comparison of eligible participants and non-participants is presented.

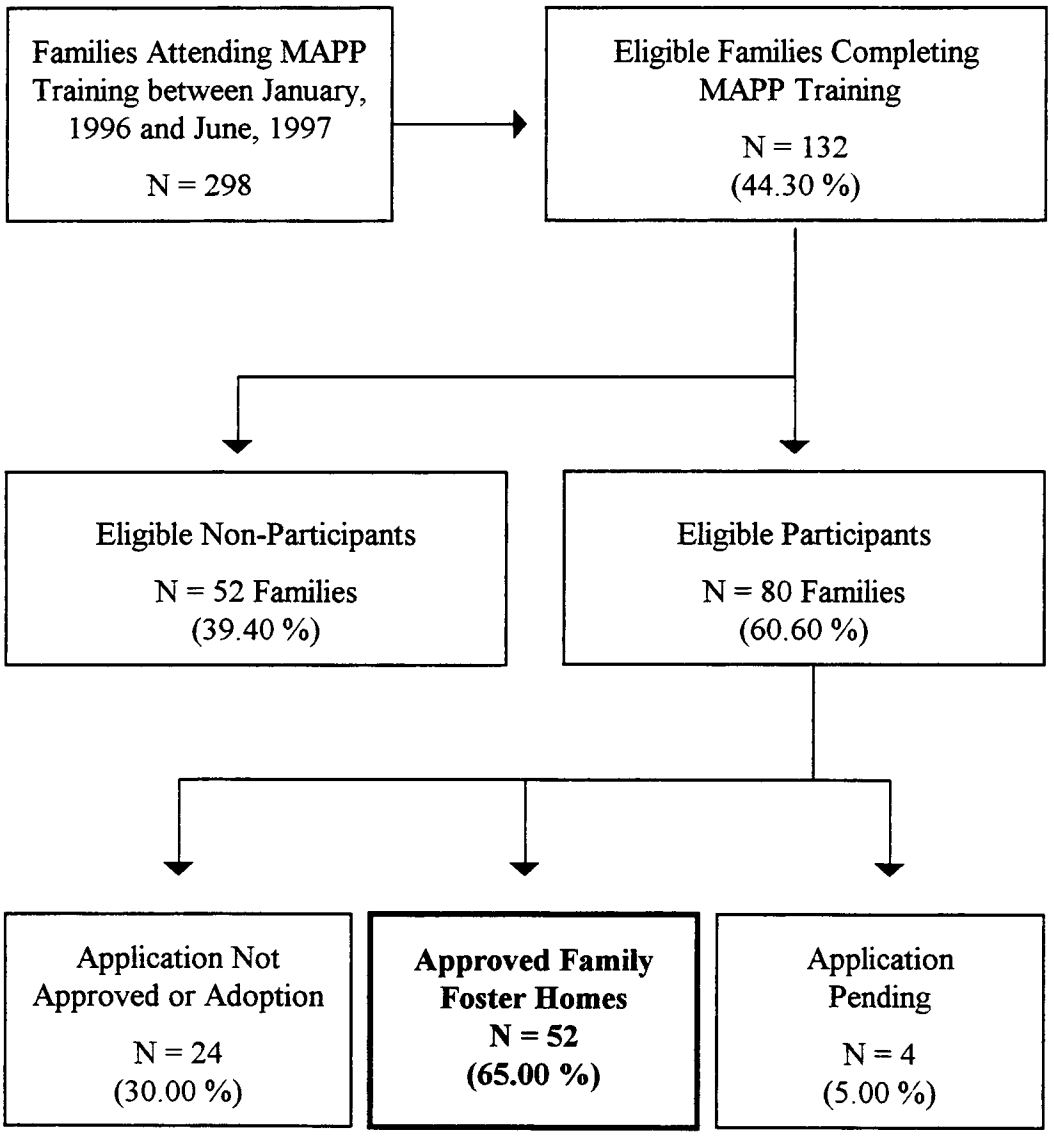


Figure 3.2. Foster Parents Included in the Study Sample

Third, the discussion presents demographic characteristics of approved foster parents in the study sample.

Women eligible to participate in the larger study ranged from 21 to 66 years old. The mean age for women was 38.87 (SD = 9.16, N = 120). Ages for men were similar, ranging from 23 to 66 years old (M = 39.28, SD = 7.19, N = 82). In regard to educational attainment, 91.74 percent of women (N = 121) and 81.75 percent of men (N = 83) reported having at least a high school education or equivalency. Over one-fourth of applicants (24.80 percent of mothers and 28.92 percent of fathers) completed at least four years of college. Table 3.3 and Table 3.4 summarize demographic data for eligible participant and non-participant mothers and fathers, respectively.

Individuals eligible for the larger study differed from the general population of the state. First, there was a larger representation of African-Americans than in the

Table 3.3. Characteristics of Eligible Participant and Non-participant Foster and Adoptive Mother Applicants

	Status of Eligible Applicants					
	Participants (N = 78)		Non-participant (N = 50)		Total Eligible Applicants (N = 128)	
Characteristic	f	%	f	%	f	%
Educational Attainment[1]						
< High School	2	2.56	8	18.60	10	8.26
High School/GED	36	46.15	19	44.19	55	45.46
Associate/Two Year College	19	24.36	7	16.28	26	21.48
Bachelors	12	15.39	3	6.98	15	12.40
Other	9	11.54	6	13.95	15	12.40
Race[2]						
African-American	22	28.21	23	51.11	45	36.58
Caucasian	54	69.23	22	48.98	76	61.79
Other	2	2.56	0		2	1.63

[1]Non-Participant N = 43
[2]Non-Participant N = 46

Table 3.4. Characteristics of Eligible Participant and Non-participant Foster and Adoptive Father Applicants

	Status of Eligible Applicants					
	Participants (N = 51)		Non-participant (N = 37)		Total Eligible Applicants (N = 88)	
Characteristic	f	%	f	%	f	%
Educational Attainment[1]						
< High School	6	11.77	5	15.63	11	13.25
High School/GED	18	35.29	13	40.63	31	37.35
Associate/Two Year College	10	19.61	7	21.88	17	20.48
Bachelors	15	29.41	3	9.38	18	21.68
Other	2	3.92	4	12.50	6	7.24
Race[2]						
African-American	9	17.65	13	37.14	22	25.58
Caucasian	42	82.35	22	62.86	64	74.42

[1]Non-Participant N = 32
[2]Non-Participant = 35

population statewide. Thirty-four percent of women and 26 percent of men were African-American. The 1990 census statistics reported 16 percent of Tennessee's population to be African-American (TCCY, 1996). More applicants were high school graduates (91.74 percent of women, and 86.75 percent of men) than found in the state population (67.1 percent). The majority of individuals eligible to participate in the larger study were married (65.65 percent), 31.82 percent were single women, and four applicants were single men. Statewide, single women headed 20 percent of households (University of Tennessee Knoxville Center of Business and Economic Research, 1996).

Table 3.5 presents family characteristics of foster and adoptive home applicants eligible to participate in the study. DCS foster care workers completing home studies in each of the three training sites provided the application type and approval status of families. Almost half of eligible families completing MAPP training were interested in

Table 3.5. Family Characteristics of Eligible Participant and Non-participant Foster and Adoptive Home Applicants

	Status of Eligible Applicants					
	Participants (N = 80)		Non-participant (N = 52)		Total Eligible Applicants (N = 132)	
Characteristic	f	%	f	%	f	%
Marital Status[1]						
Married	49	61.25	37	72.55	86	65.65
Separated	2	2.50	0		2	1.53
Divorced	19	23.75	4	7.84	23	17.56
Widowed	3	3.75	1	1.96	4	3.05
Never Married	7	8.75	9	17.65	16	12.21
Family Type						
Two-Parent	49	61.25	37	71.15	86	65.15
Single Mother	29	36.25	13	25.00	42	31.82
Single Father	2	2.50	2	3.85	4	3.03

[1]Non-Participant N = 51

applying to be foster parents (49.24 percent), 17.43 percent only were interested in adoption, and 33.33 percent completed applications for both programs. DCS approved 69 percent of applicants as foster parents. Table 3.6 presents a summary of application experiences.

Comparison of participant and non-participant applicants. Analyses were conducted to assess differences between participants and non-participants in the larger study to determine how well the sample represented applicants in the three training sites. Subjects included in this analysis completed MAPP training between January, 1996 and June, 1997. Independent-samples t-tests comparing mean age for participants found no statistically significant differences between those who agreed to participate and those who did not. Table 3.7 presents a results of chi-square analyses conducted to assess differences in race, educational attainment, marital status, family type, MAPP training

Table 3.6. Application Experiences of Participant and Non-participant Foster and Adoptive Home Applicants

	Status of Eligible Applicants					
	Participant (N = 80)		Non-participant (N = 52)		Total Eligible Applicants (N = 132)	
Application Experience	f	%	f	%	f	%
MAPP Training Site						
Davidson	26	32.50	10	19.23	36	27.27
Hamilton	23	28.75	17	32.69	40	30.30
Knox	31	38.75	25	48.08	56	42.43
Interest						
Foster	43	53.75	22	42.31	65	49.24
Foster and Adoption	31	38.75	13	25.00	44	33.33
Adoption	6	7.50	17	32.69	23	17.43
Approval Status						
Approved	54	67.50	36	69.23	90	68.18
Not Approved	22	27.50	14	26.92	36	27.27
Pending	4	5.00	2	3.85	6	4.55

Table 3.7. Comparison of Participant and Non-participant Applicants in the Larger Study Sample

	Number of Applicants					
Applicant Characteristics	Participants	Non-participants	Total	χ^2	df	p
Interest	80	52	132	14.10	2	.001
Race of Mother	78	46	124	6.69	2	.035
Race of Father	51	35	86	4.14	1	.042
Mother's Educational Attainment	78	43	121	11.2	4	.024
Father's Educational Attainment	51	32	83	6.06	4	.195
Family Type	80	52	132	1.92	2	.384
Marital Status	80	51	131	8.71	1	.069
MAPP Training Site	80	52	132	2.84	2	.241
Approval Status	80	52	132	.11	2	.946

site location, and applicants' program interest. Differences in marital status, family type, and training site location were not statistically significant at the .05 level. Statistically significant differences were found between participation status and mothers' educational level, race, and program interest. Only 2.56 percent of women participating in the study were not high school graduates compared to 18.60 percent of non-participants , χ^2 (4, N =121) = 1.21, p = .014. Over one-third of non-participant foster and adoptive father applicants (37.14 percent) reported their race as African-American compared to 17.65 percent of study participants, χ^2 (1, N = 86) = 4.14, p = .042. For foster mothers, African-Americans comprised 36.58 percent of foster and adoptive home applicants, 28.21 percent of the eligible participants, and 51.11 percent of non-participants, χ^2 (1, N = 124) = 6.69, p = .035. Finally, participant status was associated with applicants' interest in foster care or adoption. The percentage of eligible applicants interested in adoption who participated in the study and those who did not were 8.75 and 32.69, respectively, χ^2 (2, N = 132) = 14.10, p = .001.

The level of educational attainment may have influenced applicants' decisions to participate in two ways. First, applicants with less than a high school educational may have hesitated to take part in a study asking them to complete more paperwork than already was required for their applications. Second, survey respondents have tended to be individuals interested in the topic (Bernick, & Pratto, 1994). Participation in a research study may have held more value for applicants who attained higher educational levels. Data on type of employment available for 92.68 percent of approved foster mothers

indicated that 42 percent of these women were employed in helping professions including teaching, nursing, and social work (see Table 3.8). Professional training in these disciplines emphasize the importance of research.

Applicants who were sure that they were only interested in adoption did not tend to participate in a study recruiting potential foster parents. Interest in adoption also may explain the difference in race between participants and non-participants. DCS has special programs for recruiting African-American adoptive homes. For African-American applicants, 28.57 percent of women and 41.67 percent of men not participating in the study were interested only in adoption compared to 9.09 percent of women and 33.33 percent of men agreeing to participant. When the 23 families interested only in adoption were excluded, participation in the study in the study increased from 60.61 to 67.59 percent.

Subjects excluded from analysis. The final step in selecting subjects for this study was if eligible participants in the larger study sample were approved as foster parents by DCS. Adoptive parents who completed the initial set of questionnaires but did not apply

Table 3.8 Approved Foster Mothers Employed in Helping Professions

Job Category	f	%
Nurse	6	37.50
Social Worker	3	18.75
Teacher	3	18.75
Community Living Specialist	1	6.25
Day Care Assistant	1	6.25
Educational Assistant	1	6.25
Vocational Specialist	1	6.25
Total	16	100.00

to foster were excluded from analysis. A certain number of study participants were not approved to foster either because they did not complete applications or they did not meet minimum standards set by DCS. These cases also were excluded from the primary data analysis. Finally, cases were excluded if their applications were still pending at the time they were contacted for the follow-up interview. From the original sample of 80 eligible participant families completing MAPP training and the battery of assessment measures, 52 approved foster homes were included in the data analysis. Reasons for being excluded from the sample of eligible participants are listed in Table 3.9.

Approved foster parents. Results of t-tests and chi-square analyses found no statistically significant differences between the demographic characteristics of applicants who were approved as foster parents and those who were not. Demographic data for eligible participants approved as foster mothers and foster fathers are summarized in Table 3.10 and Table 3.11, respectively. The average age for foster mothers was 40 years (SD = 9.16). Over one-fourth (28.85 percent) of foster mothers were African-American. Most foster mothers completed high school (96.15 percent), 59.61 attended college, and 30.76 percent earned college degrees.

Table 3.9. Subjects Excluded from Primary Data Analysis

Reason for Exclusion	f	%
Approved for Adoption Only	2	2.50
Not Approved	22	27.50
Application Pending	4	5.00
Total	28	35.00

Table 3.10. Demographic Characteristics of Foster Mother Applicants in the Study Sample

	Eligible Foster Mother Participants			
	Approved as Foster Parent (N = 52)		Not Approved as Foster Parent[1] (N =26)	
Characteristics	f	%	f	%
Educational Attainment				
< High School	2	3.85	0	
High School/GED	19	36.54	17	35.38
Associate/Two-Year College	15	28.85	4	15.38
Bachelors	9	17.30	3	11.34
> Bachelors	7	13.46	2	7.70
Race				
African-American	15	28.85	7	26.92
Caucasian	37	71.15	17	65.38
Other	0		2	7.70

[1]Not Approved as Foster Parent includes applicants who applied as adoptive homes only, did not complete foster home applications, or did not meet DCS minimum standards.

Table 3.11. Demographic Characteristics of Foster Father Applicants in the Study Sample

	Eligible Foster Father Participants			
	Approved as Foster Parent (N =31)		Not Approved as Foster Parent[1] (N =20)	
Characteristics	f	%	f	%
Educational Attainment				
< High School	5	16.13	1	5.00
High School/GED	9	29.03	9	45.00
Associate/Two-Year College	6	19.35	4	20.00
Bachelors	10	32.26	5	25.00
> Bachelors	1	3.23	1	5.00
Race				
African-American	5	16.13	4	20.00
Caucasian	26	83.87	16	80.00

[1]Not Approved as Foster Parent includes applicants who applied as adoptive homes only, did not complete foster home applications, or did not meet DCS minimum standards.

All foster fathers in the sample were married. The average age for foster fathers was 41 years (SD = 7.19). Sixteen percent were African-American. Most foster fathers completed high school (83.87 percent), 19.35 percent held associate degrees, and 35.49 percent completed bachelor's degrees.

Table 3.12 presents family characteristics of approved foster families. Data on family membership and family income were gathered from foster parent case records. Records were not complete and resulted in some missing data. Married couples headed the majority of families (59.62 percent). On average, couples had been married for 11.37 years (N = 27, SD = 8.88). Twenty-seven percent of families were single females with no children; 7.69 percent of single foster mothers had never been married.

Fifty percent of families reported incomes greater than $38,400 (M = $44,791, SD = 46,831). Most foster mothers (82.22 percent, N = 45) reported working outside the home. Both parents reported working in 77.79 percent of couples. Only two non-married foster mothers were not employed at another job.

Slightly over half of foster parents (56.82 percent, N = 45) had their children living in the home. However, almost one third of foster parents had no previous experience as parents (34.15 percent of foster mothers and 30.77 percent of foster fathers) and 34.62 percent of couples were childless.

Table 3.13 summarizes application experiences of eligible participants approved as foster parents and those who were not. When applicants only interested in adoption were excluded, chi-square analyses of application experiences found no differences

Table 3.12. Family Characteristics of Approved Family Foster Homes

	Family Foster Homes		
Characteristics	N	f	%
Family Type	45		
Couple		27	60.00
Single with child		9	20.00
Single without children		9	20.00
Marital Status	52		
Married		31	59.62
Divorced		10	19.23
Widowed		3	5.77
Never Married		4	7.69
Number of Household Members	45		
Single Household		12	26.67
Two members		14	31.11
Three members		8	17.78
≥ Four members		11	24.44
Number of Children	44		
No children		19	43.18
One child		11	25.00
Two children		7	15.91
≥ Three children		7	15.91
Total Family Income	40		
> $10,000		2	5.00
$10,000-$14,999		2	5.00
$15,000-$24,999		9	22.50
$25,000-$34,999		4	10.00
$35,000-$44,999		9	22.50
$45,000-$54,999		7	17.50
$55,000-$64,999		3	7.50
≥ $65,000		4	10.00
Source of Family Income			
Foster father's employment	27	24	88.89
Foster mother's employment	45	37	82.22
Parenting Experience			
Foster Mother	41	27	65.85
Foster Father	26	18	69.23

Table 3.13. Application Experiences of Eligible Participant Families

	Approval Status of Eligible Participants			
	Approved as Foster Parent (N = 52)		Not Approved as Foster Parent[1] (N = 28)	
	f	%	f	%
MAPP Training Site	20	38.46	6	21.43
Davidson	16	30.77	7	13.46
Hamilton	16	30.77	15	53.57
Knox				
Program Interest				
Foster Care	31	59.62	12	42.56
Foster Care and Adoption	21	40.38	10	35.71
Adoption	0		6	21.73
Previous Foster Parent Experience				
Foster Mothers	5	9.62	2	7.69
Foster Fathers	3	9.68	1	5.00

[1]Not Approved as Foster Parent includes applicants who applied as adoptive homes only, did not complete foster home applications, or did not meet DCS minimum standards.

between these groups. Approximately 10 percent (9.62 percent of foster mothers and 9.67 percent of foster fathers) reported having previous experience as foster parents.

Sixty percent of approved foster parents only applied to the foster care program. Forty percent applied to be foster and adoptive parents. As seen in Table 3.14, counties differed in the number of families approved as foster and adoptive homes. There was no difference in the percentages of homes approved to foster and foster/adopt in Knox and Davidson Counties. Hamilton County only had families who applied to the foster care program, χ^2 (2, N = 52) = 21.98, $p < .001$.

Demographic data from the sample differed from statistics obtained from a national survey of 1084 foster parents (U. S. Department of Health and Human Services, 1995). On a national level, foster parents approved between 1985 and 1990 tended to be

Table 3.14. Comparison of County Approval of Foster Families for Adoption

	MAPP Training Site							
	Davidson (N = 20)		Hamiton (N = 16)		Knox (N = 16)		Total (N = 52)	
Program Type	f	%	f	%	f	%	f	%
Foster Care	12	60.0	16	100.0	3	18.8	31	59.6
Foster-Adoption	8	40.0	0		13	81.3	21	40.4

in their mid- to late forties. This sample of foster parents was in their early forties. A slightly higher percentage of foster mothers and fathers were of African-American heritage (28.85 percent of sample foster mothers and 16.13 percent of sample foster fathers, compared to 20.1 percent of foster mothers and 11.8 percent of foster fathers on a national level). Approved foster mothers in this study sample appeared to be slightly better educated than foster parents in general. Almost one-third of approved foster parents in the study completed four or more years of college, compared to 16.6 percent foster mothers and 22.8 percent foster fathers approved between 1985 and 1990.

Foster Care Workers

Foster care workers were recruited from Davidson, Hamilton, and Knox Counties. Foster care workers conducting home studies assessed foster parent applicants' anticipated abilities to perform foster parent tasks. Foster care workers also provided demographic information about themselves and completed questionnaires regarding their perceptions of foster parent roles. Participation in the study required extra time on the part of already overloaded agency staff, so foster care units received compensation in office supplies provided by the larger study.

Administration of measures completed by foster care workers. After foster parent subjects completed MAPP training, research team members distributed measures of foster parenthood potential to workers conducting their home studies. These workers came to know foster parent applicants through MAPP training, review of foster home applications, and at least two visits to applicants' homes. Workers were instructed to complete the measure on their own and to mail completed questionnaires directly to the lead investigator of the larger study.

Foster home and foster child workers and their supervisors received a packet containing a description of the study, consent forms, demographic data sheets, and questionnaires about role responsibilities of foster mothers and foster fathers. Packets were distributed to workers through their unit supervisors. Workers and supervisors agreeing to participate completed the measures on their own and returned the packet information to the research team member for each site.

Characteristics of foster care workers. Characteristics of foster care workers participating in the study are presented in Table 3.15. All workers conducting home studies in the three training sites participated in the study (N = 26). Family workers reported up to 32 years of experience in child welfare (M = 14.50, SD = 8.00) and up to 25 years in foster care (M = 11.40, SD = 7.71). Ninety-two percent were certified as MAPP trainers. MAPP experience ranged from no experience to nine years (M = 5.44, SD = 2.76).

Foster care workers assigned to foster children (N = 41) also were an experienced group, with a mean of 11.44 years of child welfare experience (SD = 9.36) and a mean

Table 3.15. Characteristics of Foster Care Workers

	Foster Care Workers					
	Foster Family Workers (N = 26)		Foster Child Workers (N = 41)		Total (N = 67)	
Characteristics	f	%	f	%	F	%
County						
Davidson	8	30.77	5	12.20	13	19.40
Hamilton	7	26.92	13	31.70	20	29.85
Knox	11	42.31	23	56.10	34	50.75
Job Title						
Social Counselor	20	76.92	32	78.05	52	77.61
Field Supervisor	6	23.08	9	21.95	15	22.39
Educational Level						
Bachelor's/Social Work	8	30.77	6	14.63	14	20.90
Bachelor's/Psychology or Sociology	8	30.77	13	31.71	21	31.43
Bachelor's/Other Field	6	23.08	18	43.90	24	35.82
Master's /Social Work	3	11.53	3	7.32	6	9.00
Master's/Other Field	2	3.85	0		2	3.00
Doctorate/Other Field			1	2.44	1	1.50
Race						
African-American	7	26.92	11	26.83	18	26.87
Caucasian	19	73.08	30	73.17	49	73.13

of 8.33 years in foster care (SD = 8.69). Twenty percent of foster care workers with children were certified as MAPP trainers.

Comparison of foster care workers. Analyses assessed if differences existed between foster care workers who train foster parents and complete home studies and workers assigned to foster children. Independent-samples t-tests found no significant difference between workers in regard to years of experience in child welfare and in foster care. Chi-square analysis found no differences between groups for job classification, education, or race.

Measurement

Data on factors contributing to new foster parent exits were gathered from four sources. First, foster mothers and foster fathers completed a battery of self-report assessment measures during MAPP training. Second, foster care workers rated foster parents on anticipated ability to perform tasks of fostering and provided information about worker expectations for foster parents. Third, data were extracted from existing standardized agency reports completed by foster parents as part of the application process. Telephone interviews with foster parents served as the fourth source of data used in analyses.

Assessment of Foster Parent Applicants

Measures used to assess foster parents were selected after a search of compendiums of measures (e.g. Fischer & Corcoran, 1994; Magura & Moses, 1986; Touliatos, Perlmutter, & Straus, 1990) and current research literature. Several criteria were applied when selecting self-report scales. First, measures were selected based on their potential relevance to foster parenting. The second consideration was the measure's construct relevance, reliability, validity, and availability of normative data. A third criterion was ease of administration. Time involved and reading levels required to complete measures were assessed to increase accuracy of data collection. A final consideration was the clinical utility of measures for social work practice with foster parents.

Parent mental health. Parent mental health and well being referred to the absence of psychological symptoms and psychological distress indicating mental health problems. For the purpose of this study, the Global Severity Index (GSI) of the Brief Symptom

Inventory (BSI) was used to measure parent mental health (Derogatis, 1993). The GSI is the single most sensitive global index of psychopathology from the BSI (Derogatis, 1993).

The BSI is 53-item self-report symptom inventory based on the widely used and validated SCL-90-R (Derogatis, 1993). Items are rated on a 5-point distress scale ranging from not at all (0) to extremely (4). There are nine symptom dimensions: (1) Depression, (2) Anxiety, (3) Interpersonal Sensitivity, (4) Hostility, (5) Paranoid Ideation, (6) Phobic Anxiety, (7) Somatization, (8) Psychoticism, and (9) Obsessive Compulsive. Scores are available indicating global severity of symptoms and distress. The Global Severity Index (GSI) is computed by a summing the nine symptom dimensions and then dividing by the total number of responses to obtain a mean summated score. Including instructions, the BSI requires 10 to 15 minutes to complete and at least sixth-grade reading skills (see Appendix G).

The BSI can be used with patient and non-patient community respondents. Normative data are available for adult psychiatric outpatients, adult non-patients, and adolescent non-patients. Separate norms are available for both males and females in each group.

Respondents are classified as having a mental health problem if they have at GSI score greater than or equal to an area T-score of 63. Adult non-patient norms for males and females were used to transform foster fathers' and mothers' raw scores to area T-scores. These scores have a mean of 50 and a standard deviation of 10. Also, area T-scores are distinguished from the more common linear T-scores in that the former incorporates a normalizing transformation. Therefore, an area T-score of 60 accurately

indicates that an individual is at the 84th percentile of the normative referent population and an area T-score of 70 indicates that an individual is at the 98th percentile.

Coefficient alpha ranges from .71 to .85 for the nine subscales (Derogatis, 1993). The author has not reported coefficient alpha for the GSI, but has reported a test-retest reliability of .90. Other investigators have reported similarly high reliability estimates for diverse populations (e.g., Derogatis, 1994). Results from a variety of sources and populations have supported different aspects of the validity of the BSI (e.g., Derogatis, 1993; 1994), including strong correlations with the SCL-90-R, and other related well known and validated measures such as the MMPI.

Parenting attitudes. In this study, parenting attitudes referred to child rearing beliefs and practices of foster parents based on appropriate parental expectations for children's development, empathetic awareness of children's needs, clear parent-child roles, and views that forms of discipline other than physical punishment are effective. Parenting attitudes were measured using the Adult Adolescent Parenting Inventory (AAPI) (Blavolek, 1984). It was selected because it has been used in previous research with foster parents (Lee & Holland, 1991) and can be used with parents and potential parents. Not all foster parents have children.

The AAPI is a 32-item scale designed to measure parenting attitudes among parents or potential parents. Items are rated on a 5-point scale ranging from Strongly Agree (1) to Strongly Disagree (5). Five summated subscale scores are computed. The subscale name, the number of items in each subscale, and the potential range of values for each subscale are as follows: (1) Inappropriate Parental Expectations of Children (6

items/6-30), (2) Lack of Empathy Toward Children's Needs (8 items/8-40), (3) Parental Value of Corporal Punishment (10 items/10-50), and (4) Parent-child Role Reversal (8 items/8-40). For each subscale, higher scores indicate more appropriate attitudes. The AAPI takes approximately 20 minutes to complete, and requires sixth-grade reading skills (see Appendix H).

Foster parents' raw scores on each subscale were converted to sten scores based on normative data for gender and race of non-abusive adult respondents. Sten scores are used to determine risk for abuse. Higher sten scores are indicators of more nurturing parent attitudes and less risk for abuse. For non-abusive adults, sten scores from 7 to 10 are considered high (desirable), sten scores from 5 to 6 are considered average and represent the norm for this population. Respondents with sten scores in the range 1 to 4 are classified as at risk for abusive parent-child interactions.

AAPI normative data are based on data from 782 abusive adults, 1239 non-abusive adults, 305 abused adolescents, and 6480 non-abused adolescents from geographic areas all over the United States and including both males and females and blacks and whites. Results from Bavolek (1984) indicated that coefficient alpha for the subscales are as follows for adults: (1) Inappropriate Expectations of Children (.75), (2) Lack of Empathy Toward Children's Needs (.82), (3) Parental Value of Corporal Punishment (.85), and (4) Parent-child Role Reversal (.86). Also, results from Bavolek (1984) support different aspects of the validity of the AAPI. Specifically, results support theoretically predictable between-group differences, theoretically predictable relationships with other variables, and the factorial structure of the subscales.

Marital adjustment. Marital adjustment referred to the perceived level of satisfaction, cohesion, consensus, and affection with one's spouse. The Dyadic Adjustment Scale (DAS) (Spanier, 1976) was used to measure marital adjustment (see Appendix I). The DAS is a 32-item scale designed to measure the quality of dyadic relationships. Different DAS items have different anchors and rating scales, including 5-, 6-, and 7-point ratings scales, and two items rated as yes or no. A total summated score is computed based on all items, it has a potential range of values from 0 to 151, and higher scores indicate better marital adjustment.

Norms for married couples were used to transform raw scores to linear T-scores (Spanier, 1989). These were computed as follows, and this procedure provides the same transformation as if the tabled values from Spanier are used (Anastasi, 1988).

$T = 50 + [(x - \underline{M}) / \underline{SD}] (10)$

where: x = raw score

$\underline{M}$ = Scale/subscale Mean from Spanier (1989)

$\underline{SD}$ = Scale/subscale standard deviation from Spanier (1989).

These T-scores have a mean of 50 and a standard deviation of 10. Thus, the total scale score and all of the subscales have the same mean and standard deviation.

According to interpretive guidelines presented by Spanier (1989), T-scores between 60 and 70 are above average, those between 45 and 55 are in an average range, and scores between 44 and 34 are below average. For populations such as the present sample of couples without identified marital problems, T-scores below 20 to 25 indicate a clinical problem.

Over 1,000 studies have reported using the DAS (Touliatos, Perlmutter, & Straus, 1990). The DAS originally was tested on a sample of 218 married and 94 divorced persons (Spanier, 1976). Results from this study obtained a coefficient alpha of .96 for the total scale, and coefficient alphas ranging from .73 to .94 for the subscales. Also, results from this study supported different aspects of the validity of the DAS, including theoretically predictable relationships with other variables (e.g., the Locke-Wallace Marital Adjustment Scale) and discrimination between appropriate groups (e.g., married and divorced couples).

Verbal abuse. Verbal abuse referred to reported verbal abuse from one's spouse. The Partner Abuse Scale: Non-Physical (PASNP) was used to measure verbal abuse (Attala, Hudson, & McSweeney, 1994). The PASNP is a 25-item scale designed to measure the degree or magnitude of perceived non-physical abuse from a spouse or partner. Respondents are asked to rate each item on a 7-point scale ranging from Never (1) to All of the time (7). After reverse scoring the necessary items, a total score with a range from 0 to 100 is computed using the following formula, and higher scores indicate more perceived non-physical abuse:

$$S = [(\Sigma Y - N)(100)] / [(N)(6)]$$

where: S = Scale score

Y = Item scores

N = Number of completed items

The PASNP takes about five minutes to complete. It requires at least fifth grade reading skills (see Appendix J).

Only one study reported information concerning the psychometric properties of the PASNP (Attala, Hudson, & McSweeney, 1994). This study used a sample of 90 women known to have been abused and 50 nursing student controls. A coefficient alpha of .95 was reported for the abused sample, and a coefficient alpha of .98 was reported for the combined sample. Coefficient alpha was not reported separately for the control group. Also, support for the known-groups validity of the PASNP was provided by the fact that women in the abused group had significantly higher mean scores than women in the control group, and the correlation between group membership and PASNP scores was .64. In addition, using the recommended cutting score of greater than 15, a false positive rate of 12 percent and a false negative rate of 1.1 percent were obtained. Finally, support for the construct validity for the PASNP was demonstrated by its strong positive correlation with a measure of physical abuse, and moderate positive correlations with measures of stress and depression.

Family functioning. Family functioning referred to perception of family decision making, acceptance, and emotional support. The Family Assessment Device-General Functioning Subscale (FAD-GF) was used to measure family functioning. The FAD-GF is designed to measure "the overall health/pathology of the family". It is a 12-item subscale of the Family Assessment Device (Epstein, Baldwin, & Bishop; 1983; Miller, Epstein, Bishop, & Keitner, 1985; Kabacoff, Miller, Bishop, Epstein, & Keitner, 1990). Items are rated on a 4-point scale ranging from Strongly Agree (1) to Strongly Disagree (4). After reverse-scoring the necessary items a total score based on all 12 items is computed using a

mean summated score. Thus, the FAD-GF total score has a potential range of values from 1 to 4, and higher scores indicate more unhealthy functioning (see Appendix K).

Miller et al. (1985) proposed clinical cutting scores for the FAD-GF. A score of 2.0 provides a balance between sensitivity and specificity, .67 and .64, respectively. A score of 1.8 provides more sensitive but less specific cut-off, .87 and . 45, respectively. A score of 2.2 provides a less sensitive but more specific cut off, .50 and .73, respectively.

Coefficient alphas ranging from .83 to .92 have been reported for the FAD-GF (Epstein, Baldwin, & Bishop, 1983; Kabacoff et al., 1990). A one-week test-retest reliability of .71 was obtained for the FAD-GF (Miller et al.; 1985). Also results have supported different aspects of validity of the FAD-GF, including theoretically predicted between-group differences and relationships with other variables (Epstein, Baldwin, & Bishop, 1983; Miller et al., 1985; Kabacoff et al., 1990).

Social support. Social support referred to perceived level of instrumental and emotional help available from family and friends. The Social Support Behavior Scale (SSB) (Vaux, Burda, & Stewart, 1986; Vaux, Riedel, & Stewart, 1987) was used to measure social support because it provides information about multiple relevant dimensions of instrumental and emotional social support. The SSB (see Appendix L) is a 45-item scale designed to measure social support from friends and family. Items are rated on a 5-point scale ranging from No one would do this (1) to Most family members/friends would certainly do this (5). Total scores are computed for both friends and family, and higher scores indicate more social support. Mean total and subscale scores are computed for both friends and family. Each scale has a potential range of values from 1 to 5 with higher

scores indicating more social support. The subscale names and the number of item for each subscale are as follows: (1) emotional (10 items/range10-50), (2) socializing (7 items/range 7-35), (3) practical assistance (8 items/range 8-40), (4) financial assistance (8 items/range 8-40), (5) advice/guidance (12 items/range12-60). Total scores range from 45 to 225. The SSB takes approximately 20 minutes to complete. Vaux, Riedel, and Stewart (1987) did not report the reading level for the SSB. Evaluation of the SSB using Microsoft Work determine the Flesch-Kincaid grade level of 5.5.

Vaux, Riedel, and Stewart (1987) reported mean alphas for family and friend support subscales to be .90 and .89, respectively, for a sample of African-American students and .86 and .83, respectively, for white students. They examined content validity of the subscales by having judges classify items by subscale dimensions. Results indicated that the vast majority of items were correctly classified. Results of confirmatory factor analysis also provided support for the subscale structure of the SSB. Construct validity was supported by theoretically predicted correlations with other valid measures of social support, and thorough having subjects complete the SSB while taking different predetermined roles.

Foster parent role understanding. Foster parent role understanding referred to foster parents' perception of what foster parents should do when working with foster children and agencies. Role understanding was measured with the Foster Parenthood Role Performance Scale (Le Prohn, 1993) (see Appendix M). The FPRP is a 40-item scale, with 36 scored items. It was designed to measure foster parents' perceptions of their responsibilities. Each item indicates a potential foster parent task, and respondents are

asked to rate their perceived degree of responsibility for that task on a visual analogue scale ranging from 0% foster parent's responsibility to 100% foster parent's responsibility. The following five mean summated subscale scores are computed, each subscale has a potential range of values from 0 to 100, and higher scores indicate greater perceived responsibility: (1) Birth family facilitator (8 items), (2) Assist with social/emotional development (10 items), (3) Agency partner (6 items), (4) Parenting (9 items), and (5) Spirituality (3 items).

Only one study reported information concerning the psychometric properties of the FPRP (Le Prohn, 1993; 1994). This study used a sample of 82 relative foster families and 98 non-relative foster families licensed by the Casey Family Program. All subjects were providing foster care placement for children at the time of the study. An exploratory factor analysis using varimax rotation resulted in the following subscales and coefficient alpha for each subscale: (1) Birth family facilitator (.89), (2) Assist with social/emotional development (.81), (3) Agency partner (.88), (4) Parenting (.77), and (5) Spirituality (.60). No validity evidence was reported for the FPRP, however, several theoretically predicted differences between relative and non-relative foster parents were obtained.

Foster Care Worker Assessment of Foster Parents

Foster parenthood potential. In this study, foster care workers rated foster parents on anticipated level of performance on tasks of fostering. Foster parent potential was measured using the Potential for Foster Parenthood Scale-Revised (PFPS-R). The PFPS-R is a 76-item scale designed for the larger study. Each item is rated on a 6-point scale for each potential foster parent ranging from (1) Very unlikely (0 - 10%)to (6) Very

likely (90-100%). A total mean summated score is computed based on all items. Thus, the PFPS-R total score has a potential range of values from 1 to 6, and higher scores indicate a greater potential for providing quality family foster care (see Appendix N).

The PFPS-R is a revised version of the PFPS (Touliatos & Lindholm, 1977; 1981), which was based on the 1975 Child Welfare League of America's Standards for Foster Care Service (CWLA, 1975). Items for the PFPS-R were derived from the 1995 Child Welfare League of America Standards of Excellence for Foster Family Care Services (CWLA, 1995), which served as a basis for content validity of this measure.

In addition, after constructing a comprehensive pool of items from the 1995 CWLA Standards, family foster care workers in each of the three locations for data collection gave input into the selection of final items and their wording. Approximately 20 workers and their supervisors participated in group meetings to review items with research team members.

Role expectations for foster parents. Foster care workers provided information about their perceptions of role responsibilities for foster parents. The FPRP was modified for workers to indicate perceived levels of foster mothers' and foster fathers' role involvement on the five subscales.

Foster Family Records

Extensive demographic data were abstracted from the "Application for Parenting", the "Family Assessment Profile", and "My Family Today" completed by participating foster parents as part of the foster parent certification process. Foster mothers and foster fathers complete the "Family Assessment Profile" independently. In addition to

demographic data, other data relevant to foster parent exits were abstracted from the family "Family Assessment Profile".

Data were abstracted from foster home records using an Access program written by a member of the research team specifically for the larger study. Use of the program assured systematic and uniform collection and entry of data from foster home records.

Data were available for 47 of the 52 approved study participants: 15 from Davidson County and 16 each from Knox and Hamilton Counties. Five records from Davidson County were not available for abstraction. Incomplete case records resulted in some missing data. Variables measured from items on foster parent applications and the percent of data available for each variable are presented in Table 3.16.

Telephone Interviews

Foster parents were interviewed by telephone six months after they completed training. During the follow-up interview, the foster parent was asked if the family did or did not plan to continue to foster and their reason for this decision. This was the outcome measure of primary importance. Intent to exit was measured with the question "Are you planning to continue providing placements for foster children with DCS?" Responses were rated on a 3-point scale: (1) no, (2) unsure, and (3) yes. To further explore reasons for decisions to foster, information was obtained from respondents about other dimensions of foster parenting thought to influence early exits. Table 3.17 presents these variables and corresponding items on the telephone interview.

Table 3.16. Variables Collected from Foster Parent Records

Variable	Data Source	Item	% Available
Reason for fostering	Family Assessment Profile	" What gave you the idea to pursue foster care or adoption at this time".	
		Foster Mothers	78.85
		Foster Fathers	77.42
Social support	Family Assessment Profile	"If your family were in some kind of crisis (financial, emotional, health, etc.) to whom would you turn for help?"	84.62
Employment Status	Application for Parenting	"Occupation"	
		Foster Mother	86.53
		Foster Father	87.01
Family Composition	Application for Parenting	"Others in Family" "Children in Family"	86.54
Year Married	My Family Today	Date MAPP Training Ended – Date of Marriage	90.38
Total Family Income	Application for Parenting	"Applicant Annual Income" + "Co-Applicant Annual Income"	76.92
Religious Preference	Application for Parenting	"Religious Denomination	
		Foster Mothers	80.77
		Foster Fathers	80.64

Table 3.17. Variables Measured During Follow-up Interviews with Foster Parents

Variable	Interview Item(s)
Intent to Exit	G1, G2, G3, G4, G5
Satisfaction with Agency	E3, E4, E5
Training	D1, D2, D3
Interaction with Other Foster Parents	D4
Placement Experiences	C1, C2, C3
Normative Family Changes	F1, F2, F3
Effects of Fostering on the Foster Family	F4, F5, F6, F7

Interviews have several advantages as a method for data collection (Judd, Smith, & Kidder, 1991). First, interviewers can ask open-ended questions with respondents to gather more specific responses. Investigators can notice and correct, misconceptions, and probe for more information to vague responses. Second, interviewers can administer items in a consistent manner. Third, interviews attain higher response rates than mailed surveys. Face-to-face interviews used in previous research with foster parents have yielded high response rates (Cautley, 1980, Cohon & Cooper, 1993; Dando & Minty, 1987; Hampson & Tavormina, 1980).

Several studies with foster parents have used telephone interviews as a method for data collection (Chamberlain, Moreland, & Reid, 1991; LeProhn, 1993; Ryan, 1985). A specific advantage of telephone interviews is the ability to cover large geographic areas in a time effective manner. Though telephone interviews share the above stated advantages of face-to-face interviews, there are disadvantages that can compromise data quality (Judd, Smith, & Kidder, 1991). Interviewer style can influence responses. The interviewer does not have non-verbal cues for indicating if misunderstandings occur. Consistent administration of interviews and careful wording of interview questions can minimize these problems.

In this study, foster parent applicants were interviewed by telephone six months after completing MAPP training if they: (1) agreed to participate in the larger study, (2) completed the battery of measures administered during MAPP, and (3) were approved as foster parents by DCS. Foster parents were called at home, generally in the evening and on weekends. This investigator conducted the interviews. If foster parents agreed to

participate, but were not able to complete the interview at the time, an appointment was made to call back. For two-parent foster families, one member of the foster parent couple served as the respondent. The telephone interview is presented in Appendix O.

Telephone interviews were completed with 96.15 percent of approved foster homes. Two approved foster parents moved from the area without giving forwarding addresses. Interviews were approved to began in February, 1997. Ten families (19.23 percent) completed MAPP in April, 1996; five families (9.62 percent) finished training in May, 1996; and eight (15.39 percent) were recruited from training groups that ended in June, 1996. Though the time between training and follow-up interviews for these families was longer than 6 months, to exclude these families would have lost valuable data about approved foster families and dramatically decreased the sample size. The mean time between completion of MAPP training and completion of interviews for the total sample of approved foster parents was 229 days (SD = 50.46). The mean number of days between MAPP training and follow-up interviews for families completing MAPP after June, 1996 was 188 days (SD = 7.30). Foster mothers were respondents for 84.00 percent of interviews (N = 42). Foster fathers were the source of data for 16.00 percent of cases (N = 8).

To summarize, the present study collected data on 52 newly approved foster families. Baseline measures of foster parent characteristics were administered during pre-service training. Foster care workers assessed new foster parents potential as service providers. Additional data on foster parents were collected from family foster home

records, and during follow-up interviews with foster parents. Results of the analyses are presented in the following chapter.

Chapter 4: Data Analysis

A flow chart depicting the data analysis process is shown in Figure 4.1.

Missing Data

Foster Parent Assessment Data

A small amount of data were missing on item responses for the assessment measures. In addition, it was not appropriate for single foster parents and those living alone to complete some measures, so data were not collected. The following discussion addresses procedures for handling missing data on item responses and for single foster families.

Scoring scales/subscales with missing item responses. Scales and subscales with less than 80 percent completed items were considered missing. Those with more than 80 percent completed items were scored. In no case did an author of one of these measures suggest that a higher percentage of items was necessary to score the scale.

With a few exceptions noted below, raw scores for the scales were summated scores, computed by summing a set of item responses, or mean summated scores, computed by summing a set of item responses and then dividing this sum by the number of scale items. When there were missing item responses, both of these methods would result in scales with a different potential range of values depending on the number of completed items. Therefore, for all of these scales except the PASNP, which has its own special scoring formula designed to handle missing item responses, modified scoring formulas were used.

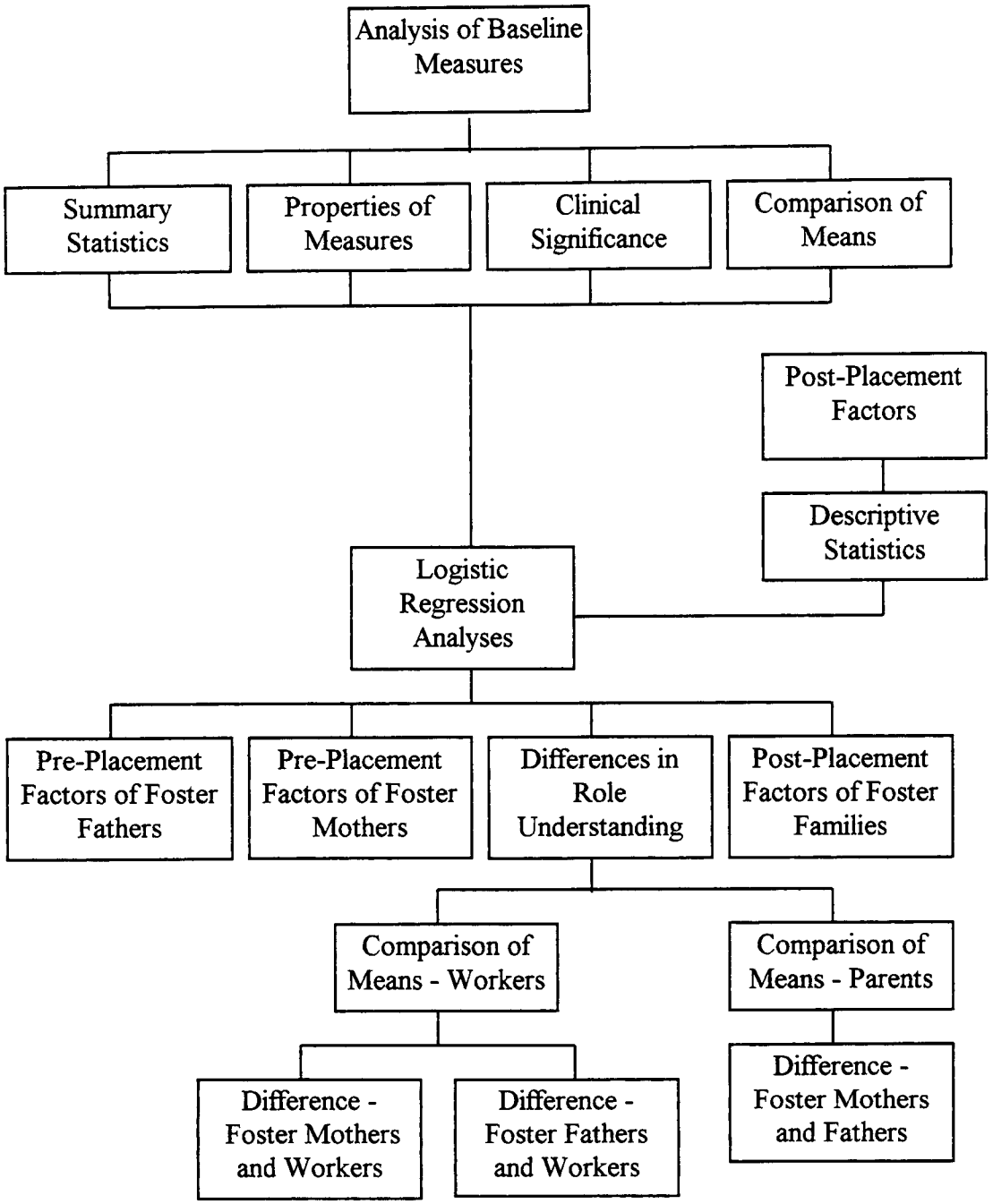


Figure 4.1. Data Analysis Flow Chart

Modified scoring procedures. The DAS and AAPI were scored by computing summated scores. When the scales had at least 80 percent completed items, the following scoring formula was used to compute the raw scale score, after reverse scoring items where applicable (Orme & Gillespie, 1987):

$S = (\Sigma Y / N) (T)$

where: S = Scale score

Y = Item scores

N = Number of completed items

T = Total number of items

This formula is a simple summation of item responses when there are no missing item responses.

The FAD-GF, BSI, FRFP, PFPS-R and SSB were scored by computing a mean summated score. The following variation in the above formula was used to compute raw scale scores, after reverse scoring items where applicable, when a respondent completed at least 80 percent of the items:

$S = (\Sigma Y / N)$

This formula is reduced to a simple mean item response when there are no missing item responses.

Conditionally missing data. There were no data for single foster parents' spouses. Also, for a single foster parent, the DAS and the PASNP are not applicable so data were not collected. Similarly, for single foster parents living alone, the FAD-GF was not applicable and was not completed by this group. Finally, if foster care workers had not

conducted at least two home visits, the PFPS-R was not completed. Cohen and Cohen (1983) have referred to such data as conditionally missing.

Conditionally missing data pose problems for data analysis. To exclude subjects with conditionally missing data from analysis would result in loss of cases and reduction of statistical power. Similarly, to exclude variables on which some subjects had conditionally missing data, in order to include these subjects in analysis, might result in misspecification of the model.

A procedure recommended by Cohen and Cohen (1983), and illustrated by other authors (Orme & Reis, 1991), allows for inclusion of subjects with conditionally missing data and variables on which these subjects have missing data. Coded missing data involves mean substitution for subjects having missing data, creation of a dichotomous variable indicating the presence or absence of missing data for the variable (0 = not missing, 1 = missing), and (3) inclusion of this variable in statistical analysis.

There are two key points in the interpretation of a regression analysis with coded missing data. First, a mean substituted for missing data is not an estimate for missing data. The mean is a convenience that allows for inclusion of the entire sample. Estimates of regression parameters for substantive variables are based only on subjects for whom data are available. Second, the test of a regression coefficient for a missing data variable provides a test of the difference between dependent variable means for subjects with and without missing data on the particular variable, after controlling for other variables in the model. Accordingly, it indicates the extent to which data for a substantive variable are missing randomly in relation to the dependent variable after controlling for other variables

in the regression model. This provides important information about differences between one and two-parent foster families, for example.

In this study, missing data due to single parenthood was represented by a single variable, married (0 = single, 1 = married). Missing data on the FAD-GF, due to single parents living alone, were represented by another dichotomous variable, one-person household (0 = no, 1 = yes). A variable also was created to represent missing data for foster mothers on the PFPS-R (0 = no, 1 = yes).

Descriptive Analysis of Approved Foster Parents' Experiences

Data from foster parent applications and from follow-up interviews provided descriptive information about new foster parents' experiences during the first six months. This section presents information about reasons for fostering, sources of social support, foster parent preparation and training, placement utilization, and reasons for intending to leave foster care.

Reasons for Fostering

Forty-seven foster mothers and 23 foster fathers completed statements about why they wanted to be foster parents. As shown in Table 4.1, the most common reasons for becoming a foster parent concerned wanting to parent a child (30.35 percent of foster fathers and 25.53 percent of foster mothers). For foster mothers, this was followed by a general interest in helping others (19.16 percent of foster mothers). The second most stated reason foster fathers gave for applying to the program was because of their wives'

Table 4.1. Reasons for Fostering

	Approved Foster Fathers (N = 23)		Approved Foster Mothers (N = 47)	
Stated Reason	f	%	f	%
Personal Experience				
Abandoned as a child			1	2.13
Familiar with Foster Care				
Enjoy fostering	1	4.35	4	8.51
Family/friends are foster parents			2	4.26
Interest in a child needing care				
Know a specific foster child			1	2.13
Know a child in need	1	4.35	1	2.13
Specific Interest in Parenting				
Want a child to parent	7	30.35	9	19.15
Companion for my child			3	6.38
General Interest in Parenting				
Child needs parental love			1	2.13
Like/love children	1	4.35	2	4.26
Interest in Helping Others				
Great need	1	4.35	4	8.51
Goal			1	2.13
Help children	1	4.35	1	2.13
Help society			1	2.13
Anticipate a rewarding experience			1	2.13
Make a difference			1	2.13
Have Resources for Fostering				
Share God's blessing			1	2.13
The timing is good	1	4.35	2	4.26
Financially affordable			1	2.13
Extra bedroom and love	1	4.35		
Spouse's Interest				
Husband is retired			1	2.13
Wife's desire	5	21.74		
Lead to Adoption	1	4.35	1	2.13

desires to be foster parents. Over one-fourth of foster parent couples (26.09 percent) applied because of one spouse's interest in the program.

Though approximately one-third of foster parents described their interest in fostering as related to their interest in parenting, 40 percent of foster parents were approved for a dual category of foster and adopt. The percentage of foster parents applying to adopt was greater than the percentage indicating a general interest in parenting as a reason for fostering. Only one family stated adoption was their reason for fostering. Foster parents also began fostering because of their interest in providing help to children and their community. Other stated motives included knowing children in foster care and seeing themselves as having the resources to be able to foster.

Training

All foster mothers and 94 percent of foster fathers reported attending at least eight of the 10 MAPP training sessions as preparation for fostering. Mean attendance for foster mothers was 9.10 sessions (SD = 2.01). Thirty-eight percent of foster fathers attended all sessions (M = 8.24, SD = 2.78). Only one foster parent reported attending additional training during the six months following MAPP. This was explained in part by how inservice training is scheduled for the service regions. Additional training resources were not readily available for all new foster parents during their first six months.

Sources of Social Support

Forty-four foster families completed information about sources of social support. Of these families, 70.45 percent responded that they would seek help from family, 18.18

percent indicated they would turn to their church for assistance, and 6.82 said they would rely on friends for help.

Placement Utilization

The 52 foster homes in this study provided 115 foster care placements for children and youth between infancy and 18 years of age (M = 5.95, SD = 4.44). More than 50 percent of children placed with families were five years old or younger.

When they were contacted for follow-up interviews, 59.62 percent of foster parents reported having foster children living with them. Seventy-five percent reported having provided placements for at least one child (M number of placements = 2.73, SD = 2.45). The distribution of children in foster homes is presented in Table 4.2. During the first six months of fostering 30.77 percent of foster homes provided for one foster child, 11.54 percent had two children, and 11.54 percent took care of three foster children. A smaller number of foster homes (13.46 percent) provided emergency placements for children. The number of placements during a six month period for these homes ranged from five to 11.

Table 4.2. Number of Children in New Foster Homes

Number of Children in Home	f (N=52)	%
0	13	25.00
1	16	30.77
2	15	28.85
3	5	9.62
4	2	3.85
5	1	1.91

Intent to Leave Foster Care

When asked about their intent to continue providing placements, 28.85 percent of foster parents indicated that they would not provide other placements, 17.30 percent were unsure, and 53.85 percent planned to continue to take children. Stated reasons for intending to leave foster care given by foster parents categorized as " at risk" are listed in Table 4.3.

To create a dichotomous variable for logistic regression analysis, respondents planning to continue providing placements were categorized as not at risk and coded as 0. Those who answered as unsure or no were categorized as at risk and were coded as 1. Forty-six percent of homes were categorized as at risk for exit.

Table 4.3. Stated Reasons Placing Foster Parents at Risk for Exit

	Intent to Continue Fostering		
Reason	No (N = 13)	Unsure (N = 9)	At Risk (N = 22)
Pregnancy	1		1
Adopting a Child	1	1	2
Want to Adopt	1	1	2
Providing Placement for a Specific Child	3	1	4
Lack of Communication with Agency	1	2	3
Difficulty Arranging Day Care	1	1	2
Financial Cost of Fostering		2	2
Unprepared to Deal with Child's Behavior	3		3
Conflict Between Children	1		1
Liabilities of Contact with Birth Families	1		1
Separation from Child		1	1
Total	13	9	22

Summary of Assessment Measures

The battery of assessment measures provided information about foster mothers and fathers in the study sample. Summary statistics were used to describe scores for foster fathers and foster mothers on the measures. Measures also identified foster parents' strengths and limitations along the assessed dimensions. Examination of mothers' and fathers' scores in foster parent couples gave indications of similarities and differences between parents in foster families. Finally, correlations among foster parent scores on the measures considered relationships among measures in the assessment battery.

Summary Statistics

Means and standard deviations of assessment measures for approved foster fathers and mothers are presented in Table 4.4. Of the predictor variables, only the PFPS-R had missing data, other than conditionally missing data. Mean scores on the measures fell within non-problematic ranges. With the exception of the PFPS-R, there was no evidence of floor or ceiling effects when distributions of scores were examined. The measures were able to identify foster parents with varying levels of an attribute. Worker ratings on the PFPS-R tended to fall in the higher ranges of the scale. This measure was completed after the second home visit. For families who were not approved, the second home visit often was not completed. Foster care workers assessed families they were most likely to approve. A sample of approved foster parents would be expected to have higher ratings for potential.

Table 4.4. Summary Statistics for Measures Administered During MAPP Training

	Approved Foster Fathers			Approved Foster Mothers		
Measure	N	M	SD	N	M	SD
Social Support Behavior Scale	31			52		
Total Family		4.38	.37		4.44	.56
Total Friends		4.13	.60		4.22	.59
Dyadic Adjustment Scale[1]	31	50.24	6.05	31	51.93	5.98
Family Assessment Device-General Functioning Scale	31	1.62	.37	42	1.48	.34
Partner Abuse Scale: Non-Physical	31	7.25	9.01	31	4.41	4.31
Brief Symptom Inventory	31			52		
Global Severity Index (Raw Scores)	31	.29	.20	52	.33	.28
Global Severity Index (T-Score Equivalent)	31	52.84	8.29	52	50.35	8.57
Adult Adolescent Parenting Inventory[2]	31			52		
Inappropriate Developmental Expectations		6.10	1.81		6.54	1.70
Lack of Empathy		5.55	1.90		5.92	1.64
Parental Value of Corporal Punishment		6.61	1.67		7.00	1.74
Parent-Child Role Reversal		6.26	2.07		6.39	1.73
Foster Parent Role Performance Scale	31			52		
Birth Family Facilitator		57.76	17.29		59.47	22.22
Social/Emotional Development		86.48	11.39		87.11	8.15
Agency Partner		26.05	26.12		31.13	25.23
Parenting		74.86	17.54		79.85	13.12
Spirituality		74.17	15.96		75.72	17.09
Potential for Foster Parenthood Scale – Revised	26	5.26	.49	43	5.42	.40

[1]Reported as T-scores
[2] Reported as sten scores

Foster parents in this sample tended to hold parenting beliefs that supported more effective parent-child interactions. Foster parents rated themselves highest on the AAPI subscale for valuing alternatives to corporal punishment, reflecting congruence with agency policies for discipline of foster children. MAPP trainers inform foster parents of the agency's policies and provide information about effective discipline practices as part of training. Applicants who insist on using corporal punishment are not approved.

Results of the FPRP scale provided an indication of how new foster parents saw their role with foster children. They identified foster parents as having the most responsibility in providing for children's socioemotional needs (foster fathers $\underline{M}$ = 86.48, $\underline{SD}$ = 11.39, foster mothers $\underline{M}$ = 87.11, $\underline{SD}$ = 8.15) and for parenting (foster fathers $\underline{M}$ = 74.86, $\underline{SD}$ = 17.54, foster mothers $\underline{M}$ = 79.85, $\underline{SD}$ = 13.12). They considered foster parents as having the least responsibility working with the agency (foster fathers $\underline{M}$ = 26.05, $\underline{SD}$ = 26.12, foster mothers $\underline{M}$ = 31.13, $\underline{SD}$ = 25.23).

Identification of Clinical Problem Areas

Though most foster parents scored in non-problematic ranges, the battery of assessment measures proved to be useful for identifying foster parents with clinical problem levels that could affect their abilities as foster parents (see Table 4.5). In this sample, 16.13 percent of foster fathers and 11.54 percent of foster mothers were classified as having mental health problems. Foster fathers (16.13 percent) also reported problematic levels of verbal abuse from their spouses. Twenty five percent of foster fathers and 19 percent of foster mothers indicated parenting attitudes that placed them at

Table 4.5. Foster Parents with Scores in a Clinical Range

	Foster Fathers (N =31)		Foster Mothers (N = 52)	
Measures	f	%	f	%
Family Assessment Device/General Functioning				
Mean score > 2.0	4	12.90	3	5.77
Brief Symptom Inventory				
GSI T-score ≥ 63	5	16.13	6	11.54
Partner Abuse Scale: Non Physical				
Summated Score > 15	5	16.13	1	1.92
Adult Adolescent Parenting Inventory				
Sten Score ≤ 4				
Inappropriate Developmental Expectations	3	9.68	7	13.46
Lack of Empathy	8	25.81	10	19.23
Value of Corporal Punishment	3	9.69	3	5.77
Parent-Child Role Reversal	7	22.58	8	15.39

risk for abusive parent-child relationships on at least one AAPI subscale. The most problematic areas were empathy for children (25.81 percent of foster fathers and 19.23 percent of foster mothers) and having appropriate parent-child roles (22.28 percent of foster fathers and 15.39 percent of foster mothers).

Differences in Foster Parent Couples

Most data obtained in foster parent research has come from foster mothers. Either little information has been available from foster fathers, or foster mothers and fathers have been treated as a group. A comparison of foster mothers and foster fathers in two-parent families highlighted the contribution of fathers in families who foster. Two questions were of concern: (1) if foster fathers and foster mothers differed along dimensions predicting

risk for exit and (2) if expected relationships existed between foster mothers and foster fathers.

Table 4.6 presents results of an analysis to evaluate differences between foster mothers and foster fathers in foster parent couples. Paired t-tests found statistically significant differences between foster mothers' and fathers' scores on the FAD-GF. Differences on the DAS neared statistical significance ($p = .055$). Results suggested that foster parents were not in agreement in regard to perceptions about these family dimensions. Foster fathers rated family functioning and marital satisfaction lower than their wives. New foster parent couples did agree about how they saw their roles as foster parents. However, as measured using the PFPS-R, foster care workers anticipated mothers would perform foster parent tasks better than their spouses ($t = -4.07$, $p < .001$).

Correlations were computed to explore relationships between foster mothers' and foster fathers' scores on the assessment measures. Results of the correlation analysis shown in Table 4.6 found statistically significant correlations between foster mothers and foster fathers on most measures. Notable exceptions were views about social support from family, non-verbal partner abuse, the value of corporal punishment, and parent roles with children and with foster children. The lack of statistically significant relationships may indicate that parents' attitudes are relatively independent of their spouses' views in these areas. However, with the small sample of foster parent couples, only effect sizes larger than .50 would be detected.

Table 4.6. Comparison of Means for Foster Parent Couples

	Foster Parent Couples							
	Fathers		Mothers				Correlation	
Measure	M	SD	M	SD	t	p	r	p
Social Support Behavior Scale								
Family Total	4.38	.37	4.46	.47	.89	.385	.24	.184
Friends Total	4.13	.60	4.13	.65	.01	.990	.38	.036
Dyadic Adjustment Scale[1]	50.24	6.05	51.93	5.98	-2.00	.055	.70	.000
Family Assessment Device-General Functioning Scale	1.62	.37	1.46	.34	2.31	.028	.45	.011
Partner Abuse Scale: Non-Physical	7.25	9.01	4.41	4.31	1.66	.107	.12	.528
Brief Symptom Inventory								
Global Severity Index	.33	.29	.29	.20	1.12	.270	.67	.000
Global Severity Index T-Score Equivalent	52.84	8.29	50.23	9.15	1.70	.100	.52	.003
Adult Adolescent Parenting Inventory[2]								
Inappropriate Expectations	6.10	1.81	6.26	1.37	-.72	.475	.73	.000
Lack of Empathy	5.55	1.90	5.74	1.67	-.57	.576	.44	.014
Parental Value of Corporal Punishment	6.61	1.67	6.61	1.84	.00	1.000	.24	.187
Parent-Child Role Reversal	6.26	2.07	6.39	1.56	-.31	.759	.21	.268
Foster Parent Role Performance Scale								
Birth Family Facilitator	57.72	17.29	57.06	21.29	.17	.869	.37	.042
Social/Emotional Development	86.48	11.40	86.91	7.88	-.20	.840	.31	.095
Agency Partner	26.05	26.12	29.47	26.45	-.77	.458	.56	.001
Parenting	75.32	17.63	81.83	11.07	-1.9	.071	.15	.431
Spirituality	74.17	15.96	75.05	18.97	-.29	.777	.53	.002
Potential for Foster Parenthood Scale - Revised	5.26	.44	5.43	.34	-4.07	.000	.85	.000

[1]Reported as T-scores

[2] Reported as sten scores

Interrelationships Among Assessment Measures

Correlations among measures were examined for foster mothers (N = 52) to determine if patterns of intercorrelations were those expected from theories about parenting. Foster mothers were chosen for this analysis because of the sample size. With a sample of only 31 foster fathers, the odds of finding significant results with medium effects sizes was less than 50-50. With power set at .80, medium effect sizes would be detected for the sample of 52 foster mothers. Analysis considered how subscales on measures used in the main analysis correlated and the relationships among measures in the assessment battery.

As seen Table 4.7 and Table 4.8, foster mothers' scores on the subscales of the FPRP and the AAPI were positively correlated. The family and friends subscales of the

Table 4.7. Correlations of FPRP Subscales for Foster Mothers (N = 52)

	Agency Partner		Birth Family Facilitator		Parenting		Socioemotional Development		Spirituality	
	r	p	r	p	r	p	r	p	r	p
Agency Partner	1.00		.69	.000	.55	.000	.39	.005	.48	.000
Birth Family Facilitator	.69	.000	1.00		.68	.000	.58	.000	.45	.000
Parenting	.55	.000	.68	.000	1.00		.67	.000	.55	.000
Socioemotional Development	.39	.005	.58	.000	.67	.000	1.00		.45	.001
Spirituality	.48	.000	.45	.000	.55	.000	.45	.001	1.00	

Table 4.8. Correlations of AAPI Subscales for Foster Mothers (N = 52)

	Inappropriate Lack of Expectations		Lack of Empathy		Value of Corporal Punishment		Parent-Child Roles	
	r	p	r	p	r	p	r	p
Inappropriate Expectations	1.00		.51	.000	.47	.000	.66	.000
Lack of Empathy	.51	.000	1.00		.54	.000	.67	.000
Value of Corporal Punishment	.47	.000	.54	.000	1.00		.44	.001
Parent-Child Roles	.66	.000	.67	.000	.44	.001	1.00	

SSB also correlated positively (r = .44, p = .001). Correlational levels did not indicate that subscales measured the same constructs.

Statistically significant relationships were found between AAPI subscales and other assessment measures (see Table 4.9 and Table 4.10). Scores on the parent-child roles were related positively to agency partnership (r = .44, p = .001) birth family facilitator subscales (r = .41, p = .002) of the FPRS. Foster mothers' perceptions of responsibility with the agency and with foster children's birth families increased as they looked less toward children as sources of emotional comfort. GSI scores related negatively to the empathy and value of corporal punishment subscales (r = -.37, p = .007 and r = -.46, p =.001, respectively). As mental health problems were evident, foster mothers had less empathetic

Table 4.9. Correlations Between AAPI Subscale Scores and FPRS, GSI, DAS, FAD, PASNP, and SSB Scores for Foster Mothers (N = 52)

	AAPI Subscales							
	Appropriate Expectations		Empathy		Value of Corporal Punishment		Parent Child Roles	
	r	p	r	p	r	P	r	p
FPRS								
Agency Partner	-.05	.716	-.21	.128	.09	.527	.44	.001
Birth Family	-.01	.962	-.27	.053	-.14	.320	.41	.002
Facilitator								
Parenting	-.05	.719	-.13	.335	-.13	.369	-.17	.242
Socioemotional	.04	.779	-.13	.353	-.04	.772	-.24	.082
Development								
Spirituality	.27	.054	.11	.441	-.11	.435	.01	.931
GSI	-.09	.520	-.37	.007	-.46	.001	-.25	.075
DAS	-.06	.688	.10	.503	.08	.560	-.08	.580
FAD	.09	.894	-.26	.066	-.25	.069	-.14	.340
PASNP	-.05	.744	-.35	.010	-.47	.001	-.23	.095
SSB								
Family Total	.06	.665	.01	.926	.06	.683	.12	.417
Friends Total	.23	.095	.21	.129	.23	.105	.17	.232

Table 4.10. Correlations between Assessment Measures for Foster Mothers (N = 52)

	GSI		FAD		DAS		PASNP		SSB/Family		SSB/Friends	
	r	p	r	p	r	p	r	p	r	p	r	p
GSI	1.00		.35	.011	.26	.064	.48	.000	-.23	.098	-.32	.021
FAD	.35	.011	1.00		-.47	.000	.35	.010	-.41	.002	-.42	.002
DAS	.261	.064	-.47	.000	1.00		.36	.004	.25	.080	.36	.007
PASNP	.48	.000	.35	.010	.36	.004	1.00		-.24	.088	-.18	.212
SSB/ Family	-.23	.098	-.41	.002	.25	.080	-.24	.088	1.00		.44	.001
SSB/ Friends	-.32	.021	-.42	.002	.37	.007	-.18	.212	.44	.001	1.00	

awareness of children's needs and placed more emphasis on the use of corporal punishment. As foster mothers' reports of verbal abuse increased, evidenced by higher PASNP scores, their empathy towards children's needs decreased ($r = -.35$, $p = .010$) and the value they saw in corporal forms of discipline became more problematic ($r = -.47$, $p = .001$).

Correlations also were evident among other measures. A positive correlation was found between mental health problems and verbal abuse ($r = .48$, $p < .001$). Foster mothers' reports of verbal abuse increased as they reported more emotional distress. Those with higher GSI scores indicated less support from friends ($r = .32$, $p = .021$). The negative correlation between FAD and DAS scores ($r = -.47$, $p < .001$) indicated foster mothers higher reported levels of family functioning, as indicated by lower FAD scores, was positively related to greater levels of marital adjustment. In addition, as family functioning decreased, so did the availability of social supports from family ($r = -.41$, $p = .002$) and friends ($r = -.42$, $p = .002$).

Logistic Regression Analysis

The primary objective of the study was to identify predictors of new foster parent exits. Logistic regression modeling is the analysis of choice with dichotomous independent variables (Menard, 1995). It is being used increasingly in social work research (Morrow-Howell & Proctor, 1992), in research with families (Demaris, 1995) and to analyze foster parent data (Campbell & Downs, 1987; Rindfleisch, Bean, & Denby, 1998).

In logistic regression a model is fit to a dichotomous dependent variable based on the assumption that the probability of any particular observation being in the category coded as 1 can be calculated using the coefficients in the model, the values of the independent variables, and the constant. Predictor variables can be entered hierarchically in sets. Overall model fit is tested using a likelihood-ratio chi-square test. Finally, observed and predicted values are compared to determine model fit by calculating kappa to indicate the percentage of chance-corrected agreement (Orme, 1986).

Logistic regression analysis was conducted with the sub-sample of approved foster mothers. The number of foster fathers in the approved foster parent sample was too small to test a combined model or a model for foster fathers. Analysis of data tested three models for predicting new foster parents at risk for exit: (1) the effects of pre-placement predictor variables, (2) the effects of post-placement factors, and (3) the effect of differences in role expectations between new foster parents and foster care workers.

Procedures for Model Testing

In order to test hypotheses, predictor variables were entered as a set using forced entry, forward stepwise entry, and backward stepwise entry. Forward inclusion uses

computer generated algorithms to select variables for inclusion in the model. At each step, the variable with the smallest significance level is entered in the model. All variables in the forward stepwise block are then examined to see if they still meet removal criteria (Cohen & Cohen, 1983). One disadvantage of stepwise entry is that it capitalizes on random variation in the data and produces results that are idiosyncratic and difficult to replicate with other samples (Cohen & Cohen, 1983). A second disadvantage is that variables appear as significant only when other variables in the model are held constant. In backward elimination, variables are already in the model so there is less risk of failing to find a relationship that exists. Menard (1995) notes that results of forward inclusion and backward elimination usually will be the same, but when they differ, backward elimination may identify relationships otherwise missed.

Coefficients to be removed from the model were tested with the Wald statistic and with the likelihood-ratio test. The likelihood-ratio test estimates the model with each variable eliminated in turn and looking at the log likelihood when the variable is deleted (Nousis, 1994). Results did not differ based on the test statistic used for inclusion of variables. Results of model tests using the Wald statistic are reported.

The level of statistical significance for inclusion of variables in the model was set at .10. Setting a higher alpha as criteria for inclusion increases the risk of reporting relationships that do not exist. However, it increases the probability of correctly detecting the effects of variables under study. Orme and Tolman (1986) have outlined a justification for setting higher alpha levels for social work research when sample sizes are small and errors in failing to reject a null hypothesis are as important as erroneous rejection of the

null hypotheses. They have suggested a combined strategy increasing statistical power by determining estimates of population effect sizes from previous research, setting higher alpha levels, and decreasing variability in the study by using measures with less error.

The number of new foster parents approved during the study period limited the sample size for this study. However, results of this study contribute to a developing knowledge base about foster parenthood, as what is learned can be directly applied to retention activities with new foster parents as well as be tested in future research. Failing to identify significant risk factors for early exit limits the scope of interventions to address areas that may be critical for keeping new foster parents in the program. Missing relevant relationships is more detrimental than directing attention toward areas that are not associated with exits.

Analysis of Pre-approval Predictor Variables

Predictor variable coding. Foster mothers' age and scores on individual and family measures were treated as quantitative variables. MAPP training site was effects coded. All other categorical variables were dummy coded (Cohen & Cohen, 1983). Educational level was dummy coded with less than high school as the reference category. Dichotomous variables were coded 0 and 1 as indicated in Table 4.11.

Table 4.11. Coding for Dichotomous Variables for Analysis of Pre-Placement Predictors

Variable	Coded as 0	Coded as 1
Marital Status	Not Married	Married
One Parent Household	Yes	No
Race	Caucasian	African-American
Program	Foster Care	Foster Care and Adoption

Model comparison. The model tested the hypotheses that each pre-approval predictor variable would be related to foster parents' risk for early exit when controlling for all other predictors. Three methods of entry were used at the last step: forced entry, forward inclusion, and backward elimination. The model using forward stepwise entry was the only one to converge.

Table 4.12 lists the variables entered hierarchically at each step. Separate analyses were done with raw and normative scores for the GSI, the DAS, and the AAPI at step five. The model with raw scores and the model with standard scores both demonstrated good fit, predicted cases accurately, and identified the same variables as having independent effects. The model using standarized scores is discussed further.

A secondary question of the study was if differences in the perceptions of foster parents and foster care workers contributed to risk for early exit. Difference scores were computed from foster parent scores and combined mean scores of foster care workers on the FPRS subscales using the following formula:

Difference Score = Foster Mother Subscale Score - M Worker Subscale Score

Difference scores on each of the five subscales of the FPRP were substituted for foster mothers' scores. Difference scores did not add to the overall model and did not demonstrate a statistically significant main effect.

Table 4.13 presents a comparison of the model at each step using forward stepwise entry for raw scores and for standard scores on the DAS, the GSI, and the AAPI. The following discussion reports findings using standard scores for predictive measures. The -2 log likelihood at the final step was 40.61. There was a statistically significant relationship

Table 4.12. Steps for Data Entry for Pre-Approval Predictors for Foster Mothers

Method of entry	Predictor Variable
Step 1 – Forced	Age
	Educational Attainment
	Race
	One-parent household
	Married
Step 2	MAPP training site
Step 3	Interest in adoption
Step 4	Missing Potential for Foster Parenthood Scale – Revised
Step 5 – Step-wise forward Inclusion	Adult Adolescent Parenting Inventory/Developmental Expectations
	Adult Adolescent Parenting Inventory/Parenting Roles
	Adult Adolescent Parenting Inventory/Value of Corporal Punishment
	Adult Adolescent Parenting Inventory/Empathy
	Brief Symptom Inventory/Global Severity Index
	Dyadic Adjustment Scale
	Partner Abuse Scale: Non-Physical
	Family Assessment Device
	Social Support Behavior Scale/ Family Total
	Social Support Behavior Scale/Friends Total
	Foster Parent Role Performance Scale/Agency Partner
	Foster Parent Role Performance Scale/Birth Family Facilitator
	Foster Parent Role Performance Scale/Parenting
	Foster Parent Role Performance Scale/Socioemotional Development
	Foster Parent Role Performance Scale/Spirituality
	Potential for Foster Parenthood – Revised

Table 4.13. Foster Mother Characteristics Predictive of Risk for Early Exit

Variable	Wald	df	p	Odds Ratio	Lower CI	Upper CI
Step One						
Age	1.54	1	.215	.95	.89	1.02
Education						
<High School	1.31	4	.860			
High School/GED	.04	1	.847	.01	.00	2.16
Two Year College	.53	1	.467	2.32	.35	15.53
Bachelor's	.97	1	.326	3.07	.47	20.12
> Bachelor's	.13	1	.721	1.57	.19	12.47
Marital Status	2.00	1	.162	.26	.05	1.27
One Person Household	.17	1	.681	.58	.07	5.02
Race	1.89	1	.170	.28	.06	1.29
-2 Log Likelihood = 63.34						
Goodness of Fit = 50.28						
Model Chi-square = 8.44, df = 8, p = .392						
65.38 % Overall Correct						
Step Two						
MAPP Site/Davidson	2.70	1	.100	2.10	1.00	4.40
MAPP Site/Hamilton	.02	1	.871	1.08	.48	2.47
MAPP Site/Knox	.16	1	.623	1.29	.48	3.77
-2 log likelihood = 59.13						
Goodness of fit = 47.71						
Model Chi-square = 4.24, df = 2, p = .120						
67.13 % Overall Correct						
Step Three						
Interest	7.23	1	.007	.04	.01	.27
-2 log likelihood = 49.07						
Goodness of fit = 53.01						
Model Chi-square = 10.04, df = 1, p = .002						
78.85 % Overall Correct						
Step Four						
Missing PFPS-R	.07	1	.788	1.22	.28	5.23
-2 log likelihood = 48.99						
Goodness of fit = 51.88						
Model Chi-square = .07, df = 1, p = .788						
78.85% Overall Correct						

Table 4.13. Foster Mother Characteristics Predictive of Risk for Early Exit (Cont.)

Variable	Wald	df	p	Odds Ratio	Lower CI	Upper CI
Step Five Using Standard Scores						
AAPI/ Developmental Expectations	5.41	1	.020	.42	.23	.77
Sten Scores						
-2 log likelihood = 40.61						
Goodness of fit = 97.19						
Model Chi-square = 8.38, df = 1, p = .004						
86.54 % Overall Correct						
Kappa = .73, p < .001						
Step Five Using Raw Scores						
AAPI/ Developmental Expectations	7.23	1	.010	.61	.44	.85
Raw Scores						
2 log likelihood = 39.67						
Goodness of fit = 90.21						
Model Chi-square = 9.33, df = 1, p = .002						
90.38 % Overall Correct						
Kappa = .81, p < .001						

between the set of predictor variables and risk for exit (model $\chi^2 = 8.38$, df = 1, p = .004). Overall, the model predicted 86.54 percent of cases correctly. An examination of the histogram of the studentized residuals indicated that these were approximately normally distributed. The degree of corrected agreement between predicted and actual cases of vulnerability for exit is very good (kappa = .73, p < .001).

Two variables had an independently statistically significant overall main effect at the .10 level: (1) program interest (Wald = 7.18, df = 1, p = .01, OR = .04) and (2) inappropriate developmental expectations for children (Wald = 5.41, df = 1, p = .020, OR = .42). More specifically, interest in adoption decreased the odds of being vulnerable to exit by 96 percent (the odds of being vulnerable to exit are multiplied by .04 which is .96 less than 1). Foster mothers with higher scores on the AAPI Inappropriate Developmental

Expectations subscale, with higher scores indicating more desirable parenting attributes, were at less risk for early exit. For each unit increase on the AAPI Developmental Expectations subscale, the odds of being at risk for early exit decreased by 58 percent. Examination of the relationships between assessment measures indicated an acceptable level of multicollinearity. Minimum tolerance for demographic variables ranged from .39 for the variable indicating marital status of foster mothers to .79 for educational attainment. For variables with statistically significant effects, minimum tolerance was .47 for interest and .82 for Inappropriate Expectations. Minimum tolerance ranged from .32 for PFPS-R scores to .39 for DAS T-scores for variables not included in the model.

Analysis of Post-Placement Predictor Variables

Post-placement variables thought to influence foster parents' decisions about continuing as service providers included: (1) normative family changes, (2) foster parent association meeting attendance, (3) satisfaction with foster care services, and (4) placement utilization history.

Normative family changes. Over one-third of new foster parents reported that changes occurred in their families' circumstances between the time they completed training and the follow-up interview. Family changes are presented in Table 4.14. Nineteen percent of foster parents viewed these changes as negatively influencing their ability as foster parents. Foster mother's pregnancy was a reason for leaving foster care. How other changes affected providing foster care placements depended on if the change added or decreased family resources. Three foster mothers indicated that job changes gave them more flexibility in scheduling. For other mothers, changing to a different work schedule

Table 4.14. Normative Family Changes

	Risk Status					
	At Risk (N = 22)		Not At Risk (N = 28)		Total (N = 50)	
Normative Change	f	%	f	%	f	%
No Change	15	68.18	19	67.86	34	68.00
Family Moved	3	13.63	2	7.14	5	10.00
Change in Foster Mother's Employment	2	9.09	3	10.71	3	6.00
Change in Foster Father's Employment	1	4.55	0		1	2.00
Pregnancy	1	4.55	0		1	2.00
Added Family Member	1	4.55	1	3.57	1	2.00
Illness	1	4.55	3	10.71	4	8.00

meant they had less time to devote to fostering. Only one foster mother indicated that illness of a family member interfered with fostering. Other families experiencing illness relied on extended family members to care for their own children and foster children during times of illness. Chi-square analyses indicated no statisticallysignificant differences between the frequency of normative changes for foster parents who indicated risk for exit and those who planned to continue to foster.

Foster parent association meeting attendance. Twenty percent of foster mothers reported attendance at one or more foster parent association meetings (17.86 of foster families who planned to continue and 22.72 percent of categorized "at risk"). Chi-square analysis revealed no statistically significant difference regarding participation between those at risk and those who planned to continue.

Satisfaction with the agency. Seventy-four percent of foster parents interviewed indicated that they were satisfied with services from the agency. There was a statistically

significant difference in how foster parents at risk and those who planned to continue viewed services, χ^2 (1, N =50) = 81.0, p = .004. Almost half (45.45 percent) of foster parents considering leaving foster care were dissatisfied with agency responses compared to 10.71 percent of foster parents who planned to continue. Reasons for being satisfied and dissatisfied with the agency are listed in Table 4.15.

Placement utilization. Seventy-five percent of foster parents reported having provided at least one foster care placement. The number of children placed ranged from none to 11. Forty-four percent of homes had cared for more than one child (M = 2.17, SD = 2.46). Thirty-eight percent provided placements for siblings. An independent-samples t-test found no statistically significant difference in number of children served by foster families at risk for exit and families who planned to continue. Table 4.16 summarizes respondents' experiences as service providers.

Predictor variable coding. The model reported is for foster mothers. Foster mothers' age, the number of placements, and the number of children placed in the home at one time were treated as continuous variables. Training site was effects coded. Other categorical variables were dummy coded (Cohen & Cohen, 1983). Educational level was dummy coded with less than high school serving as the reference category. Coding for dichotomous variables is listed in Table 4.17.

Model comparison. As seen in Table 4.18, the -2 log likelihood at the final step was 27.42. There was a statistically significant relationship between the set of post placement variables and risk for exit (model χ^2 = 19.63, df = 9, p = .020). Overall, the model predicted 80.77 percent of cases correctly. An examination of the histogram of the

Table 4.15. Satisfaction and Dissatisfaction with Agency Services

	Risk Status					
	Not at Risk		At Risk		Total	
Response[1]	f	%	f	%	f	%
Satisfied with Agency Responses	25	89.29	12	54.55	37	74.00
Supportive: helpful and understanding of difficulties	4	14.29	3	13.34	7	14.00
Agency provided resources for foster children	2	7.14			2	4.00
Worker was accessible	1	3.75			1	2.00
Worker provided information/Answers questions	6	21.43	1	4.55	7	14.00
Worker responded promptly	1	3.75			1	2.00
Dissatisfied with Agency Responses	3	10.71	10	45.45	13	26.00
Worker is not available when called	1	3.75	2	9.09	3	6.00
Worker does not return phone calls			5	22.73	5	10.00
Agency did not provide adequate information about foster child	1	3.75	2	9.09	3	6.00
Worker is unresponsive to foster parent concerns about foster child	1	3.75	3	13.34	4	8.00
Agency is unable to provide services to meet children's needs	1	3.75	1	4.55	2	4.00
Changed foster care workers			2	9.09	2	4.00
Agency red-tape differed from MAPP	3	10.71	4	18.18	7	14.00
No contact with workers	4	14.29	2	9.09	6	12.00

[1]Foster parents gave more than one response

Table 4.16. Placement Utilization of New Foster Homes at Risk and Not at Risk for Exit

	Risk Status					
	At Risk (N = 22)		Not at Risk (N = 28)		Total (N = 50)	
Response	f	%	f	%	f	%
Provided Placement	18	81.82	21	75.00	39	78.00
Current Placement	11	50.00	20	55.00	31	62.00
Provided for Sibling Groups	8	36.36	12	42.86	20	40.00
Placement Disruption	7	31.82	5	17.86	12	24.00
	M	SD	M	SD	M	SD
Maximum Number of Placements	1.27	.88	1.64	1.37	1.42	1.19
Total Number of Placements	1.86	2.21	2.57	2.65	2.17	2.46

Table 4.17. Coding of Dichotomous for Analysis of Post-Placement Factors

Variable	Coded as 0	Coded as 1
Marital Status	Not Married	Married
One Parent Household	Yes	No
Race	Caucasian	African-American
Attended Foster Parent Association Meeting	No	Yes
Have Provided Placement Since Approval	No	Yes
Foster Child Currently Living in Home	No	Yes
Provided Placements for Siblings	No	Yes
Placement Ended in Disruption	No	Yes

Table 4.18. Post-Placement Variables Predicting Foster Mother's Risk for Exit

Variable	Wald	df	p	Odds Ratio	Lower CI	Upper CI
Step 1						
Age	1.46	1	.226	.95	.89	1.02
Education						
<High School	1.15	4	.886			
High School/GED	.03	1	.859	.01	.00	3.47
Two Year College	.68	1	.411	2.32	.38	18.51
Bachelor's	.91	1	.340	3.07	.45	20.35
> Bachelor's	.20	1	.655	1.57	.22	14.60
Marital Status	1.50	1	.220	.28	.05	1.55
One Person Household	.26	1	.608	.49	.05	5.00
Race	2.55	1	.170	.28	.06	1.29
MAPP Site/ Davidson	2.70	1	.111	2.10	1.00	4.40
MAPP Site/ Hamilton	.03	1	.871	1.08	.48	2.47
MAPP Site/Knox	2.86	1	.091	.44	.20	.98
-2 log likelihood = 59.10	Goodness of fit = 47.71					
Model Chi-square = 12.68, df = 10 p = .242						
67.31% Overall Correct						
Step 2						
Change	2.00	1	.158	4.12	.74	22.86
Have Provided Placement	4.63	1	.031	20901.55	10.23	
Foster Child in Home	3.74	1	.053	.00	.00	.39
Total Number of Placements	.92	1	.336	1.67	.70	4.00
Maximum Number of Placements	.38	1	.540	.30	.01	7.49
Placement for Siblings	4.50	1	.034	.00	.00	.32
Placement Disruptions	1.20	1	.272	.15	.01	2.56
Attended Foster Parent Association Meeting	1.91	1	.167	12.91	.62	271.06
Satisfaction with Agency	2.10	1	.147	.05	.00	1.49
-2 log likelihood = 39.48	Goodness of fit = 32.53					
Model Chi-square = 19.63, df = 9, p = .020						
80.77% Overall Correct						
Kappa = .61, p < .001						

residuals indicated that these were approximately normally distributed. The degree of agreement between predicted and actual cases of vulnerability for exit is good (kappa = .61, $p < .001$).

Analysis of multicollinearity indicated that the variables in the model were highly correlated. Tolerance for variables of having provided placements, the total number of placements provided, the maximum number of placement, and if a foster child was living with the family ranged from .17 to .25 indicating that these variables share over 75 percent of variance with other variables in the model. Thus, it is difficult to interpret their unique contribution. Over three-fourths (74.49 percent) of homes with placements cared for no more than two children so that the total number of placements and the maximum number of placements provided at one time were redundant. Cohen and Cohen (1983) have suggested that when shared variance is attributed to a single property that it is appropriate to combine variables into a single index or drop peripheral variables. Total number of placements, maximum placements at one time, and having a child in the home were dropped from the model. The variable of having provided placement for a foster child was retained to differentiate between newly approved families who had children living with them at some point during the six months after training and those who did not.

The model was reconstructed to include normative changes, having provided placement, if foster parents provided placements for siblings, if placements disrupted, if foster parents attended foster parent association meetings, and satisfaction with the agency.

As seen in Table 4.19, the overall model was statistically significant at the .10 level (χ^2 = 11.46, df= 6, p = .075). The overall model predicted 76.92 percent of cases correctly and the degree of adjusted agreement between actual and predicted cases was .54. Analysis of residual indicated they were somewhat normally distributed.

Two variables were found to have statistically significant main effects: (1) if foster parents provided placements for sibling groups (Wald = 4.87, df = 1, p = .027, OR = .07) and (2) if they were satisfied with services from the agency (Wald = 3.43 df = 1, p = .064, OR = .10). Providing placements for siblings decreased the odds for exit by 93 percent. Satisfaction with agency services decreased the odds for being at risk by 90 percent.

Multicollinearity analysis indicated less shared variance than in the previous model. For variables measuring placement history, tolerance ranged from .55 for having provided placement to .67 for placement disruption. The lower level of shared variance increased confidence in statistically significant main effects.

Foster Parent Role Responsibility

Comparison of foster parents and foster care workers. Independent-samples t-tests were used to compare responses of foster care workers and foster parents on the FPRP scale. No differences were found between how foster care workers assigned to children and those who trained and supervised foster homes saw foster parents' responsibilities (see Table 4.20). However, differences were evident in how newly trained foster parents and foster care workers perceived role responsibilities for foster parents. The results of

Table 4.19. Post-Placement Variables Predicting Foster Mother's Risk for Exit: Reconstructed Model

Variable	Wald	df	p	Odds Ratio	Lower CI	Upper CI
Age	1.46	1	.226	.95	.89	1.02
Education						
<High School	1.15	4	.886			
High School/GED	.03	1	.859	.01	.00	3.47
Two Year College	.68	1	.411	2.32	.38	18.51
Bachelor's	.91	1	.340	3.07	.45	20.35
> Bachelor's	.20	1	.655	1.57	.22	14.60
Marital Status	1.50	1	.220	.28	.05	1.55
One Person Household	.26	1	.608	.49	.05	5.00
Race	2.55	1	.170	.28	.06	1.29
MAPP Site/ Davidson	2.70	1	.111	2.10	1.00	4.40
MAPP Site/ Hamilton	.03	1	.871	1.08	.48	2.47
MAPP Site/Knox	2.86	1	.091	.44	.20	.98
-2 log likelihood = 59.10						
Goodness of fit = 47.71						
Model Chi-square = 12.68, df = 10 p = .242						
67.31% Overall Correct						
Change	.65	1	.420	1.97	.50	7.84
Provided Placement	1.15	1	.285	4.09	.47	35.64
Placement for Siblings	4.87	1	.027	.07	.01	.51
Placement Disruptions	.31	1	.576	1.85	.30	11.29
Attended Foster Parent Association Meeting	2.07	1	.151	7.45	.75	74.21
Satisfaction with Agency	3.43	1	.064	.10	.01	.76
-2 log likelihood = 47.64						
Goodness of fit = 42.20						
Model Chi-square = 11.46, df = 6, p = .075						
76.92% Overall Correct						
Kappa = .54, p < .001						

4.20. Comparison of Foster Child Workers' and Foster Family Workers' Role Expectations for Foster Parents

	Foster Child Worker (N = 40)			Foster Family Workers (N = 27)				
Foster Parent Roles	n	M	S.D	n	M	SD	t	p
Foster Mother								
Agency Partner	40	28.02	15.11	26	34.65	23.12	1.41	.163
Birth Family Facilitator	40	40.05	15.84	26	43.77	17.89	.886	.379
Parenting	40	64.46	16.45	26	64.14	17.74	-.07	.941
Socioemotional Development	40	78.55	13.10	26	73.85	15.54	-1.32	.190
Spirituality	40	62.21	19.32	26	59.81	22.84	-.46	.648
Foster Father								
Agency Partner	39	28.72	15.69	27	32.59	23.75	.80	.427
Birth Family Facilitator	39	39.21	15.21	27	41.04	16.89	.46	.646
Parenting	40	63.02	18.05	27	60.97	18.34	-.45	.652
Socioemotional Development	39	76.97	16.07	27	70.04	17.21	-1.68	.099
Spirituality	39	61.80	20.41	27	60.68	22.51	-.21	.835

paired t-tests of worker responses seen in Table 4.21 indicated that foster care workers perceived no differences between foster fathers' and mothers' roles with the agency, with birth families, and in the spiritual development of foster children. They gave more responsibility to foster mothers for parenting and for addressing the social and developmental needs of children. They expected foster fathers to be less active in these areas. Foster fathers and foster mothers perceived foster parents as having more responsibility with foster children than foster care workers expected them to take. Specifically, new foster parents saw they had more responsibility for parenting, for promoting social and emotional development, for working with birth families, and for

4.21. Comparison of Foster Care Workers' Perceptions of the Roles of Foster Mothers and Foster Fathers

	Foster Fathers		Foster Mothers			
Foster Parent Role	M	SD	M	SD	t	p
Agency Partner	30.49	19.41	30.64	18.944	-.19	.850
Birth Family Facilitator	40.17	15.85	41.57	16.76	-1.50	.139
Parenting	62.56	17.94	64.33	16.84	-2.49	.015
Socioemotional Development	74.47	16.67	76.55	14.24	-2.37	.021
Spirituality	61.31	21.30	61.72	20.47	-.50	.619

promoting children's spirituality. Results for foster mother and foster father roles are presented in Table 4.22 and 4.23, respectively.

To examine how these differences in role perception contributed to understanding risk for exit, differences between foster parent and foster care worker mean scores were calculated for foster mothers and foster fathers. Difference scores for the five subscales of the FPRP were entered as a set and stepwise with forward inclusion and backward elimination after demographic variables and MAPP training site. The model was not statistically significant at the .10 level.

Summary of Findings

Assessment measures identified foster parents with mental health problems, levels of verbal abuse and family dysfunction, and parenting attitudes that could contribute to negative foster parenting outcomes. In foster parent couples, mothers and fathers did not agree in their perceptions of available social supports from friends and of family functioning. New foster parent couples did agree about how they saw their roles as foster parents though their views differed from the role expectations of foster care

Table 4.22. Comparison of Foster Mothers' and Foster Care Workers' Perceptions of Foster Mother Roles

	Foster Mothers (N = 52)		Foster Care Workers (N = 67)			
Foster Mothers' Roles	M	SD	M	SD	t	p
Agency Partner	31.13	25.23	30.63	18.79	.12	.903
Birth Family Facilitator	59.47	22.22	41.51	16.64	5.02	.000
Parenting	80.18	12.23	64.33	16.83	5.70	.000
Socioemotional Development	87.11	8.15	76.70	14.18	4.72	.000
Spirituality	75.72	17.09	61.26	20.64	4.07	.000

Table 4.23 Comparison of Foster Fathers' and Foster Care Workers' Perceptions of Foster Father Roles

	Foster Fathers (N = 31)		Foster Care Workers (N = 67)			
Foster Fathers' Roles	M	SD	M	SD	t	p
Agency Partner	26.05	26.12	30.30	19.32	-.90	.371
Birth Family Facilitator	57.72	17.28	39.96	15.82	5.01	.000
Parenting	75.32	17.63	62.19	18.06	3.37	.001
Socioemotional Development	86.48	11.39	74.13	16.77	3.71	.000
Spirituality	74.17	15.96	61.34	21.13	3.00	.003

workers. Foster care workers rated foster mothers slightly higher than foster fathers on anticipated ability to perform fostering tasks.

Pre-approval factors reducing the likelihood that new foster families were at risk for exit included the family's interest in adopting children, and foster mothers' understanding of appropriate role expectations for children. After foster homes were approved, providing placements for sibling groups and being satisfied with services from the agency decreased the risk for exit. New foster mothers and the foster care workers for children and those who supervised home placements differed in how they viewed foster parent role responsibilities. Foster parents perceived themselves as more responsible for

parenting, for enhancing child development, for facilitating children's relationships with birth families, and for promoting the spiritual development of children in their care. These differences were not statistically significant predictors of risk for exit. Chapter Five discusses the implications of these findings for practice and future research.

Chapter 5: Discussion

Findings of this study about characteristics of newly approved foster parents and about factors reducing their risk for early exit are applicable to child welfare policies and practice to maximize new foster parents' potential as service providers for children in care. The demographic profile of foster parents in the study sample provides a context for understanding findings about individuals currently entering child welfare service. This chapter summarizes major findings for predicting risk for early exit, discusses implications of findings for recruitment, assessment, and supervision of foster parents; addresses limitations and strengths of the study, and proposes areas for future research.

Characteristics of Newly Approved Foster Parents

The majority of foster parents in this study were couples, though divorced, never married, and widowed individuals also provided foster care placements. Foster parents tended to have at least a high school education, many completed college, and some had graduate degrees. Twenty-five percent of foster mothers and fathers were African-American, a higher percentage than in the state population.

The median family income for foster parents in the sample was above the median income for Tennessee families. This finding may have been due to the levels of educational attainment and the prevalence of dual career couples. Three-fourths of foster mothers worked outside the home. Approximately 40 percent of foster mothers were employed in helping professions.

Slightly over 50 percent of foster parents had their children living with them. These families were in a stage where they were actively parenting before becoming foster

parents. Ten percent of foster parents had adult children. However, thirty-six percent of foster families were childless. These families were composed of single individuals who were interested in parenting and couples who either delayed parenting or could not have children. These findings were congruent with the number of families applying to foster and adopt. Many foster parents were interested in adding to their families through adoption.

Predicting Risk for Early Exit

Reasons Placing Foster Parents at Risk for Early Exit

Foster parents' reasons for uncertainty about continuing in foster care were similar to those reported in studies of closed foster homes (Baring-Gould, et al., 1983; Jones, 1975; Rindfleisch, Bean, & Denby, 1998; Ryan, 1985). Several themes emerged. First, foster parents had competing interests for being foster care providers. Study participants planning to adopt children through another agency left DCS's foster care program. Other studies have reported that parents interested in adoption exit after they adopt or if they are unable to adopt through foster care agencies (Rindfleisch, Bean, and Denby, 1998; U. S. Department of Human Services, 1985).

Other foster parents were approved as service providers for specific children. They knew children who needed family home placements and their interest in foster care was limited to those children. They did not plan to accept foster children in general. Baring-Gould et al. (1983) reported homes closed when foster children left foster care if foster parents entered the program to care for children they already knew. In these cases, benefits of continuity for children outweigh the cost of home closure when children live in temporary placements with families they know.

Next, foster parents' reasons for considering leaving foster care highlighted the financial costs of foster parenting for families. Having resources to care for additional children was a motivation for foster parenting. However, when faced with changes in their families' circumstances, additional financial burdens of foster parenting became a barrier to continuing with the program. Of particular concern were unanticipated out-of-pocket expenses and lack of accessible, affordable day care for children in care. Findings leant support to recommendations for providing financial reimbursement to cover foster parents' expenses (Campbell & Downs, 1991; Erkut, 1991; U. S. Department of Human Services, 1995) and providing day care services (Pastor & Wynne, 1995; U. S. Department of Human Services, 1995).

Finally, reasons for considering leaving identified emotional costs for foster parents. Conflicts between foster children and foster parents' children and perceived liabilities of working with birth families were reasons for not continuing with the program. These findings agreed with previous reports associating discontinuance with foster parents' perceptions of fostering as negatively effecting family members (Baring-Gould, et al., 1983; Cautley, 1980).

Predictors of Foster Parents at Risk for Early Exit from Foster Care

With regard to a profile of the sample of participating foster mothers, the direction and strength of correlations among measures in the assessment battery of pre-approval characteristics supported the usefulness of applying an ecological model for understanding foster parent outcomes. Foster mothers with less empathy for children and those with more punitive approaches to discipline also had scores on measures indicating verbal

abuse and psychopathology. Foster mothers with less social support had less adequate family functioning and more mental health problems. Those who looked toward children as a source of personal comfort saw foster parents as having less responsibility with agencies and with birth families. Results of this analysis do not give an indication of cause-effect relationships among parenting attitudes, verbal abuse, parent mental health, social support, family functioning and foster parent role understanding. However, the interrelationship of these variables does suggest that they should be considered as a set of factors contributing to the quality of foster parenting.

The primary question of this study was if pre-approval characteristics of foster parents could identify new foster parents considering exit from foster care. The overall model predicted foster parents at risk for exit. Interest in adoption and mothers' developmental expectations for children were the best pre-approval indicators of risk for early exit. Post-placement satisfaction with agency services and accepting sibling groups also predicted risk. Though differences in role perception between foster parents and foster care workers were not found to be statistically significant predictors of risk for exit, discrepancies in role perception were evident.

Interest in adoption. Promotion of foster care placements with expectations foster parents will adopt children if reunification efforts fail has become more prevalent since the enactment of the Model Adoption Act in 1981 (Barth, Courtney, Berrick, & Albert, 1994). Already existing attachments between children and foster parents maximize potential for stability and permanency for children. Current practice gives foster families who have established bonds with children first preference when children are available for

adoption. As a result, increasing numbers of individuals become foster parents with the intent to adopt children in their care (Hollingsworth, 1998).

Contrary to original expectations, foster parents' interest in adopting decreased the odds for being at risk to exit the program. Only one family indicated adoption as a reason for fostering on their application. However, slightly over half of two-parent families in this study were approved as foster parents and as adoptive parents. The prevalence of foster/adoptive homes approved in each service district indicated how procedures for approving families for both programs differed across counties. In Hamilton County families were approved to foster only. In Davidson and Knox Counties, workers approved 56 and 90 percent of couples for both programs, respectively. It is not known if foster parents approved for both programs were interested in foster care and encouraged to apply as adoptive homes or if they started MAPP training with the intent to adopt. Differences between these groups of foster parents may explain the contradictory reports from other investigations of how interest in adoption affects foster parents' exits (Rindfleisch, Bean, & Denby, 1998; U. S. Department of Health, 1995).

Thirty-six percent of new foster families participating in this study were childless. These families were composed of single individuals interested in parenting for the first time, women who were divorced or widowed with adult children not living in their homes, and couples who either delayed their own parenting or could not have children. Providing foster care placements is one avenue for adopting infants and young children not available through other channels. DCS policy specifies foster parents as the first choice as adoptive parents for children who have lived with them for over 12 months, if children are eligible

for adoption. At the time of the follow-up interviews, families had not been providing placements long enough to adopt children living with them. Families in this study who initiated adoption through another agency indicated they were leaving DCS's foster care program.

Those interested primarily in adopting children through DCS may also leave the program after they adopt. However, examination of placement utilization found that 33 percent of foster parents approved to adopt provided placements for more than one child, 23 percent had three or more placements, and 28 percent took sibling groups. These foster parents provided temporary placements as well as being interested in adoption. Foster parents in this study clearly were willing to provide placements for children they did not intend to adopt. Professionals have held conflicting views about how willing foster parents are to continue with agencies after adopting (Pecora, Maluccio, & Whittaker, 1993; Proch, 1982; Ward, 1981). Findings of this study support previous observations that foster parents who adopt can continue to be resources for foster children (U. S. Department of Human Services, 1995). Understanding foster parents' perceptions of parenting roles with agencies gives some insight into how agencies can support foster parents in dual roles.

Foster care requires that families expend emotional and material resources for children in their care (Wilkes, 1974; Pasztor & Wynne, 1995). Foster parents interested in adoption already are prepared to incorporate children into their families and to assume parenting responsibilities (Robertson & Robertson, 1977). Their views that temporary and permanent parenting opportunities are available to them through child welfare agencies may increase their commitment to foster parenting. Families considering parenting children

permanently through child welfare agencies may assume more extended parenting roles with other children in their care. Seeing themselves in dual roles of parents and foster parents with the agency, they may be willing to allot resources to children on a temporary basis as well as care for children who will remain with families. Individuals who view themselves as have a less permanent parenting status with the agency may be at greater risk for exit if foster parenting conflicts with other parental and family roles they already occupy.

Developmental expectations for children. Foster children have a higher prevalence of developmental problems than children in general (Rosenfeld et al., 1997; USGAO, 1995). Having accurate perceptions of children's developmental levels may enable foster parents to be flexible, to tolerate behaviors, and to accept differences in children, characteristics previously associated with successful foster care placements (Cautley & Aldridge, 1975; Doelling & Johnson, 1989). Foster parents with appropriate developmental expectations for children may identify developmental delays more accurately, understand how delays affect behavior, plan and implement interventions to address problem areas, and monitor children's progress. They also may be more confident in their abilities to help children with complex and unfamiliar behaviors.

Having a sense of personal accomplishment and competency to perform assigned job tasks has been associated with job retention for other human service providers (Drolen & Harrison, 1990; Siefert, Jayaratne, & Chess, 1991). Previous research and practice reports have associated foster parents' level of satisfaction as a service provider with knowing what to do and perceiving one's efforts as making a difference for children

(Cautley, 1980; Morrissette, 1994). For foster parents, who have primary tasks for day to day care of children, knowing about child development and being able to directly apply knowledge to benefit children in care decreases the risk they will leave foster care. Having appropriate developmental expectations for children's behaviors also may explain varied levels of satisfaction with agency services.

Satisfaction with agency services. Most foster parents were satisfied with agency services for children and for themselves. However, a higher percentage of those at risk for early exit were dissatisfied. Findings about areas of dissatisfaction were consistent with other studies of foster care (Cautley, 1980; Hampson & Tavormina, 1980; Martin et al., 1992; Walsh & Walsh, 1990). Providing information about children's backgrounds and families' circumstances, being able to address foster parents concerns, and helping to access services for children influenced how satisfied foster parents were with the agency.

Though practice standards recommend that foster parents be informed about foster children's backgrounds (McFadden, 1985), children often enter foster care on an emergency basis (Pecora, Whittaker, & Maluccio, 1992). Workers may know little about these children beyond the immediate circumstances leading to removal. Satisfaction may be related to foster parents' understanding of child development. New foster parents with more appropriate developmental expectations may be more confident in their abilities address children's difficult behaviors with additional services. They also may not see workers' unavailability and lack of information about children's backgrounds as negatively impacting their abilities to provide day to day care for children. Those with less accurate

perceptions of children's behavior may feel left on their own and unsupported in their efforts if help from workers or other agencies is not available.

Differences in role expectations among foster parents and foster care workers may be a source of misunderstandings that contribute to dissatisfaction with the agency. One source of role ambiguity is not having enough resources allocated by the organization to enact one's perceived role (Beehr, 1995). In the case of foster parents, satisfaction is related to having access to information and services that enable foster parents to provide better care for children living with them (Erkut, 1997). If workers see foster parents as having less active roles for remediating foster children's psychosocial problems than foster parents do, they may not be cognizant of new foster parents' frustrations with not knowing about children's backgrounds and dissatisfactions with the lack of availability of services.

Foster parent role responsibility. Reasons for the discrepancy between how foster parents and foster care workers saw foster parents' roles with children and with birth families were not clear. Workers may underestimate the willingness of foster parents to assume responsibilities for parenting, for promoting development, and for working with birth families. On the other hand, new foster parents may approach the tasks of fostering with enthusiasm that has not been tempered with reality. For example, Erera (1997) found that foster parents held positive attitudes toward birth families, but had little contact with them. Whatever, the reasons, findings of this investigation provided empirical evidence for anecdotal observations about role ambiguity (McCoy, 1962; Pasztor, 1985; Wilkes, 1974).

Foster parents' role perception did not predict risk for exit: However, foster parents in the study may not have been providing placements long enough to experience

sufficient stress to leave the program if role ambiguities were evident. The direction of the discrepancy also may have influenced findings. That workers expected less of foster parents than foster parents expected of themselves may be less problematic than if workers expected foster parents to have greater responsibilities than they were willing to assume.

Placements for sibling groups. The finding that foster parents providing placements for sibling groups are at less risk for early exit may be an artifact of placement utilization patterns. Twenty-five percent of foster parents categorized as at risk had not provided placements and 41percent had one foster child living with them. Seventy-four percent of foster parents with more than one foster child provided placements for siblings.

The finding also may reflect placement trends. Workers may ask more capable foster parents to provide placements for sibling groups and these foster parents may be more willing to accept children who need to be placed together. Often, one child is removed from his or her birth family first. If siblings subsequently enter foster care, workers will try to place them with brothers and sisters already in care. Foster parents who have adjusted to the placement of one child may be willing to take a second child in order to keep a family unit together.

Conceptual model. Based on findings of this study, the model for predicting foster parent risk for exit was revised. Figure 5.1 presents pre-approval and post-placement variables decreasing the odds for early exit from foster care.

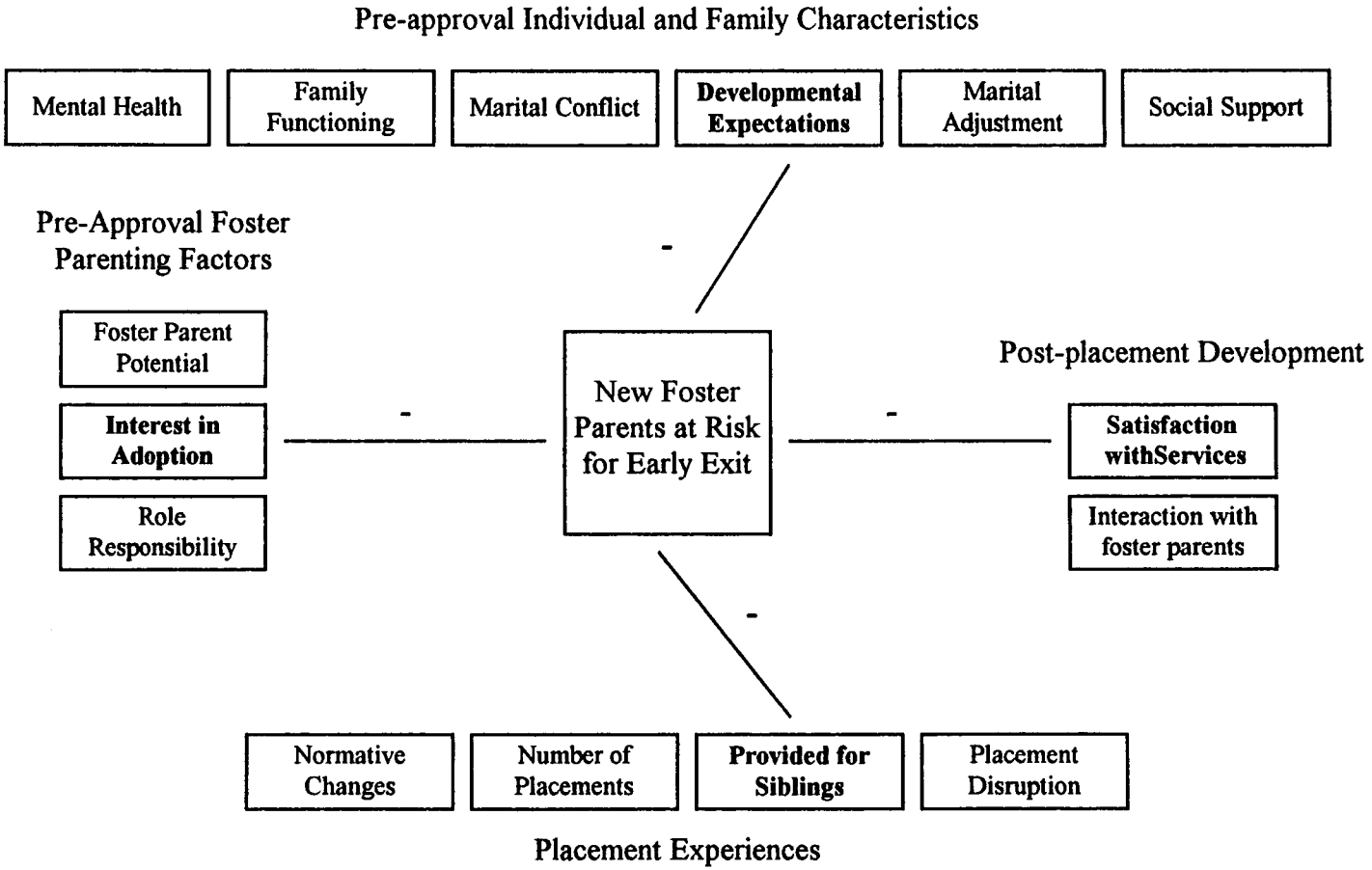


Figure 5.1. Pre-approval and Post-placement Predictors of New Foster Parents at Risk for Exit

Implications for Family Foster Care Services

Findings from this study provide information about new foster parents that can be applied to improve service delivery for children in foster care. Findings have implications for recruitment, for selection, and for supervision and training of new foster parents.

Recruiting New Foster Families

Current recruiting strategies have taken a marketing approach to advertise the need for foster family homes in communities (Coyne, 1986; Pasztor & Burgess, 1982; Rodwell & Biggerstaff, 1993; Robinson, 1991) and to target people interested in providing placements for certain types of children (Coyne, 1978). However, foster care agencies have low returns on recruitment efforts (Friedman et al., 1980). Early exits reduce the number of foster parents actually available for children in care even further. It is important to attract individuals who already have aptitude to be foster parents. The number of foster mothers employed in helping professions in this sample has implications for recruiting new foster parents. First, these foster mothers are more likely to have professional training that includes some knowledge of child development.

Second, foster mothers in helping professions may know foster children through their workplace and be more aware of their problems and needs. Groze, McMillen, and Haines-Simeon (1993) reported that 53 percent of their sample of foster parents for HIV infected children entered foster care as a result of work related experiences. Third, the rewards of fostering are similar to satisfactions found in helping professions such as nursing and social work (Erkut, 1991). Effective recruitment practices may include targeting members of professional organizations for nursing, teaching, and counseling.

Pre-service Training

Foster parents assume 24-hour-a-day responsibility for children in their homes. Pre-service training models have prepared new foster parents by providing information about the goals of foster care, role responsibilities of foster parents, and guidelines for teamwork at critical events in service delivery for foster children (Pasztor, 1985; Pasztor & Wynne, 1995; Simon & Simon, 1982). Content has emphasized reasons children enter foster care, the needs of children and their families, differences between foster parenting and other types of parenting, policies on discipline, and the impact of foster parenting on foster families.

Additional content is needed to assure that foster parents have knowledge of appropriate developmental expectations for children. Pre-service training should include information about children's behavior at each stage of development. New foster parents need to know how exposure to neglect, physical abuse or sexual abuse, emotional maltreatment, and abandonment affect children's social and emotional growth at each developmental stage. Understanding the developmental context of behavior provides direction for remedial interventions when information about children's backgrounds and family circumstances are not readily available.

Assessment of Foster Parents

Assessment battery. Foster parenting is a complex phenomenon affected by several domains of functioning. The assessment battery identified foster parents with varying levels of individual and family attributes affecting their capacity to provide adequate care for children. All families met DCS qualifications for foster homes. However, from the

number of foster parents scoring in clinical ranges on assessments of mental health, family functioning, non-physical partner abuse, and parenting attitudes, it was clear some foster parents possess more attributes of effective parenting than others. The percentage of foster parents reporting their inability to be empathetic to children's needs and their expectations of children to be sensitive and responsible for their happiness was a concern. Even though MAPP training covered non-physical behavior management and agency policies against using physical punishment (Pasztor, 1987), approximately 10 percent of foster parents indicated attitudes toward physical discipline that placed them at risk for abusive interactions with children.

In combination, these variables compromise the quality of caregiving environments that foster parents provide for children. If undetected, problematic parent-child relationships could develop that result in detrimental consequences for foster children. Thus, this assessment battery identified foster parents' strengths and limitations that may be missed by assessment procedures that relied on observations of foster parents during interviews and pre-service training groups (Kadushin & Martin, 1988; Pasztor & Wynne, 1995).

Assessing foster parent couples. The lack of statistically significant correlations between mothers and fathers in foster parent couples highlighted that foster parents' perceptions of level of social support from family, the use of physical punishment for disciplining children, and parenting responsibilities as foster parents were independent of their spouses' views. The sample size of foster parent couples may not have been sufficient to detect anything but large differences. However, the lack of relationship

suggests that particular attention should be given to assessing salient characteristics of both parents in couples.

Previous research has emphasized the importance of fathers' involvement for placement continuance (Cautley, 1980). With an increasing number of working foster mothers in two-parent households, recently approved foster fathers may assume a more active role in providing direct care for children in the family. Their attitudes about discipline and parenting responsibilities can affect children directly through parent-child interactions and indirectly if foster parents disagree about approaches and their responsibilities. Considering that over 20 percent of foster fathers in this sample stated their reason for fostering was because of wives' interest, attention needs to be given to clarifying differences that may be evident between foster parents in two-parent homes.

Using assessment information for case planning. Approval does not mean that a home is necessarily suitable for all children. Some homes place restrictions on the types of children they will accept. When workers have subjective concerns about suitability of homes, they are less likely to place children with them.

Standardized assessments can quantify subjective concerns foster care workers may have about foster parents' abilities. Information from assessments may be used when making placement decisions for children. Objective knowledge about foster parent strengths increases the accuracy of matches between children and foster home placements.

The number of foster parents interested in adoption further emphasizes the importance of accurately assessing foster parents' abilities as parents and as agency partners. Careful consideration needs to be given when placing children in homes that may

be permanent. States have expedited adoption procedures in order to provide permanent placements, particularly for special needs children. Families planning to adopt children with special needs may require additional support from the agency. Pre-placement assessment can identify areas of concern for families, and direct plans for services to prevent problems that may interfere with the successful adoption.

Assessment information also may serve as objective criteria for setting goals and objectives for foster parents' development as service providers. Though matching children and foster parents is ideal (Kadushin & Martin, 1988; Pasztor & Wynne, 1995), children often enter foster care as a result of emergency situations (Pecora, Maluccio & Whittaker, 1992). Placement decisions are made based on availability of a foster home more often than not (U. S. Department of Human Services, 1995). If assessments are available about foster parent strengths and limitations and about children's needs, the potential of existing placements can be maximized by targeting factors specific to the foster parent-foster child relationship. Objective assessment highlights difficulties foster parents may experience when working with children of different ages or with specific types of social and developmental delays. Workers and foster parents can identify areas where foster parents need additional information about development to help foster children currently living with them and develop plans for addressing deficiets. Inservice training activities can be directed toward specific knowledge areas that are immediately relvant to foster parents and children living with them.

Supervising New Foster Homes

Foster care workers have responsibilities for supervising new foster parents to assure that they are providing suitable home environments for children in care (CWLA, 1995). Practice standards have recommended that workers visit foster children and foster parents in foster homes at least monthly and more often when foster parents are new or children are experiencing transitions (CWLA, 1995). However, training for workers does not necessarily include information about foster families (Pasztor & Wynne, 1995). Misunderstandings between foster parents and workers can arise as workers help new foster parents develop their roles with children and the agency. New foster parents may blame agencies and workers for children's lack of progress when they do not understand children's behaviors (Morrissette, 1994). Foster parents may view workers as intrusive if they believe that workers lack appreciation for their input and expertise with children (Meyers, 1985; Pasztor & Wynne, 1995). These conflicts compromise working relationships between foster parents and workers to the detriment of children in care.

Prevention may be a better approach for role development than trying to validate foster parents' actions while educating them about how to better address children's needs. Assessing foster parents prior to approval can help workers identify vulnerable families and help foster parents better anticipate possible pitfalls they may experience as service providers. Workers can review results with foster parents to set mutual goals for development. Pre-approval assessment of role understanding and attributes contributing to parenting establishes fostering as an activity that requires continuous learning.

Given that mothers' and fathers' views about discipline and parenting roles with foster children may differ, agency practices that involve both parents in case conferences about children would be more effective than only working with one member of a foster parent couple. Instruments such as the AAPI, the FPRP, and the PFPS-R can be used with foster parents to discuss responses and clarify agency expectations.

The number of foster parents working outside the home parallels changes affecting families in general. Single foster parents most likely will be employed and dual career couples are the norm, not the exception. Foster mother's employment does not seem to deter families from being interested in foster care. However, working outside the home may affect foster parents' accessibility. Studies have attributed foster father's lack of involvement to their work schedules (Cautley, 1980; Davids, 1973). Foster fathers often are not at home when workers visit. Working foster mothers may have similar problems if their work schedules conflict with an agency's operating hours. Meeting with families after hours puts additional strain on workers that could adversely affect their relationship with foster parents.

Foster parents' employment also may affect how foster parents develop their roles with foster children and the agency. Work schedules may conflict with attending case conferences and court hearings for children. Working foster parents may have more difficulty arranging transportation for special services, and participating in treatment if programs are not located close to their communities. Working also may decrease foster parents' interest in professionalization. Many foster parents already have careers. Foster parents in this study were fostering in order to fulfill family needs or personal interest in

helping others. Other studies (Erkut, 1991; Hampson & Tavormina, 1980) have observed that satisfaction from fostering comes from parenting and from having a positive impact on children's lives rather than having an employment role with the agency. Foster parents may be more interested in being better parents and meeting the developmental needs of children in their care than increasing their professional status with the agency. If this is the case, foster parents may find time limited training, with the focus on helping a child in their care, to be more beneficial than more general information that may not be immediately applicable.

Study Limitations

As with any study, this study has limitations that affect validity and how findings can be generalized to other foster parents. Some of these limitations were inherent in the study. Others did not become evident until data were collected.

Generality

In general, research studies collecting data directly from foster parents have relied on voluntary samples of foster parents in a service area (e.g. Cautley, 1980; Hampson & Tavormina, 1980; Le Prohn, 1993). This study was no exception. Recruiting subjects through pre-service training groups reached all new non-relative foster parents for DCS in three metropolitan service areas. This increased the potential to have the largest sample size of new foster parents available.

Several factors must be noted when considering how well individuals volunteering for the study represented new foster parents. There were differences between participants and non-participants. Subjects were recruited from service regions covering urban and

suburban areas. New foster parents applied with a public child welfare agency. Approximately 10 percent of the sample had previous foster parenting experience.

The primary difference between eligible participants and non-participants was non-participants interest in adopting rather than fostering. However, compared to participants, a higher percentage of non-participants did not complete high school and were African-Americans. Also, only two racial groups, white and African-American, were represented in the sample of approved foster parents. The factors reported are not necessarily predictive of risk for early exit for foster parents who are less educated and those from other minority groups. Economic level and culture of families affect parenting (Everett, Chipungu, & Leashore, 1991) and foster parenting (Delgado, 1978; Le Prohn, 1993; Schroeder & Lightfoot, 1983; Valiente, 1983).

Davidson, Hamilton, and Knox counties include three of Tennessee's largest cities and the surrounding metropolitan areas. These communities offer residents more educational and employment opportunities than rural areas of the State. There is also a higher concentration of social services available for children in these areas. The study sample represents foster parents primarily living in urban and suburban communities. The strengths, needs, and concerns of foster parents living in rural areas may differ from those found in this sample.

Foster parents in the study were approved to provide regular foster care through a state agency. DCS manages regular family foster homes and supervises children in kinship care. Relative foster parents are not required to attend training and are approved to care for a specific child. The needs and concerns of relative foster parents are sufficiently

different from non-relative foster care providers that they were not included in the study (Gebel, 1996; Le Prohn, 1993).

The State also purchases foster care services from private agencies. Private regular and therapeutic foster care agencies operate in the three study sites and rely on the same pool of volunteers for foster parents as DCS does. Private agencies tend to have higher reimbursement rates and lower foster care caseloads (Hawkins, 1989).

Recruiting subjects from a public agency controlled for differences in policies and practices for reimbursement, supervision, selection, placement utilization, and additional services that might influence placement experiences of foster parents. However, it did not consider the contribution of these variables to risk for early exit. The study did not ask about differences between individuals who foster with private agencies and those providing for children through DCS. Since private and public sectors compete for the same applicants, it would be helpful to know if different models for service delivery attract and approve foster parents with the same individual and family characteristics.

Limiting the sample to newly approved foster parents from a public agency controlled for effects of training and experience. Foster parents in the study had comparable preparation to be foster parents. However, approximately 10 percent of foster parents in the study had previous experience. Though these foster parents were not totally unfamiliar with foster care, they were new to DCS and did not have foster children living with them when they were approved.

Changes in Agency Policies

During the study period, the State of Tennessee implemented reform measures affecting foster care service delivery. The three study sites made the transition to the new system in turn. As a result, agency policies and practices for the State differed among and within counties during the study period. Changes in the agency environment meant that the context in which foster parents were working with children, workers, and agency administration was not necessarily consistent. Extraneous variables potentially affecting new foster parents' risk for early exit were included by assessing the effect of county in the model. There was no control for differences that may have occurred within counties as the result of policy changes. However, as each county experienced similar changes and county did not have a statistically significant main effect, it is likely that any effect of policy changes did not influence interpretation of results.

Sample Size

The number of individuals applying for and being approved as foster parents capped the sample size at 52 foster families. While the sample size was adequate to identify large effects, it is not ideal. Failure to obtain expected relationships among variables in the model may have been because the sample size was not sufficient to allow for detection of small effects. When sample sizes are small, the potential for detecting statistically significant effects diminishes (Cohen & Cohen, 1983). A larger sample size is necessary to detect more subtle effects from variables (Orme & Tolman, 1986).

There were only 31 foster parent couples, and no single foster fathers. The number was not sufficient to include foster father variables in the predictive model. Results

indicated differences in how foster mothers and fathers in foster parent couples approached discipline and their roles with children. It is not known if these differences affected their intent to continue or exit from foster care.

Measurement and Data Collection Procedures

Telephone interviews. As previously stated, there are limitations to telephone interviews as a method of data collection. Ideally, the telephone survey instrument should be tested on a sample of new foster parents for reliability and clarity before being used in this study (Fink & Kosecoff, 1985). However, with the small number of new foster families available, the benefits of including all possible new foster parents in the study sample outweighed the cost of using an untested measure.

Some questions were more open to interpretation than anticipated. Responses to foster parents contact with the agency and satisfaction with services required additional clarification. First, foster parents could only estimate the number of telephone and face-to-face contacts. A second measure of contact as reported by foster care workers would be needed to have confidence in the accuracy of the data. Next, foster parents expressed multiple reasons for being satisfied and dissatisfied with agency services. Satisfaction did not fall on a continuum of satisfied and dissatisfied. Rather, foster parents indicated their satisfaction with some areas and dissatisfaction with others. An overall rating of satisfaction did not capture the complexity of this concept.

A third issue was the thoroughness of responses. Only one member of foster parent couples provided information about fostering experiences and intent to exit. Responses may have been different if both spouses were interviewed. However, the

primary intent was to determine risk for exit. Having one member of a foster parent couple considering leaving foster care still put the foster home at risk.

Telephone interviews with foster parents may have provided shorter, less descriptive responses than with face-to-face interviews (Fink & Kosecoff, 1985). Cost factors limited being able to do in-person interviews in three service districts. Interviews were conducted using a structured interview guide with open-ended questions to encourage subjects to respond to items in detail.

Assessment measures. Because the small sample size limited the number of variables included in the logistic regression model, a decision was made to use total scores for measures when available. Data obtained from subscale scores were lost. The BSI subscales provided data about symptom status for major psychological disorders including depression, anxiety, phobic anxiety, hostility, paranoid ideation, somatization, psychoticism, obsessive compulsive behaviors, as well as a measure of global functioning (Derogatis, 1993). The SSB included subscales measuring the amount of emotional, socializing, practical assistance, financial assistance, and advice available from family and friends (Vaux, Riedel, & Stewart, 1987). The total scores provided the best single measures of constructs for the logistic regression analysis.

There has been no uniformity for measuring foster parenting across studies that would make comparison of results easier. This study measured characteristics thought to influence foster parenting outcomes by using multiple instruments to assess individual and family attributes. With the exception of the FPRP and the PFPS-R, the assessment measures were not designed for use with foster parents. The PFPS-R was developed for

the larger study and the reliability of the scale is not available. Other child welfare studies have used the AAPI to assess foster parents (Gebel, 1996; Lee & Holland, 1991). Gebel (1996) reported reliability for two AAPI subscales. Analysis of data from 193 relative and non-relative foster parents produced a coefficient alpha of .85 for the physical discipline scale and .87 for the lack of empathy scale. Le Prohn (1993) reported reliability for the FPRP scale. Internal consistency of other measures in the assessment battery have not been reported for foster parents. The sample size of this study was not sufficient to analyze the reliability of assessment measures with the study sample.

Population norms for measures reflected how measures might apply to foster parents. Samples used for establishing reliability, validity, and norms for the PASNP were based on a sample of women (Attala, Hudson, & McSweeney, 1994). Though the authors recommend using the PASNP with domestic partners, the measure has not been tested with men. Norms used to determine standard scores for the DAS are based on a small sample of married couples (Spanier, 1989). Norms for the BSI and AAPI were developed for men and women and for African-Americans. Further investigation to determine reliability and validity of measures in the assessment battery with foster parents clearly is needed. In the meantime, these measures provide valuable data on foster parenting and direction for selecting measurement devices in the future.

The FPRP was developed before publication of the 1995 CWLA standards (CWLA, 1995) for family foster care. The instrument reflected foster parent roles for a private, long-term foster care program where the research was conducted. Considering the low ratings given to items on the Agency Partnership subscale by foster care workers and

foster parents, items may have asked about tasks that are not in the arena of foster parenting for DCS. Questions on the FPRP scale asked about foster parents' roles in setting agency policies, recruiting foster parents, and training foster parents and workers. Agency partnership may have been better measured with questions that asked about participation in case planning activities for foster children. Practice literature has recommended foster parents take an active role in recruiting and training foster parents and in developing agency policies (Pasztor & Wynne, 1995; NCFFC, 1991). However, foster care agencies have tended to ask foster parents to participate in case reviews and follow case plans (U. S. Department of Human Services, 1995).

In addition to evaluating instrumentation, it is important to consider characteristics that were not assessed. The initial assessment battery included measures of foster parent role expectations and the anticipated ability to enact the role. The study did not measure actual role performance once children were placed or if there were differences in pre-service expectations and perceptions of role responsibility after having some experience with foster children and the agency. Nor did the study assess if foster parents felt prepared to enact roles they perceived as their responsibility. Measures of perceived efficacy as a foster parent and as a parent would be useful for assessing how foster parents see their abilities. Differences between what they think they should do and perceive themselves as capable of doing could be predictive of foster parents at risk for early exit.

The difficulties of managing loss when children to whom attachments have formed leave foster care has influenced some foster parents' decisions about fostering (Ryan, 1985; Urquhart, 1989). Attachment is in part determined by a "goodness of fit" between

the temperaments of parents and children (Thomas & Chess, 1977). Doelling and Johnson (1989) pointed out that characteristics associated with placement duration such as accepting children's behavior and responding without harsh discipline are to some degree associated with the concept of temperament. Assessing applicants' temperament and their general expectations of children's temperament provides way to operationalize attachment before children are placed in the home. It also would be an indicator of the types of behaviors foster parents expect from children and are prepared to accept.

Considering the frustrations expressed about the inability to access services and the need for foster parents to work not only with foster care workers, but also with counselors, school personnel, and health care providers; assertiveness, problem solving abilities, and conflict management style are important characteristics for new foster parents. Foster parents who already are able to advocate for their needs and the needs of others, think of creative alternatives, and collaborate to resolve conflicts, may experience more success early on as foster parents than foster parents who are less adept in these skills. Those with less ability in these areas may be more easily frustrated with their role.

This study only considered basic demographic information about foster parents. Some foster parents had grown children. Others had delayed their own parenting. Foster families included married couples, divorced parents, single parents, and stepfamilies. More information about family composition, family structure, and changes in family membership prior to applying as foster parents would broaden an understanding foster family functioning.

Finally, the study focused primarily on pre-approval factors predicting early exits. Assessment of the degree of difficulty foster parents experience during the first three to six months of fostering would quantify reports from this and other studies about transitions to foster parenthood. Foster parents' subjective assessments of their concerns and rewards would provide more in depth information about foster parents' early experiences and how those experiences relate to decisions about continuing or leaving foster care.

Study Design

The study used a longitudinal panel design to assess foster parents prior to approval and then again six months later. When the study began, the approval process took approximately three months. It was anticipated that by six months, foster parents would be approved and providing placements. During the course of the study, changes in procedures for doing background checks on foster parents lengthened the application process considerably. As a result, some applications were still pending at six months and approved families were either awaiting placement or had a child recently placed. Changes in policies combined with delays in completing the first set of interviews meant that cohorts of foster parents interviewed later in the study had not been fostering as long as those who were approved earlier in the study. Foster families who were recently approved and had little or no experience with foster children remained enthusiastic about foster care.

Risk for Early Exit

The scope of this study was early exits from foster care. The study did not provide information about exits at other times. Early exit was defined as expressed intent to leave foster care six months after completing MAPP training. Foster parents provided

placements for varied lengths of time. Measuring intent to exit at a specific point in time did not mean that foster parents had been caring for foster children that long. However, foster parents did have equivalent lengths of experience with DCS.

Agency records were considered as alternative sources of data for determining when homes opened and closed. However, approval and closure dates in foster home case records are not accurate indicators of the length of time foster homes actively provide placements. Recording procedures of supervisors and their workers are not consistent across the service areas. Depending on supervisors' practices, the date of approval represents when workers complete reports, when they notify foster parents in writing of the home study decision, or when the county completes monthly workload reports.

Determining when foster parents ceased fostering is even less clear. With high caseloads and not enough placements for children, closing foster homes is not a priority. Foster care workers may know that foster parents intended to quit fostering, but continued to leave homes open in the hope foster parents agree to provide an occasional emergency placement.

Dates homes close are not necessarily when foster parents decided to discontinue as foster care providers. Home closures often are recorded when annual reviews indicate foster homes are not in use. By that time, foster parents have stopped fostering and any intervention by workers is too late.

Because of the difficulties in determining when foster homes closed from case records, risk for exit was determined by asking foster parents about their intent to continue as foster care service providers. Similar strategies have been used in other

research. Studies of job turnover in social work have used social workers' intent to seek other employment as a dependent variable (Drolen & Harrison, 1990; Siefert, Jayaratne, & Chess, 1991). Previous foster care research has asked foster parents about their intent to continue or discontinue in foster care (Rindfleisch & Bean, 1998; U. S. Department of Human Services, 1995). At the time of the follow-up interview, most subjects were still on agency rolls as foster parents and over half were actively providing placements. Foster parents indicating they would not provide additional foster care placements and those who were unsure were categorized as being at risk for early exit.

There are several disadvantages to using risk for exit as a dependent variable. First, foster parents in the at risk category did not indicate they would disrupt existing placements. It is not known if placements with foster parents "at risk" are more vulnerable for disruption than placements with those planning to continue as foster parents. No statistically significant difference was found between groups regarding placement disruptions. Foster parents "at risk" could continue to provide for children already with them for as long as the child remains in foster care. According to AFCARS data on Tennessee foster children, the mean length of time children had been in care on September 30, 1996, was 25.18 months; 50 percent of children had been in care at least 15.64 months (U. S. Department of Health and Human Services, 1998). Foster parents who continued to provide placements for children already in their care may remain in foster care past their first year as service providers. The likelihood that foster homes will remain open increases with age of the foster home (Hurl & Tucker, 1995). Even if these foster parents eventually exit, they will have provided stable home placements for children.

Second, it is impossible to know how long foster parents categorized as being at risk for exit will stay in foster care. Other studies have noted that foster parents express dissatisfaction but continue as foster care providers (Erkut, 1997; Hampson & Tavormina, 1980; Martin et al. 1993). Determining if foster parents at risk for early exit actually leave requires continued follow-up with families across their careers as service providers.

Considering foster parents' risk for early exit while they are still in the program also offers several advantages. First, foster parents are readily available. Studies with closed homes have reported difficulties locating former foster parents (Baring-Gould et al., 1983; Ryan, 1995; Urquhart, 1989). Former foster parents taking time to respond to questions about agency services would be expected to represent those with either more positive or more negative experiences rather than those with neutral views. The perspective of foster parents who have not left foster care identifies factors or combinations of factors that inhibit their continuance as service providers. This is the information agencies need to plan preventative measures to reduce dropout rates. It is too late to intervene after foster parents leave.

Study Strengths

In addition to limitations, the study had several strengths.

Sample Selection

Subjects came from three demographically similar, metropolitan service regions. These regions schedule pre-service training sessions for applicants in the county concurrently throughout the year. Rural regions may offer only one or two training

sessions per year. Using these study sites maximized the number of potential volunteers for the study.

In addition to the advantages stated in Chapter 3, recruiting new foster parents from pre-service training groups used the study design to control for previous experience, training, differences in agency policies and procedures, and historical changes in the system. As previously stated, some foster parents had prior experience and major changes in the agency policies occurred during the study period. However, the sample did share similar exposure to pre-service training and the differences in previous experience and agency policies were known.

This study included both foster parents for foster parent couples. Most studies with foster parents have obtained data from one parent available parent, usually foster mothers. Descriptive data and assessment measures contribute to understanding the role of foster fathers with children in care.

Measurement

The study obtained data from three sources, foster parents, foster care workers, and foster parent records. The availability of data from several sources allowed for validation of factors predictive of risk from different perspectives within the foster care system.

A battery of valid and reliable self-report measures was used to assess foster parents' parenting attitudes, mental health, family functioning, marital adjustment, verbal spouse abuse, level of social support, and perceived role responsibilities. Foster care workers quantified their assessments of new foster parents' abilities with a measure based

on the most current standards for practice in family foster care. Using standardized measures decreased measurement errors and enhanced the ability to detect effects. A battery of measures provided a more comprehensive assessment of conceptually relevant domains of foster parenthood than relying on a single instrument.

Collecting data from foster home records took advantage of information already reported by foster parents as part of the application process. These data provided additional sources of information about family composition, sources of social support, and interest in being foster parents.

Subjects in the study were interested in being foster parents. It was expected that they would want to be perceived in a positive light. Several steps were taken to assure that data collected from foster parents was accurate and thorough. First, participants were informed that the study was not connected with their application to be foster parents, that they could withdraw from the study at any time without reprisal, and that individuals' responses would not be shared with DCS. Members of the research team collected data rather than foster care workers, which further differentiated the research project from DCS.

Study procedures for standardized data collection further contributed to the accuracy of data collected. Before administering the battery of assessment measures, members of the research team for the larger project were trained. Each team member received a study manual. Questions about procedures were reviewed and decisions about modifications in data collection procedures were made in regularly scheduled team

meetings. One investigator completed telephone interviews by reading a questionnaire to respondents.

Design

This study is one of the few studies with foster parents to use a longitudinal design. Sampling foster parents at more than one point in time gave a clearer picture of how foster parents move through the system (Wulczyn, 1997). One problem with cross-sectional survey research is that samples of existing placements have been biased toward more successful foster parents. Less successful foster parents drop out of programs early. Sampling cohorts of foster parents prior to approval and then again after six months included foster parents of varying abilities in the sample.

A second strength of the study is testing a prospective model to predict foster parent exits. Inferences about how factors influence decisions about fostering are based on assessment of pre-approval factors as well as considering experiences with the system. Comparisons can be drawn between foster parents at risk and those who plan to continue.

Risk for Early Exit

Being at risk for exit does not mean that these foster parents will leave the system early. However, knowledge about factors predicting risk is crucial for developing preventative strategies to decrease foster parent dropouts. When foster parents inform agencies they are leaving, it is too late to intervene. Six months after MAPP training is a long enough time for most foster parents to have some experience as service providers with agencies. However, it is not long enough for problems with workers and the agency to become irreconcilable.

In addition to providing information about the strengths and needs of foster parents entering the system, studying the initial months as service providers gives insight into understanding foster parent development. Foster parenthood is comprised of multiple transactions among foster parents, foster children in their care, birth families, and agencies, all which contribute to foster care outcomes in a dynamic fashion. Knowledge about early foster parent experiences serves as a comparison point for further study of how salient foster parent characteristics change over time.

Future Research Priorities

Foster mothers who enter foster care with an understanding of developmentally appropriate behaviors for children are less at risk for leaving foster care. Foster parents also identify their roles as promoting children's social and emotional development and parenting. Other aspects of parenting such as having empathy for children and having appropriate parent child roles are related to how foster parents see their roles with birth families and the agency. Further investigation is needed to understand the interrelationships among dimensions of parenting and foster parenting. Particular attention should be given to how an understanding of child development relates to service needs identified for children, role strain, and satisfaction that foster parents experience in their roles.

A second factor decreasing the risk for exit is families' interest in adoption. In recent years, foster parents have become a growing resource for adoptive placements. However, practices of approving foster parents as adoptive homes vary from region to region. More information is needed to determine practice trends, factors that support

foster parents who adopt, and factors that influence adoptive parents' decisions to continue as foster parents for other children.

How providing placements for sibling groups decreases risk for exit is less clear. Further research is needed to assess how sibling placements are made, how siblings' relationships affect relationships with other foster family members, how foster parents cope with visits for children whose siblings are placed elsewhere, and the overall effects on children to live together or apart from family members.

More research is needed in the area of foster parents' satisfaction with the agency. Agency practices are cited as a source dissatisfaction. However satisfaction appears to be a multidimensional construct based more on relational aspects, and role expectations rather than actual contact with the agency. Within foster care research, the term foster care satisfaction has been used to characterize individuals' attitudes toward foster care workers and the agency (Baring-Gould et al. 1983; Hampson & Tavormina, 1980; Martin et al., 1992). Additionally, satisfaction has been used to characterize individuals' attitudes toward their roles as foster parents (Erkut, 1997). Foster parent satisfaction may refer to attitudes toward workers, agencies, birth families, and foster children. It also may characterize attitudes toward role responsibilities of foster parenthood. Furthermore, any evaluation of rewards and frustrations associated with fostering needs to take into account how individuals' experiences as foster parents compare with their expectations and how prepared they are to fulfill the role.

The demographic characteristics of this sample indicated that foster families experience the same types of changes that affect families in general. Models of working

with foster parents are based on the assumption that foster parents are older, married, with lower educational levels, and only one parent working outside the home (U. S. Department of Human Services, 1995; Fine & Pape, 1990). There is very little known about contemporary foster parents. Ongoing social change suggests that demographic characteristics of foster parents be updated so that results of statistical analyses of studies can be placed in context. We need to know more about foster parents who have grown children, those who have delayed parenting, and single foster parents. In addition, more information is needed to understand how families within dual-worker households, within divorced families, and within stepfamilies adjust to foster parenthood.

Findings from this study add to understanding similarities and differences in characteristics of foster mothers and fathers in foster parent couples. A larger sample of foster fathers is needed to examine how foster father characteristics alone, or in combination with foster mother characteristics, influence couples' decisions to continue as foster care providers.Though some foster fathers entered foster care because of their wives' interest in the program, other foster fathers expressed reasons for fostering that were similar to foster mothers' interest. More information is needed about foster fathers' interests in providing foster care placements, how they see their role with foster children, and how that role is performed. In addition, information is needed about how foster care workers perceive foster fathers and if those perceptions accurately depict the role foster fathers perform with children. Such efforts would expand our understanding of foster fathers' influences on foster parenting and is a necessary step for improving services for children.

Thirty five percent of eligible participant families in this study completed MAPP training but were not approved. Because these individuals were not foster parents and thus not at risk for leaving, they were not included in the data analysis for predicting exits. It is not known how many of these applicants were not approved because they did not meet minimum standards as foster parents, and how many self-selected out of the program before their home studies were completed. Child welfare literature has suggested that agencies lose potential foster home placements when applicants become discouraged with long waits and cumbersome approval processes (Pasztor & Wynne, 1995). Encouraging foster parents during the application phase may keep some families in the program. It also increases the risk of approving less qualified foster parents. Additional information is needed about applicants who drop out prior approval.

Additional psychometric work is clearly called for with instruments assessing foster parent characteristics. Establishing reliability of measures with foster parents and norms for foster parent populations would provide a basis for interpreting results with foster parent samples. Foster parenting needs to be assessed with measures that tap the relevant domains of foster parenting. More effort should be directed toward developing a theoretical understanding of foster parent role conception, their perception of competence, the quality of role performance, and satisfaction with organizational relationships and with the role.

Future research should consider how relevant constructs for parenting identified in a transactional model (e.g. Cicchetti & Howes, 1991; Vondra & Belsky, 1989) influence foster care outcomes. Particular emphasis should be given to understanding how the

transactions among variables may support or inhibit quality of the caregiving environment provided by foster parents. Further examination of the number of family risk factors, as well a type of characteristics placing foster parents at risk, may increase understanding of how this constellation of variables affects foster care outcomes. Establishing assessment protocols with reliable, theoretically sound measures expands and refines the understanding of foster parenthood. This is a necessary step in building knowledge about foster care to help foster parents with the challenges of being foster care service providers, and, more importantly, to improve the quality of services provided to children in care.

Conclusions

This study collected data from a voluntary sample of newly approved foster parents. It provides a generalized description of characteristics of new foster parents. While several hypotheses were not supported, findings from the study proved useful. Identifying factors that decrease risk for early exit provides agencies with needed information for planning strategies to prevent dropout. Decreasing foster parent turnover allows new foster homes to develop as service providers and increases stability for children in care. Improving services includes understanding how foster parents Perceive their roles. Maximizing the potential of foster home placements will improve the quality of services for foster children.

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APPENDICES

Appendix A. Confidentiality Pledge

CONFIDENTIALITY PLEDGE
FOSTER CHILD MENTAL HEALTH STUDY

Principal Investigator: John G. Orme, Ph.D.

I, _____, understand that any and all information that I obtain about clients in connection with this research project is to remain completely confidential.

Confidentiality is to be specifically ensured in three ways:

- Original records will not be taken from the agency at any time.
- Original records will be read only in specifically designated areas of the clinic and will not be removed from these areas at any time.
- Participants in the project will not discuss any client information with anyone other than the Principal Investigator or other members of the research team, nor discuss such information in public or in the presence of anyone outside the project.
- No data will be analyzed without the express permission of the Principal Investigator, and in such cases the data will be analyzed using only a specially constructed data set that contains no client names.

I have received a copy of this confidentiality pledge and agree to all terms.

_____ _____
(Signature) (Date)

_____ _____
(Principal Investigator) (Date)

Appendix B. Foster Parent Consent to Participate

FOSTER PARENT
CONSENT TO PARTICIPATE

We are inviting you to be part of a study of foster parents. This study is being done by the University of Tennessee with the help of the Tennessee Department of Children's Services (DCS). The purpose of this study is to help us better understand the influence of foster parents on foster children, and to help us understand the training and services that foster parents need.

If you agree to be part of this study, we will ask you to complete a series of questionnaires about you or your family during MAPP training, starting at week three and ending at week eight. Also, after a foster child is placed in your home, we will ask you to complete several questionnaires about your foster child 60 days after placement, and then again after one year, or earlier if the child leaves your care before that time. In addition, if you agree, the worker who completes your home study will answer some questions about you as a foster parent. Finally, a researcher from the University of Tennessee, Dr. John Orme, another faculty member, or a graduate student member of his research team, will collect information from your "Family Income and Expenditures" questionnaire, your "Family Assessment Profile," and your foster family file at DCS (e.g., date foster child placed, date and reason foster child left placement, if applicable, and type of services received from DCS).

Protections for you. Your participation in this study is entirely voluntary. If you decide not to participate only basic demographic information will be collected about you (e.g., age, race, family structure) from your DCS foster family file, but your name will not be linked to this information. If you do agree to participate, the information about you will be stored on computer without your name or other identifying information, and only the research team will have access to this information. **DCS will receive research results about all families combined, but they will not get information about you as an individual or your particular family.**

If you do not agree to be part of this study, it will not affect your status as foster parents in any way, nor any services you may receive from the state of Tennessee or the University of Tennessee. However, we do hope that you will agree to help us in our efforts to improve the services provided for foster parents and foster children. If you agree to participate and then change your mind, you may withdraw from the study at any time without penalty and without DCS being notified. Also, except for basic demographic information (e.g., age, race, family structure) the information about you will be destroyed. Not being part of the study will not affect your status or services at DCS or any other State agency.

Risks and benefits. There are no anticipated risks to you from participating in this study. Being part of the study will give you the opportunity to help us help foster children and foster families.

As a token of our appreciation, your family will be offered a $25 Wal-Mart gift certificate for completion of the entire set of questionnaires during MAPP training, another $25 Wal-Mart gift certificate for completion of the first set of questionnaires about your foster child, and another $25 Wal-Mart gift certificate for completion of the second set of questionnaires about your foster child.

The name and telephone number of the director of this study, Dr. John Orme, are listed below. You may contact him if you have any questions or concerns about this study.

I have read the informed consent document and understand the explanation of the study. I agree to participate in the study and understand that I may withdraw from the study at any time.

_____
Name (Please Print)

_____
Signature/Date Signed

Project Director
John G. Orme, Ph.D.
Associate Professor
(423) 974-7503

Appendix C. MAPP Trainer Consent to Participate

MAPP TRAINER
CONSENT TO PARTICIPATE

We are inviting you to participate in a study of the characteristics of foster parents and their experiences while foster parenting. This study is being conducted by the University of Tennessee with the help of the Tennessee Department of Children's Services (DCS). The purpose of this study is to help us better understand the influence of foster parents on foster children, and to help us understand the training and services that foster parents need to provide effective services.

If you agree to participate in this study, you will be asked to complete a questionnaire about your professional opinion of the potential of each parent in each of your MAPP groups to act as a foster parent.

Protections for you. Your participation in this study is entirely voluntary and DCS will not be informed of your decision to participate or not participate. If you do agree to participate, the information you provide will be stored on computer without your name or other identifying information, and only the research team will have access to this information. **DCS will receive research results in aggregate form, but DCS will not have access to information that you as an individual provide.**

If you do not agree to participate in this study, it will not affect your status an employee of DCS. However, we do hope that you will agree to help us. If you agree to participate and then change your mind, you may withdraw from the study at any time without it affecting your status as an employee of DCS or any other State agency, including the University of Tennessee.

Risks and benefits. There are no anticipated risks to you from participating in this study. The only benefit is the opportunity to express your professional opinions and the possibility of helping contribute to improving the quality of foster parents and the services provided to them.

The name and telephone number of the director of this study, Dr. John Orme, are listed below. You may contact him if you have any questions or concerns about this study.

I have read the informed consent document and understand the explanation of the study. I agree to participate in the study and understand that I may withdraw from the study at any time.

_____
Name (Please Print)

_____
Signature/Date Signed

Principal Investigator
John G. Orme, Ph.D.
Associate Professor

(423) 974-7503

Appendix D. Foster Care Worker Consent to Participate

FOSTER CARE WORKER
CONSENT TO PARTICIPATE

We are inviting you to participate in a study of how foster care workers view the role of foster parents. This study is being conducted by the University of Tennessee Children's Mental Health Services Research Center. The purpose of this study is to help us better understand what foster care workers expect of foster mothers and fathers.

If you agree to participate in this study, you will be asked to complete a questionnaire that asks about your professional opinion of what foster mothers should do, and a comparable questionnaire about foster fathers. Also, you will be asked to complete a brief questionnaire about your background.

Protections for you. Your participation in this study is entirely voluntary and DCS will not be informed of your decision to participate or not participate. If you do agree to participate, the information you provide will be stored on computer without your name or other identifying information, and only the research team will have access to this information. **DCS will receive research results in aggregate form, but DCS will not have access to information that you as an individual provide.**

If you do not agree to participate in this study, it will not affect your status an employee of DCS. However, we do hope that you will agree to help us. If you agree to participate and then change your mind, you may withdraw from the study at any time without it affecting your status as an employee of DCS or any other State agency, including the University of Tennessee.

Risks and benefits. There are no anticipated risks to you from participating in this study. The only benefit is the opportunity to express your professional opinions and the possibility of helping contribute to improving the quality of services provided to foster parents and children.

The name and telephone number of the director of this study, Dr. John Orme, are listed below. You may contact him if you have any questions or concerns about this study.

I have read the informed consent document and understand the explanation of the study. I agree to participate in the study and understand that I may withdraw from the study at any time.

Name (Please Print)

_____

_____
Signature/Date Signed

John G. Orme, Ph.D.
Associate Professor
Principal Investigator
John G. Orme
(423) 974-7503

Appendix E. Foster Parent Letter for Follow-up Interview

THE UNIVERSITY OF TENNESSEE
KNOXVILLE

College of Social Work
Ph.D. Program
308 Henson Hall
Knoxville, Tennessee 37996-3333
(615) 974-6481
FAX (615) 974-4803

Foster Parent Name
Address

Date

Dear

I want to thank you for your help so far in the foster family study being conducted by the Children's Mental Health Services Research Center at the University of Tennessee. I will be using some of the information we collected for this study for my dissertation, and I would like to ask you for some additional information. I will be calling you in the within the next two weeks to ask about your experiences as a foster parent. The telephone interview will take about 10 minutes. If I call at an inconvenient time, I will arrange a time to you back later.

If you have any questions, or do not want to participate, please write or call either the project director, John Orme (423-974-7503), or me. If you do not want to participate, it will in no way affect your treatment or receipt of services from the Department of Children's Services (DCS), the University of Tennessee, or any other State agency. Also, DCS will not be informed if you choose to participate or not.

Again, thank you for assisting in our efforts to improve foster care services. I look forward to talking with you soon.

Sincerely,

Katie Rhodes, MSSW
Project Researcher

Focus
6400 Lee Highway
Chattanooga, Tennessee 37415

423-899-5081

Appendix F. Description of MAPP Program Meetings

Meeting	Meeting Description
1	WELCOME TO THE MAPP PROGRAM Acquaints leaders and participants with MAPP Program and each other. Explanation of the preparation and mutual selection process of MAPP Program; discussion of: foster care, adoption, and permanency planning; roles, responsibilities, and rewards.
2	WHERE MAPP LEADS: A FOSTER CARE AND ADOPTION EXPERIENCE Overview of the foster care and adoption experience from the perspectives of clients (children and parents), foster parents, adoptive parents, and social workers. Demonstrates the stresses and losses which can lead to foster care placements or adoption; what happens if foster home placements or adoption do not work out; how families are reunited; how children are moved into adoption; and how some youth in care move into independent living.
3	LOSES AND GAINS: THE NEED TO BE A LOSS EXPERT Explores the impact of separation on the growth and development of children, and the impact of foster care and adoptive placement on the feelings and behaviors of children and parents. Examines personal losses (death, divorce, infertility, children leaving home) and how difficult life experiences affect success as foster parents or adoptive parents. Emphasizes the partnership roles of foster parents and adoptive parents and social workers in turning separation losses into gains.
4	HELPING CHILDREN WITH ATTACHMENTS Explores subjects of attachment and child development. Focuses on how attachments are formed and needs of children in foster care and adoption. Discusses the partnership roles of foster parents, adoptive parents, and social workers in helping children form new attachments.
5	HELPING CHILDREN LEARN APPROPRIATE BEHAVIORS Discusses techniques for managing behavior, with an emphasis on alternatives to physical punishment. Topics include special issues in discipline of children who have been physically abused. Techniques include being a 'behavior detective', reinforcements, time out, mutual problem solving, structuring and setting limits, negotiating and contracting. Emphasis is on partnership between foster/adoptive parents and social workers.
6	HELPING CHILDREN WITH BIRTH FAMILY CONNECTIONS Examine the importance of birth family to the child in foster care placement or adoptive placement; how to support positive feelings/contacts between children and their previous families. Considers special issues of how to help children understand their backgrounds, what happens when there is no contact, and how to support feelings/contacts between child and previous foster families, group home friends, or previous adoptive families.
7	GAINS AND LOSSES: HELPING CHILDREN LEAVE FOSTER CARE Discusses family reunification as a primary case planning goal as well as alternatives such as foster care, adoption, and independent living. Examines the impact of disruptions. Focuses on goals of stabilizing placements.
8	UNDERSTANDING THE IMPACT OF FOSTERING AND ADOPTING Discusses the impact of foster and adoptive parents' efforts on the foster and adoptive families, specifically how experience will affect marriage, children, relatives, friends, job, and income.
9	PERSPECTIVES IN FOSTER PARENTING AND ADOPTIVE PARENTING Meeting features guest foster and adoptive families to talk about their personal experiences including: impact on marriage and family, visiting parents, discipline, reunification and adoption.
10	ENDINGS AND BEGINNINGS Assessing your own strengths and needs as a foster or adoptive parent.

Source: MAPP Meeting Handout.

Appendix G. Brief Symptom Inventory

The Brief Symptom Inventory is published and distributed by National Computer Systems Inc., P. O. Box 1416, Minneapolis, Minnesota 55440.

Appendix H. Adolescent Parenting Inventory

The Adult Adolescent Parenting Inventory is published and distributed by Family Development Resources, Inc., 3160 Pinebrook Road, Park City, Utah 84098.

Appendix I. Dyadic Adjustment Scale

DYADIC ADJUSTMENT SCALE (DAS)

Most persons have disagreements with their relationships. Please indicate below the appropriate extent of the agreement or disagreement between you and your partner for each item on the following list.

5 = Always agree
4 = Almost always agree
3 = Occasionally disagree
2 = Frequently disagree
1 = Almost always disagree
0 = Always disagree

___ 1. Handling family finances
___ 2. Matters of recreation
___ 3. Religious matters
___ 4. Demonstration of affection
___ 5. Friends
___ 6. Sex relations
___ 7. Conventionality (correct or proper behavior)
___ 8. Philosophy of life
___ 9. Ways of dealing with in-laws
___ 10. Aims, goals, and things believed important
___ 11. Amount of time spent together
___ 12. Making major decisions
___ 13. Household tasks
___ 14. Leisure time interests
___ 15. Career decisions

Please indicate below approximately how often the following items occur between you and your partner.

1 = All the time
2 = Most of the time
3 = More often than not
4 = Occasionally
5 = Rarely
6 = Never

___ 16. How often do you discuss or have you considered divorce, separation, or terminating the relationship?
___ 17. How often do you or your mate leave the house after a fight?

___ 18. In general, how often do you think things between you and your partner are going well?
___ 19. Do you confide in your mate?
___ 20. Do you ever regret that you married (or lived together)?
___ 21. How often do you and your partner quarrel?
___ 22. How often do you and your mate "get on each other's nerves?"

_____

_____

23. Do you kiss your mate?

Every day	Almost every day	Occasionally	Rarely	Never
4	3	2	1	0

24. Do you and your mate engage in outside interests together?

Every day	Almost every day	Occasionally	Rarely	Never
4	3	2	1	0

How often would you say the following events occur between you and your mate?

1 = Never
2 = Less than once a month
3 = Once or twice a month
4 = Once or twice a week
5 = Once a day
6 = More often

___ 25. Have a stimulating exchange of ideas
___ 26. Laugh together
___ 27. Calmly discuss something
___ 28. Work together on a project

There are some things about which couples sometimes agree and sometimes disagree. Indicate if either item below caused differences of opinions or problems in your relationship during the past few weeks. (Circle yes or no)

Yes No 29. Being too tired for sex
Yes No 30. Not showing love

31. The numbers on the following line represent different degrees of happiness in your relationship. The middle point, "happy," represents the degree of happiness of most relationships. Please circle the number that best describes the degree of happiness, all things considered, of your relationship.

0 1 2 3 4 5 6

Extremely unhappy Fairly unhappy A little unhappy Happy Very happy Extremely happy Perfect

---

---

32. Please circle the number of **one** of the following statements that best describes how you feel about the future of your relationship.

5 I want desperately for my relationship to succeed, and would go to almost any length to see that it does.
4 I want very much for my relationship to succeed, and will do all that I can to see that it does.
3 I want very much for my relationship to succeed, and will do my fair share to see that it does.
2 It would be nice if my relationship succeeded, but I can't do much more than I am doing now to make it succeed.
1 It would be nice if it succeeded, but I refuse to do any more than I am doing now to keep the relationship going.
0 My relationship can never succeed, and there is no more that I can do to keep the relationship going.

Appendix J. Partner Abuse Scale: Non-Physical



PARTNER ABUSE SCALE: Non-physical (PASNP)

Name: _____ Today's Date: _____

This questionnaire is designed to measure the non-physical abuse you have experienced in your relationship with your partner. It is not a test, so there are no right or wrong answers. Answer each item as carefully and as accurately as you can by placing a number beside each one as follows:

1 = None of the time
2 = Very rarely
3 = A little of the time
4 = Some of the time
5 = A good part of the time
6 = Most of the time
7 = All of the time

---

1. _____ My partner belittles me.
2. _____ My partner demands obedience to his or her whims.
3. _____ My partner becomes surly and angry if I say he or she is drinking too much.
4. _____ My partner demands that I perform sex acts that I do not enjoy or like.
5. _____ My partner becomes very upset if my work is not done when he or she thinks it should be.
6. _____ My partner does not want me to have any male friends.
7. _____ My partner tells me I am ugly and unattractive.
8. _____ My partner tells me I couldn't manage or take care of myself without him or her.
9. _____ My partner acts like I am his or her personal servant.
10. _____ My partner insults or shames me in front of others.
11. _____ My partner becomes very angry if I disagree with his or her point of view.
12. _____ My partner is stingy in giving me money.
13. _____ My partner belittles me intellectually.
14. _____ My partner demands that I stay home.
15. _____ My partner feels that I should not work or go to school.
16. _____ My partner does not want me to socialize with my female friends.
17. _____ My partner demands sex whether I want it or not.
18. _____ My partner screams and yells at me.
19. _____ My partner shouts and screams at me when he or she drinks.
20. _____ My partner orders me around.
21. _____ My partner has no respect for my feelings.
22. _____ My partner acts like a bully towards me.
23. _____ My partner frightens me.
24. _____ My partner treats me like a dunce.
25. _____ My partner is surly and rude to me.

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Appendix K. Family Assessment Device-General Functioning Subscale

FAMILY ASSESSMENT DEVICE (FAD)

INSTRUCTIONS

This booklet contains a number of statements about families. Please read each statement carefully, and decide how well it describes your own family. You should answer according to how you see your family.

For each statement there are four (4) possible responses:

Strongly Agree (SA)	Check SA if you feel that the statement describes your family very accurately
Agree (A)	Check A if you feel that the statement describes your family for the most part.
Disagree (D)	Check D if you feel that the statement does not describe your family for the most part.
Strongly Disagree (SD)	Check SD if you feel that the statement does not describe your family at all.

These four responses will appear below each statement like this:

41. We are not satisfied with anything short of perfection.

_____ SA _____ A _____ D _____ SD

The answer spaces for statement 41 would look like this. For each statement in the booklet there is an answer space below.

Try not to spend too much time thinking about each statement, but respond as quickly and as honestly as you can. If you have trouble with one, answer with your first reaction. Please be sure to answer every statement and mark all your answers in the space provided below each statement.

Strongly Agree (SA)	Check SA if you feel that the statement describes your family very accurately
Agree (A)	Check A if you feel that the statement describes your family for the most part.
Disagree (D)	Check D if you feel that the statement does not describe your family for the most part.
Strongly Disagree (SD)	Check SD if you feel that the statement does not describe your family at all.

1. Planning family activities is difficult because we misunderstand each other.

   _____ SA _____ A _____ D _____ SD

2. In times of crisis we can turn to each other for support.

   _____ SA _____ A _____ D _____ SD

3. We cannot talk to each other about the sadness we feel.

   _____ SA _____ A _____ D _____ SD

4. Individuals are accepted for what they are.

   _____ SA _____ A _____ D _____ SD

5. We avoid discussing our fears and concerns.

   _____ SA _____ A _____ D _____ SD

6. We can express feelings to each other.

   _____ SA _____ A _____ D _____ SD

7. There are lots of bad feelings in the family.

   _____ SA _____ A _____ D _____ SD

8. We feel accepted for what we are.

   _____ SA _____ A _____ D _____ SD

Strongly Agree (SA)	Check SA if you feel that the statement describes your family very accurately
Agree (A)	Check A if you feel that the statement describes your family for the most part.
Disagree (D)	Check D if you feel that the statement does not describe your family for the most part.
Strongly Disagree (SD)	Check SD if you feel that the statement does not describe your family at all.

9. Making decisions is a problem for our family.

_____ SA _____ A _____ D _____ SD

10. We are able to make decisions about how to solve problems.

_____ SA _____ A _____ D _____ SD

11. We don't get along well together.

_____ SA _____ A _____ D _____ SD

12. We confide in each other.

_____ SA _____ A _____ D _____ SD

Appendix L. Social Support Behavior Scale

SOCIAL SUPPORT BEHAVIORS SCALE (SSB)

People help each other out in a lot of different ways. Suppose you had some kind of problem (were upset about something, needed help with a practical problem, were broke, or needed some advice or guidance), how **likely** would (a) members of your **family**, and (b) your **friends** be to help you out in each of the specific ways listed below. We realize you may rarely need this kind of help, but **if you did** would your family and friends help in the ways indicated. Try to base your answers on your past experience with these people. Use the scale below, and circle one number under family, and one under friends, in each row.

1 = **No one** would do this
2 = **Someone might** do this
3 = **Some** family member/friend would **probably** do this
4 = **Some** family member/friend would **certainly** do this
5 = **Most** family members/friends would **certainly** do this

	(a) Family	**(b) Friends**
1. Would suggest doing something, just to take my mind off my problems.	1 2 3 4 5	1 2 3 4 5
2. Would visit with me, or invite me over.	1 2 3 4 5	1 2 3 4 5
3. Would comfort me if I was upset.	1 2 3 4 5	1 2 3 4 5
4. Would give me a ride if I needed one.	1 2 3 4 5	1 2 3 4 5
5. Would have lunch or dinner with me.	1 2 3 4 5	1 2 3 4 5
6. Would look after my belongings (house, pets, etc.) for a while.	1 2 3 4 5	1 2 3 4 5
7. Would loan me a car if I needed one.	1 2 3 4 5	1 2 3 4 5
8. Would joke around or suggest doing something to cheer me up.	1 2 3 4 5	1 2 3 4 5
9. Would go to a movie or concert with me.	1 2 3 4 5	1 2 3 4 5
10. Would suggest how I could find out more about a situation.	1 2 3 4 5	1 2 3 4 5
11. Would help me out with a move or other big chore.	1 2 3 4 5	1 2 3 4 5
12. Would listen if I needed to talk about my feelings.	1 2 3 4 5	1 2 3 4 5

1 = **No one** would do this
2 = **Someone might** do this
3 = **Some** family member/friend would **probably** do this
4 = **Some** family member/friend would **certainly** do this
5 = **Most** family members/friends would **certainly** do this

	(a) Family	**(b) Friends**
13. Would have a good time with me.	1 2 3 4 5	1 2 3 4 5
14. Would pay for my lunch if I was broke.	1 2 3 4 5	1 2 3 4 5
15. Would suggest a way I might do something.	1 2 3 4 5	1 2 3 4 5
16. Would give me encouragement to do something difficult.	1 2 3 4 5	1 2 3 4 5
17. Would give me advice about what to do.	1 2 3 4 5	1 2 3 4 5
18. Would chat with me.	1 2 3 4 5	1 2 3 4 5
19. Would help me figure out what I wanted to do.	1 2 3 4 5	1 2 3 4 5
20. Would show me that they understood how I was feeling.	1 2 3 4 5	1 2 3 4 5
21. Would buy me a drink if I was short of money.	1 2 3 4 5	1 2 3 4 5
22. Would help me decide what to do.	1 2 3 4 5	1 2 3 4 5
23. Would give me a hug, or otherwise show me I was cared about.	1 2 3 4 5	1 2 3 4 5
24. Would call me just to see how I was doing.	1 2 3 4 5	1 2 3 4 5
25. Would help me figure out what was going on.	1 2 3 4 5	1 2 3 4 5
26. Would help me out with some necessary purchase.	1 2 3 4 5	1 2 3 4 5
27. Would not pass judgment on me.	1 2 3 4 5	1 2 3 4 5
28. Would tell me who to talk to for help.	1 2 3 4 5	1 2 3 4 5
29. Would loan me money for an indefinite period.	1 2 3 4 5	1 2 3 4 5
30. Would be sympathetic if I was upset.	1 2 3 4 5	1 2 3 4 5
31. Would stick by me in a crunch.	1 2 3 4 5	1 2 3 4 5

1 = **No one** would do this
2 = **Someone might** do this
3 = **Some** family member/friend would **probably** do this
4 = **Some** family member/friend would **certainly** do this
5 = **Most** family members/friends would **certainly** do this

	(a) Family	**(b) Friends**
32. Would buy me clothes if I was short of money.	1 2 3 4 5	1 2 3 4 5
33. Would tell me about the available choices and options.	1 2 3 4 5	1 2 3 4 5
34. Would loan me tools, equipment or appliances if I needed them.	1 2 3 4 5	1 2 3 4 5
35. Would give me reasons why I should or should not do something.	1 2 3 4 5	1 2 3 4 5
36. Would show affection for me.	1 2 3 4 5	1 2 3 4 5
37. Would show me how to do something I didn't know how to do.	1 2 3 4 5	1 2 3 4 5
38. Would bring me little presents of things I needed.	1 2 3 4 5	1 2 3 4 5
39. Would tell me the best way to get something done.	1 2 3 4 5	1 2 3 4 5
40. Would talk to other people, to arrange something for me.	1 2 3 4 5	1 2 3 4 5
41. Would loan me money and want to "forget about it."	1 2 3 4 5	1 2 3 4 5
42. Would tell me what to do.	1 2 3 4 5	1 2 3 4 5
43. Would offer me a place to stay for a while.	1 2 3 4 5	1 2 3 4 5
44. Would help me think about a problem.	1 2 3 4 5	1 2 3 4 5
45. Would loan me a fairly large sum of money (say the equivalent of a month's rent or mortgage).	1 2 3 4 5	1 2 3 4 5

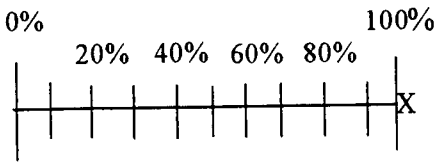
Appendix M. Foster Parent Role Performance Scale

WHAT FOSTER PARENTS DO

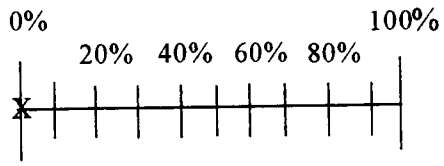
Below is a list of tasks that may need to be done for a foster child or for the foster agency. You may have done many of these things. For each item, please place an X on the line to show how much responsibility the foster parent should have for that task.

Examples

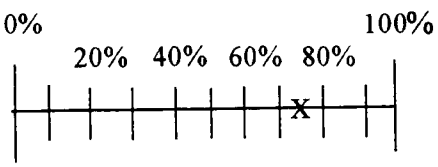
If you think the foster parent should have complete responsibility for that task, you might mark the line like this:



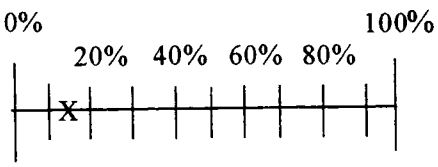
If you think the foster parent should have no responsibility for that task, you might mark the line like this:

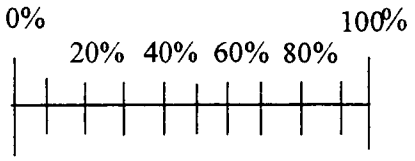
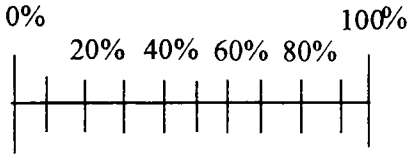
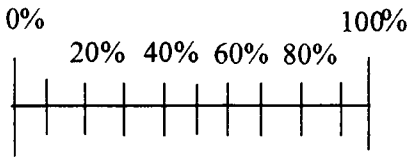
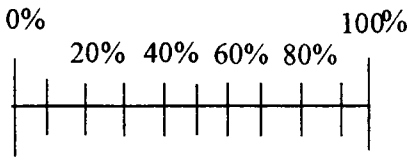
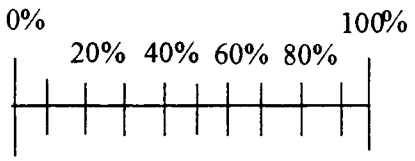
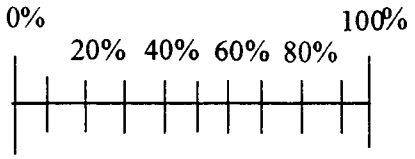
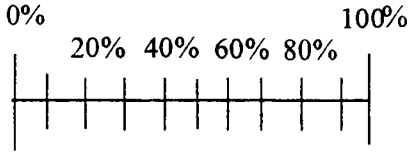
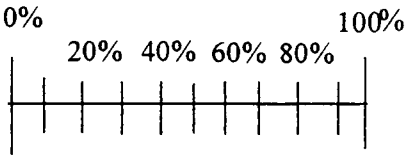


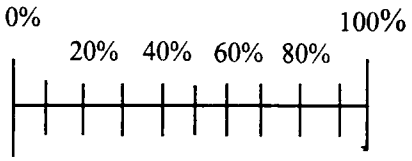
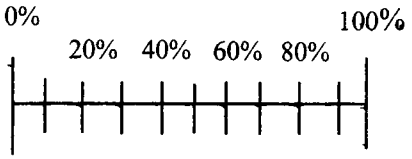
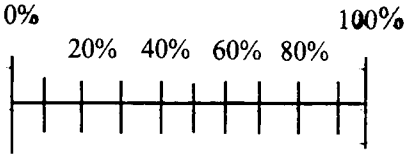
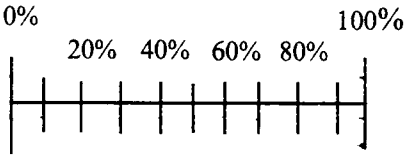
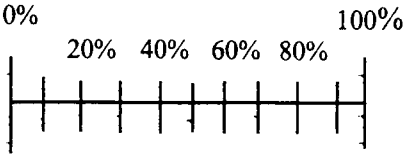
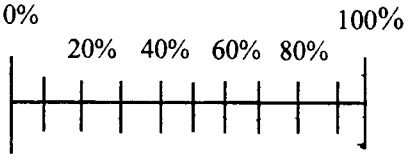
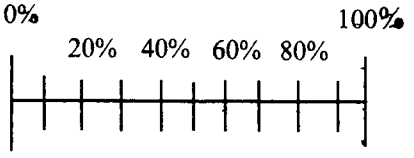
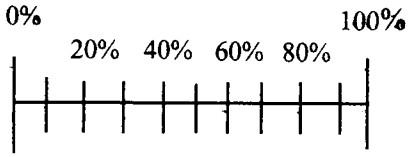
If you think the foster parent should be mostly responsible, but not totally responsible, you might mark the line like

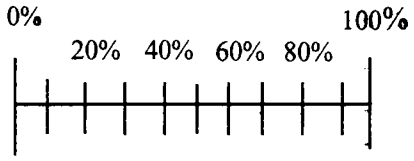
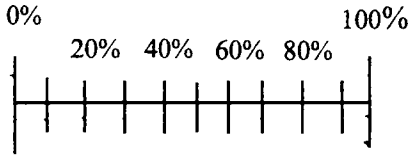
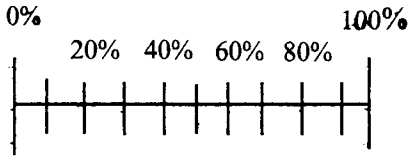
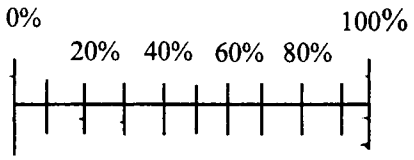
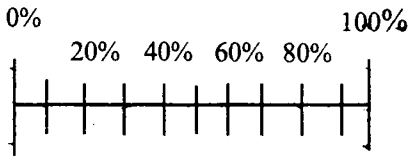
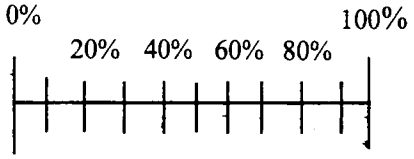
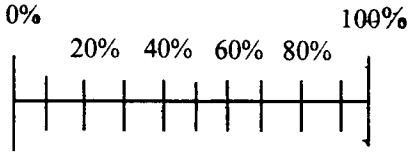
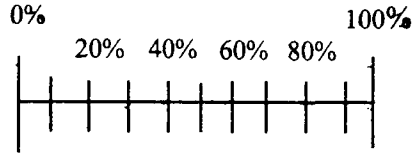


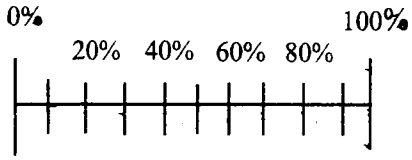
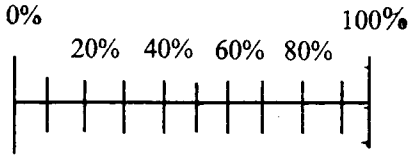
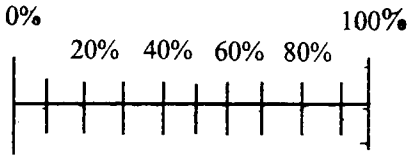
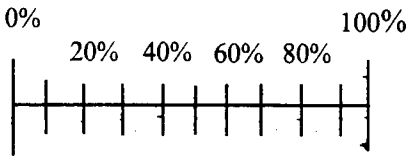
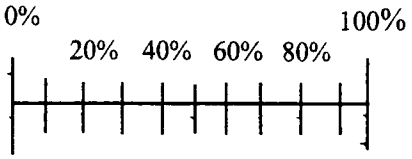
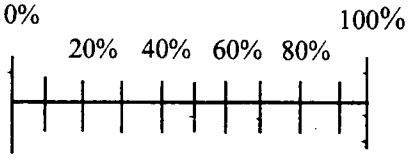
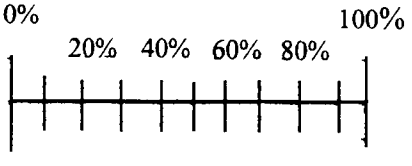
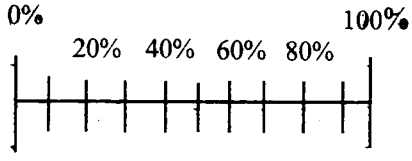
If you think the foster parent should be only a little bit responsible, might mark the line like this:

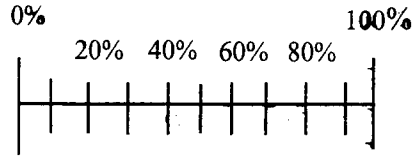
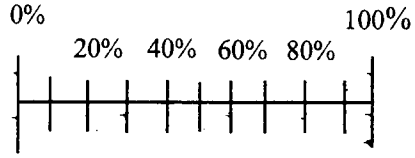
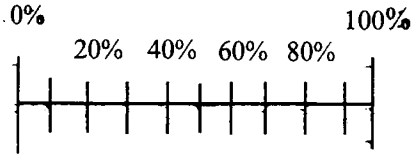
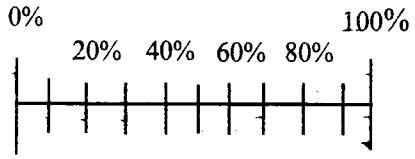
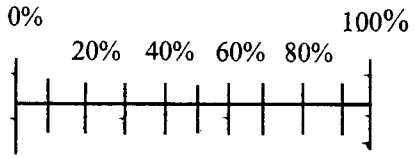
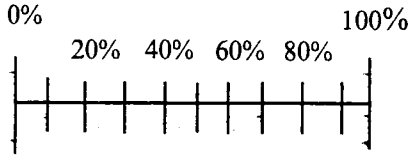
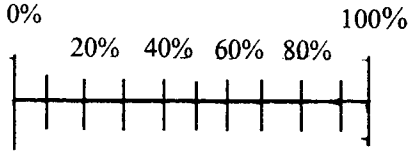
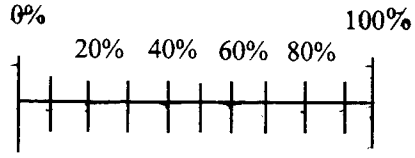


ACTIVITY	FOSTER PARENT'S RESPONSIBILITY
1. Providing the child with birthday or Christmas presents.	
2. Helping foster child with emotional problems.	
3. Helping to build child's self confidence.	
4. Promoting the child's spirituality.	
5. Recruiting new foster families.	
6. Helping foster child develop physical skills and social skills which need improvement.	
7. Preparing teenage foster child to handle sickness, loneliness, and other problems once the child is on his or her own.	
8. Transporting child to visits with birth parents or other relatives.	

ACTIVITY	FOSTER PARENT'S RESPONSIBILITY
9. Assessing the child's level of development.	
10. Training new social workers to work with foster families.	
11. Talking to birth parents about the child's behavior.	
12. Keeping a record of a child's foster placement history and progress notes.	
13. Talking to child's birth family about child's adjustment to foster care.	
14. Responding to medical emergencies at school.	
15. Supervising the child's recreation.	
16. Planning new foster care services for the agency.	

ACTIVITY	FOSTER PARENT'S RESPONSIBILITY
17. Selecting the child's counselor or therapist.	
18. Selecting a child's school.	
19. Helping teenage foster child to develop friends who can provide positive support and appropriate companionship.	
20. Seeking special funds for special activities for the foster child.	
21. Helping foster child deal with issues related to being separated from his or her birth parents.	
22. Arranging visits with birth parents.	
23. Keeping child's educational records.	
24. Scheduling the child's medical and dental appointments.	

ACTIVITY	FOSTER PARENT'S RESPONSIBILITY
25. Helping with public relations for the foster care agency.	
26. Helping a child choose a religion.	
27. Arranging visits with the foster child's brothers and sisters.	
28. Helping teenage foster child find housing when she or he approaches emancipation.	
29. Investigating complaints against social workers.	
30. Shopping for a child's clothes.	
31. Supervising visits between foster child and birth parents.	
32. Teaching foster child how to deal with future relationships with members of her or his birth family.	

ACTIVITY	FOSTER PARENT'S RESPONSIBILITY
33. Keeping a child's medical records.	
34. Talking to child's counselor or therapist about the child's progress.	
35. Deciding the best way to discipline a foster child.	
36. Conducting in-service training for other foster parents.	
37. Working with teachers to help the foster child do better in school.	
38. Teaching teenage foster child housekeeping and home maintenance skills so she or he can maintain a home independently.	
39. Training new foster parents.	
40. Transporting the child to medical or dental appointments.	

Appendix N. Potential for Foster Parenthood Scale-Revised

POTENTIAL FOR FOSTER PARENTHOOD SCALE--REVISED (PFPS-R)

This scale is designed to measure how likely potential foster mothers and fathers are to provide quality family foster care. However, some characteristics of foster parents are more important than others, no foster parent has all desirable characteristics, and some good foster parents may have some of these characteristics but not others.

Please use your best professional judgement to answer each of the following questions. Consider information obtained from and about the potential foster parents, as well as your own professional observations and interactions with the potential foster parents.

Use the scale below to respond to each question. For male/female two-parent families answer each question separately for the mother and father. For same-sex two-parent families answer each question separately for each parent, but note whether there are two mothers or two fathers. For single-parent families answer each question for either the foster mother or father.

1 = Very unlikely (0 - 10%)
2 = Unlikely (10 - 25%)
3 = Somewhat unlikely (25 - 49%)
4 = Somewhat likely (50 - 75%)
5 = Likely (75 - 90%)
6 = Very likely (90 - 100%)

Example Question and Answer

How likely is this potential foster parent to effectively...

MOM DAD

___ ___ 1. encourage study and homework?

If this is "Somewhat likely" for the mother (i.e., a 50 - 75% chance of the potential foster mother doing this) record a 4 under "Mom."

If this is "Somewhat unlikely" for the foster father (i.e., a 25 - 49% chance of the potential foster father doing this) record a 3 under "Dad."

1 = Very unlikely (0 - 10%)
2 = Unlikely (10 - 25%)
3 = Somewhat unlikely (25 - 49%)
4 = Somewhat likely (50 - 75%)
5 = Likely (75 - 90%)
6 = Very likely (90 - 100%)

How likely is this potential foster parent to effectively...

RELATIONSHIP WITH BIRTH FAMILY

MOM DAD

___ ___ 1. present a positive view of the child's parents to the child?
___ ___ 2. indicate to the child's parents that foster parents are temporary, not replacement, caregivers?
___ ___ 3. support positive contact between the child and birth parents, siblings, and/or extended family?
___ ___ 4. help the child with feelings related to family visits?
___ ___ 5. help the child understand the difficulties in the lives of their birth parents that led to placement?
___ ___ 6. help the child deal with loyalty conflicts?
___ ___ 7. share parenting information with birth parents?
___ ___ 8. support contact with the child's pre-placement friends, as appropriate?

REUNIFICATION

___ ___ 9. support reunification as a case goal?
___ ___ 10. give the child "permission" for reunification?
___ ___ 11. ease the child's fears about reunification with parents or kin?
___ ___ 12. help the child maintain attachments to the foster family while reestablishing previous attachment to parents or kin?
___ ___ 13. help the child transfer behavioral gains from the foster family to his/her parents or kin?

COLLABORATION WITH AGENCY

___ ___ 14. participate in the development and/or review of the child's plan of care according to agency policy?
___ ___ 15. keep the worker informed about the child?
___ ___ 16. help the child meet all appointments included in the case plan by providing transportation and other pertinent services?

CULTURAL AND RACIAL IDENTITY

___ ___ 17. respect and support the child's cultural and racial background and identity?
___ ___ 18. work with parents of a different cultural background or race?

1 = Very unlikely (0 - 10%)
2 = Unlikely (10 - 25%)
3 = Somewhat unlikely (25 - 49%)
4 = Somewhat likely (50 - 75%)
5 = Likely (75 - 90%)
6 = Very likely (90 - 100%)

How likely is this potential foster parent to effectively...

MOM DAD

SPIRITUAL DEVELOPMENT

___ ___ 19. provide opportunities for satisfying religious experiences, in accordance with the wishes of the child, where appropriate given the age of the child?
___ ___ 20. provide opportunities for satisfying religious experiences, in accordance with the wishes of the child's parents?

DISCIPLINE PRACTICES

___ ___ 21. reinforce positive behaviors whenever possible?
___ ___ 22. use discipline based on an understanding of the child's needs and developmental level?
___ ___ 23. focus discipline on behaviors causing the most difficulty for the child and others?
___ ___ 24. implement discipline in a way that shows respect for the child?
___ ___ 25. not use corporal punishment?

INTELLECTUAL/EDUCATIONAL DEVELOPMENT

___ ___ 26. work with schools and other educational resources to help the child receive the most appropriate educational experiences?
___ ___ 27. provide space, quiet time, and other help with homework as appropriate?
___ ___ 28. help the child achieve the maximum level of formal education they are capable of attaining, including a GED if appropriate?
___ ___ 29. understand the impact of the school experience on the child's self-image?
___ ___ 30. accept a child with less educational or intellectual ability than others in the family?

SEXUALITY

___ ___ 31. accept a child with a sexual orientation or practices other than their own?
___ ___ 32. parent a child who is sexually active?
___ ___ 33. provide comprehensive and nonjudgmental age-appropriate information about birth control options and risks?
___ ___ 34. provide comprehensive and nonjudgmental age-appropriate information about sexually transmitted diseases?

1 = Very unlikely (0 - 10%)
2 = Unlikely (10 - 25%)
3 = Somewhat unlikely (25 - 49%)
4 = Somewhat likely (50 - 75%)
5 = Likely (75 - 90%)
6 = Very likely (90 - 100%)

How likely is this potential foster parent to effectively...

MOM DAD

___ ___ 35. provide comprehensive and nonjudgmental age-appropriate information about sexual victimization?
___ ___ 36. provide comprehensive and nonjudgmental age-appropriate information about physiological aspects of sexuality?
___ ___ 37. provide comprehensive and nonjudgmental age-appropriate information about sexual orientation?
___ ___ 38. provide non-judgmental support for a child who has been sexually abused.
___ ___ 39. understand and explain the relationship between sexual behavior and regard for self and others?

SERVICES

___ ___ 40. advocate for additional health services needed by the child and have an appropriate level of involvement in these services?
___ ___ 41. advocate for additional psychosocial services needed by the child and have an appropriate level of involvement in these services?
___ ___ 42. share their observations with the worker about birth parents' needs for additional services?

SEPARATION/ATTACHMENT

___ ___ 43. help the child cope with the effects of separation from his or her parents and other family members?
___ ___ 44. promote the child's attachment to the foster family?
___ ___ 45. prepare the child for placement in another foster home or setting, if necessary?
___ ___ 46. support adoption of the child by another family?
___ ___ 47. maintain contact with the child after leaving the foster family, if appropriate?
___ ___ 48. prepare the child to live independently, if appropriate?
___ ___ 49. help the child obtain photographs and keep other mementos of childhood?

TRANSITIONS TO FOSTER CARE

___ ___ 50. help the child handle thoughts and feelings related to placement?
___ ___ 51. help the child understand the role of foster parents in his/her life?
___ ___ 52. adjust to the child's family rules and traditions, as appropriate?

1 = Very unlikely (0 - 10%)
2 = Unlikely (10 - 25%)
3 = Somewhat unlikely (25 - 49%)
4 = Somewhat likely (50 - 75%)
5 = Likely (75 - 90%)
6 = Very likely (90 - 100%)

How likely is this potential foster parent to effectively...

MOM DAD

___ ___ 53. help the child adjust to the foster family's rules and traditions, as appropriate.
___ ___ 54. prepare other children in the home for the placement?
___ ___ 55. understand the difference between being a foster and adoptive parent.
___ ___ 56. provide long-term foster care of the child for whom reunification or adoption is not an option?
___ ___ 57. enjoy foster parenting?

RECREATION

___ ___ 58. provide age-appropriate family recreational activities for the child?
___ ___ 59. provide age-appropriate community and school recreational activities and school club activities for the child?

PROBLEM IDENTIFICATION

___ ___ 60. recognize when the child may require professional help for behavioral or developmental problems?

PROVISION OF NURTURING ENVIRONMENT

___ ___ 61. work to avoid placement disruption?
___ ___ 62. meet the child's emotional needs?
___ ___ 63. meet the child's developmental needs?
___ ___ 64. provide the child with appropriate supervision?
___ ___ 65. provide the child with structured daily routines?
___ ___ 66. meet the child's clothing needs?
___ ___ 67. meet the child's hygiene needs?
___ ___ 68. build the child's self-esteem?
___ ___ 69. encourage and provide opportunities for positive social relationships?
___ ___ 70. encourage and model social responsibilities?
___ ___ 71. have enough time for foster parenting?
___ ___ 72. exhibit flexibility concerning the needs, behaviors, and problems of the child?
___ ___ 73. have reliable transportation?

1 = Very unlikely (0 - 10%)
2 = Unlikely (10 - 25%)
3 = Somewhat unlikely (25 - 49%)
4 = Somewhat likely (50 - 75%)
5 = Likely (75 - 90%)
6 = Very likely (90 - 100%)

How likely is this potential foster parent to effectively...

FOSTER PARENT TRAINING/SUPPORT

___ ___ 74. recognize the need for and use of supports to assist in his or her role as foster parent?
___ ___ 75. use inservice training to build specialized competencies?
___ ___ 76. continue relationships with other foster parents?

Appendix O. Telephone Interview Guide

Foster Family ID_____

FOSTER PARENT EXITS
Follow-up Telephone Interview

Introduction: I work with _____ who you met during MAPP training. I would like to ask you a few questions about your experiences as a foster parent since you completed MAPP. Nothing you say will be communicated to DCS; nor will it affect your position as a foster parent now, or in the future. Your participation is voluntary. Your opinions and experiences as a foster parent are important for understanding what foster parents need to provide the best placements for children. My questions will take about 10 minutes.

A. Interview Information

1. Date of Interview: __ __/ __ __/ __ __
   Month Day Year

2. __ Davidson __ Hamilton__ Knox

3. Interview completed with: _____ Foster Mother _____ Foster Father

B. Foster Parent Information

1. Foster Mother's Name: _____/_____/___
   Last First MI

2. Foster Father's Name: _____/_____/___
   Last First MI

3. Foster Family Worker's Name: _____/_____/___
   Last First MI

C. Placement Information:

I would like to ask you about your experiences with foster children in your home.

1. Do you have foster children in your home at this time? _____Yes _____ No.

2. Have you had foster children placed with you since completing MAPP training?

   _____Yes _____No. **If yes,**

3. _____How many foster children have you had placed with you since completing MAPP training?

Information about foster children, from first to last child placed:

Name of Foster Child	Age	Gender	Relationship to Foster Child	Date Placed	Date Removed	Who Requested Removal	Reason for Removal

D. Foster Parent Training:

Now, I would like to ask you some questions about foster parent training you (and your husband/wife) have attended.

1. _____How many MAPP training sessions did you attend?

2. _____How many MAPP training sessions did your husband/wife attend?

3. Have you (and/or your husband/wife) participated in any additional training for foster parents since completing MAPP?

Foster Mother ____No ____Yes. Topic _____

Foster Father ____No ____Yes. Topic _____

4. Have you and/or your husband/wife attended Foster Parent Association meetings?

Foster Mother ____No ____Yes. If yes, how many? ____

Foster Father ____ No ____Yes. If yes, how many? ____

E. Foster Parent Relationship with the Agency

Now I would like to ask you about your experiences as a foster parent.

1._____ How many face to face visits have you (and your husband/wife) had with your worker since your foster home study was completed?

2._____ How many telephone conversations have you (and your husband/wife) had with your worker since your foster home study was completed?

3. Have you (or your husband/wife) contacted your worker with questions and concerns? _____ Yes _____ No.

4. **If yes,** how did your worker respond? _____

_____

_____

5. Were you satisfied with the worker's response? _____Yes _____No _____Unsure

F. Changes in the Foster Family

Now I would like to ask you about your family.

1. What changes in your family's circumstances have occurred since your foster home study such as moves or job changes?

_____ No changes reported

_____ Family moved

_____ Change in foster mother's employment

_____ Change in foster father's employment

_____ Separation/divorce

_____ Pregnancy

_____ Addition of family member. Relationship: _____

_____ Serious illness of family member. Relationship: _____

Type of illness: _____

_____ Death of family member. Relationship: _____

_____ Other. Explain: _____

_____

2. Any other changes?

3. How have these family changes affected you (and your spouse) as a foster parent(s)?

Now I would like to know how fostering has affected you and your family. (Write verbatim below).

4. How have your experiences as a foster family affected you?

5. How has being a foster parent affected your spouse?

6. How has fostering affected your children?

7. In what other ways has your family been affected by fostering?

G. Exit From Foster Care

1. Are you planning to continue providing placements for foster children with DCS?

   _____ Yes _____ No _____ Unsure

2. **If response is "no":** What are your reasons for not continuing as a foster parent at this time? (Write verbatim below).

3. Anything else?

4. **If response is "unsure":** What makes you not sure? (Write verbatim below).

5. Anything else?

6. This completes the questions that I have for you. I would like to know about anything else you think is important or has influenced your decision about being a foster parent. (Write verbatim below).

Thank you very much for your time and help.

Vita

Kathryn W. Rhodes is a clinical social worker practicing in Chattanooga, Tennessee. She earned a Bachelor of Science in Psychology from George Peabody College in 1976 and a Masters of Science in Social Work from the University of Tennessee in 1982. She received a Doctorate in Philosophy with a major in Social Work in 1998.

Ms. Rhodes has over 15 years of practice and administrative experience with children and families in the areas of mental health and child welfare across a continuum of services. She began her Social Work career in child welfare as a counselor with children and youth in foster care and adoptive home placements. She trained foster parents and adoptive parents, supervised home placements, and provided casework services to families. After earning her MSSW she provided individual and family, and educational counseling for children living in a group home. As Director of Social Work for residential and acute care programs for children and youth she provided individual, group, and family therapy for children and youth with severe emotional and behavior problems, conducted staff inservice training, and supervised Social Work staff. She held a faculty appointment with the Social Work Program at the University of Tennessee at Chattanooga. Ms. Rhodes currently works with children and families in clinical social work practice. She specializes in issues of adolescents, women, marriage, divorce, and families.