To the Graduate Council:

I am submitting herewith a dissertation written by Gary S. Cuddeback entitled “An Examination of the Psychometric Properties of the Casey Foster Applicant Inventory – Worker Version (CFAI-W).” I have examined the final electronic copy of this dissertation for form and content and recommend that it be accepted in partial fulfillment of the requirements for the degree of Doctor of Philosophy, with a major in Social Work.

John G. Orme
Major Professor

We have read this dissertation
and recommend its acceptance:

Terri Combs-Orme

Cheryl Buehler

Mary Sue Younger

Acceptance for the Council:

Anne Mayhew
Vice Chancellor and
Dean of Graduate Studies

(Original signatures are on file with official student records.)

AN EXAMINATION OF THE PSYCHOMETRIC PROPERTIES OF THE CASEY FOSTER APPLICANT INVENTORY – WORKER VERSION (CFAI-W)

A Dissertation
Presented for the
Doctor of Philosophy Degree
The University of Tennessee, Knoxville

Gary S. Cuddeback
May 2004

Acknowledgements

I would like to thank Niki Le Prohn and Casey Family Programs for funding the research that made this dissertation possible. Also, I would like to thank John G. Orme, Terri Combs-Orme, Cheryl Buehler, and Mary Sue Younger for serving on my committee and for their support in completing this dissertation.

Abstract

Foster family applicants form the pool from which caregivers are selected for the day-to-day care of the many vulnerable children placed in foster care, but limited research exists concerning the reliability and validity of standardized measures for assessing the potential of foster family applicants to provide successful foster care. This dissertation examines the psychometric properties of the Casey Foster Applicant Inventory – Worker Version (CFAI-W), a paper and pencil tool designed to assess the strengths and training and service needs of family foster care applicants.

Retrospective data were collected from 208 foster care workers who had at least one year of experience in licensing foster care applicants. Workers were asked to think about the *best* and *worst* foster families they had ever known and to think about these families as they knew them during the licensing process. Workers completed two copies of the CFAI-W (i.e., one for their *best* families and one for their *worst* families) and this resulted in a final sample of 712 applicants.

Results indicated that CFAI-W subscales, with the exception of the Kinship Care subgroup subscale, had excellent internal consistency reliability and predicted licensure status and child placement status among foster family applicants.

In conclusion, the CFAI-W is time and cost efficient, requires little training, and should be used in combination with other assessment methods to introduce standardization and accountability to the process of licensing foster family applicants.

TABLE OF CONTENTS

Chapter 1: Introduction p. 1
- Rationale for standardized measures p. 1
- Unique challenges faced by foster families p. 3
- Resources for foster families p. 7
- Foster family shortages p. 8

Chapter 2: Literature Review p. 10
- Behavioral and emotional adjustment of children p. 10
- Desirable characteristics of foster families p. 11
- Benefits of assessing foster families with standardized measures p. 13
- Existing measures p. 15
- The Casey Foster Applicant Inventory p. 19

Chapter 3: Methods p. 27
- Subject recruitment p. 27
- Study design p. 30
- Measures p. 31

Chapter 4: Results p. 36
- Demographic characteristics p. 36
- Agency characteristics p. 38
- Comparison of *best* and *worst* families p. 38
- Factorial structure of the CFAI-W p. 42
- Descriptive statistics and reliabilities of CFAI-W subscales p. 47
- Validity of the CFAI-W p. 52

Chapter 5: Discussion and Implications for Social Work Practice p. 75
- Overview p. 76
- Characteristics of sample p. 77
- Factorial structure of the CFAI-W p. 82
- Internal consistency reliability of the CFAI-W p. 84
- Validity of the CFAI-W p. 85
- Workers' comments about the CFAI-W p. 91
- Limitations p. 92
- Implications for social work practice p. 96
- Directions for future research p. 99

References p. 100

Appendices p. 116

Vita p. 199

LIST OF TABLES

Table 1: Foster families' characteristics p. 118
Table 2: Foster parent applicants' characteristics p. 119
Table 3: Workers' characteristics p. 120
Table 4: Agencies' characteristics p. 121
Table 5: Characteristics of *best* and *worst* families: total families p. 122
Table 6: Characteristics of *best* and *worst* families: married couples p. 123
Table 7: Characteristics of all female *best* and *worst* applicants p. 124
Table 8: Characteristics of all male *best* and *worst* applicants p. 125
Table 9: Characteristics of *best* and *worst* female applicants: married applicants p. 126
Table 10: Characteristics of *best* and *worst* male applicants: married applicants p. 127
Table 11: Intercorrelations among subscales for female applicants p. 128
Table 12: Intercorrelations among subscales for male applicants p. 129
Table 13: Descriptive statistics for subscales for female applicants p. 130
Table 14: Interquartile ranges for female applicants p. 131
Table 15: Descriptive statistics for subscales for male applicants p. 132
Table 16: Interquartile ranges for male applicants p. 133
Table 17: Intercorrelations among General Potential forms for female applicants p. 134
Table 18: Intercorrelations among General Potential forms for male applicants p. 135
Table 19: Reliability of subscales for female applicants p. 136
Table 20: Reliability of subscales for male applicants p. 137
Table 21: Intercorrelations among core and subgroup subscales for female applicants p. 138
Table 22: Intercorrelations among core and subgroup subscales for male applicants p. 139
Table 23: Intercorrelations among core and subgroup subscales for family applicants p. 140
Table 24: Paired-sample tests of mean differences: *t*-values (mean differences) (female applicants) p. 141
Table 25: Paired-sample tests of mean differences: *t*-values (mean differences) (male applicants) p. 142
Table 26: Paired-sample tests of mean differences: *t*-values (mean differences) (family applicants) p. 143
Table 27: Paired-sample tests of differences in variances: *t*-values (differences in variances) (female applicants) p. 144
Table 28: Paired-sample tests of differences in variances: *t*-values (differences in variances) (male applicants) p. 145
Table 29: Paired-sample tests of differences in variances: *t*-values (differences in variances) (family applicants) p. 146
Table 30: GP(C)-W regressed on *best-worst*, race, marital status, and *best-worst* x race p. 147
Table 31: CP-W regressed on *best-worst*, race, and *best-worst* x race p. 148
Table 32: IFC-W regressed on *best-worst*, race, marital status, and *best-worst* x race p. 149
Table 33: KC-W regressed on *best-worst*, race, marital status, and *best-worst* x race p. 150

Table 34: Licensure status regressed on GP(C)-W and GP(C)-W^2 p. 151
Table 35: Licensure status regressed on GP(C)-W, race, marital status, and GP(C)-W x race p. 152
Table 36: Licensure status regressed on CP-W and CP-W^2 p. 153
Table 37: Licensure status regressed on CP-W, race, and CP-W x race p. 154
Table 38: Licensure status regressed on IFC-W and IFC-W^2 p. 155
Table 39: Licensure status regressed on IFC-W, race, marital status, and IFC-W x race p. 156
Table 40: Child placement status regressed on GP(C)-W and GP(C)-W^2 p. 157
Table 41: Child placement status regressed on GP(C)-W, race, marital status, and GP(C)-W x race p. 158
Table 42: Child placement status regressed on CP-W and CP-W^2 p. 159
Table 43: Child placement status regressed on CP-W, race, and CP-W x race p. 160
Table 44: Child placement status regressed on IFC-W and IFC-W^2 p. 161
Table 45: Child placement status regressed on IFC-W, race, marital status, and IFC-W x race p. 162
Table 46: GP(C)-W subscale scores and kinship foster care p. 163
Table 47: CP-W subscale scores and kinship foster care p. 164
Table 48: IFC-W subscale scores and kinship foster care p. 165
Table 49: Dependent-groups t-test and correlations for CFAI-W subscale scores for wives and husbands p. 166
Table 50: GP(C)-W subscale scores and workers' knowledge of applicants p. 167
Table 51: CP-W subscale scores and workers' knowledge of applicants p. 168
Table 52: IFC-W subscale scores and workers' knowledge of applicants p. 169
Table 53: KC-W subscale scores and workers' knowledge of applicants p. 170

Chapter 1: Introduction

For a variety of reasons, the child welfare system is in crisis. Some of these reasons are (a) the increasing numbers of children needing out-of-home care, (b) the increasing complexity of problems children bring with them into care, (c) the shortage of foster families available to serve these children, and (d) the diminishing number of resources available to support foster families. Foster families are being asked to manage this crisis by providing the day-to-day care of the vulnerable children placed in our nation's foster care system. For these reasons, the assessment of the strengths and the potential to provide successful foster care of foster family applicants (i.e. families who apply to become licensed foster families) is critical. However, limited research exists concerning the reliability and validity of standardized measurement tools designed to assess family foster care applicants currently available for use by family foster care workers and agencies. The present study is an examination of the psychometric properties of the Casey Foster Applicant Inventory – Worker Version (CFAI-W), a paper and pencil assessment tool designed to assess the strengths, training and service needs, and potential to foster successfully among applicants.

First, however, to put the need for standardized assessment measures designed specifically for applicants in context, the following issues will be discussed: (a) the rationale for standardized measures designed specifically for applicants, (b) the unique challenges that foster families face, (c) the problem of diminishing resources for foster families, and (d) the shortage of foster families.

Rationale for standardized measures

Family foster care applicants form the pool from which caregivers are selected for 75% of the 581,000 children in foster care (DHHS, 2002). However, limited research

exists concerning the reliability and validity of standardized measures for assessing the potential of applicants to provide successful foster care, despite a widespread and long-standing recognition of this need (e.g., Cautley, 1980; Cautley & Aldridge, 1975; Fanshel, 1966; Jordan & Rodway, 1984; Levant & Geer, 1981; Rowe, 1976; Touliatos & Lindholm, 1977, 1981; Walsh & Walsh, 1990; Wolins, 1963).

Foster care agencies and workers are charged with making critical decisions to recruit, screen, train, support, monitor, and retain foster families. Agencies and workers must decide how to match, place, and maintain foster children in family foster homes and for ensuring that these homes are safe and nurturing environments in which the well-being of foster children can be enhanced without disruption and in which appropriate connections with families-of-origin are maintained.

Workers typically use clinical judgment and state licensing standards to assess applicants (Kadushin & Martin, 1988). Although useful and effective in some applications (Orme, Buehler, McSurdy, Rhodes, & Cox, 2003), clinical judgment has a number of limitations (Dawes, Faust, & Meehl, 1989). Clinical judgments often produce “self-fulfilling prophecies such that workers predictions of outcomes might lead to decisions that bias those outcomes (Dawes, Faust, & Meehl, 1989). A worker might assess a particular applicant as being particularly articulate and assumes that he or she needs no help in dealing with the state medical system, for example, and as a result does not support the applicant in this area after he or she is licensed to foster. These limitations are compounded by worker shortages, less experienced and educated workers, high caseloads, and high burnout and turnover rates among workers (DHHS, 1995, 1997; GAO, 1995). So, in the absence of standardized measures with demonstrated psychometric properties, workers might not have the training, experience, or time to

assess applicants adequately and are limited in their abilities to know how applicants will respond to the unique challenges that foster families face.

Unique challenges faced by foster families

Although they share many of the same challenges faced by families in general, foster families face many unique challenges (e.g., CWLA, 1995; Dando & Minty, 1987; Molin, 1988; NCFFC, 1991), and these include (a) managing the problems that foster children bring with them into care, (b) dealing with the potential reunification of a child with his or her birth family, (c) confronting change and loss, and (d) fostering despite the ambiguity of the role of a foster parent.

One set of unique challenges involves the many behavioral, emotional, developmental, or health problems children bring with them into care (Brown & Calder, 1999; Campbell, Simon, Weithorn, Krikston, & Connolly, 1980; Denby, Rindfleisch, & Bean, 1999; Nissim, 1996; Stone & Stone, 1983; Triseliotis, Borland, & Hill, 1998). These problems can include language deficits, extreme emotional distress, aggressive behavior, sexual acting out, severe withdrawal, attachment disorders, and academic delays and difficulties. These behavior problems and developmental deficits often are rooted in serious problems, such as chronic poverty and generations of reliance on federal financial support, family violence and abuse, alcohol and drug dependency, and chronic child neglect within the family-of-origin (Cox & Cox, 1985; Franck, 2001; Walsh & Walsh, 1990; White, Albers, & Bitonti, 1996). One consequence of family neglect is that these children often come to their foster families with very different values and experiences, and this presents unique challenges that foster families must face (Berrick, Barth, & Needell, 1994). Furthermore, one of the unintended consequences of recent legislation might be that the proportion of children with behavioral and emotional problems will increase in the near future because of recent efforts to move children quickly through the foster care system. The Adoption and Safe Families Act of 1997

legislates more timely reunifications of children and their families, if appropriate, or if reunification with the birth family is not appropriate moving them toward adoption. Thus, children who do remain in state care for longer periods (i.e., more than a few years) could become increasingly more challenging, as a group (Orme & Buehler, 2001). This might place increased demands on foster families in terms of the intensive care these children will require.

To complicate matters, foster parents must address their foster children's social, emotional, and academic difficulties without knowing the history of these problems (Buehler, Cox, & Cuddeback, 2003; Cox & Cox, 1985). Often a foster child comes with little or no information about his or her previous circumstances or socialization experiences (Denby & Rindfleisch, 1996). For example, learning disabilities might be left undiagnosed or the results from past mental health evaluations might not be available. Caring for foster children with socioemotional behavior problems and developmental delays requires a great deal of time and energy and routinely involves regular therapy sessions and meetings with teachers and other professionals. This commitment of time and energy might come at the cost of time spent with spouses, or birth, adoptive, or stepchildren, or in paid employment.

A second set of unique challenges centers on issues of potential reunification of a foster child with his or her birth parents. Foster parents must be able to deal with the uncertainty of not knowing when their foster children will leave their homes (Seaberg & Harrigan, 1999). Also, even though fostering is portrayed as a partnership between foster parents and public or private agencies, foster parents often have little or no control over reunification decisions (Brown & Calder, 1999) whether or not they agree with these decisions (Denby & Rindfleisch, 1996).

A focus on reunification requires that foster families work with the foster children's birth families. This often creates a difficult situation for both sets of families (Baring-Gould, Essick, Kleinkauf, & Miller, 1983; Corser & Furnell, 1992; Seaberg & Harrigan, 1997). Children's emotional and behavioral disruptions sometimes accompany visits with birth families and managing these disruptions might require additional parental time and energy (Erera, 1997). Also, foster parents must be able to help foster children deal with repeated separations and multiple attachments to caregivers and must be able to help their own birth children deal with loss associated with foster children coming in and out of their homes (Dando & Minty, 1987; Walsh & Walsh, 1990).

In addition, the logistics of visits with the family-of-origin are challenging. Sometimes foster parents are responsible for transporting foster children to and from the homes of birth families. Transportation for visits for one or two foster children can become demanding, especially when added to school-related activities, tutoring, and the needs of birth children.

For those children whom reunification is not the primary objective, foster families must cope with court cases, judicial proceedings related to the termination of parental rights, and decisions related to the adoption of foster children. This commitment to the children, as well as parents' efforts to help foster children address their feelings and thoughts about their care and well-being, all must be done in the context of often having little say about childrens' future care arrangements.

A third set of unique challenges centers on issues of change and loss (Buehler, Cox, & Cuddeback, 2003). Foster parents must help foster children prepare for and deal with separation from their birth families or previous foster families, attachment to previous caregivers, and the uncertainty about future care arrangements. They must be

able to manage their own family's emotional turmoil invoked by the removal of a child they have grown to love and perceive as a member of their family (Brown & Calder, 1999; McFadden, 1996; Seaberg & Harrigan, 1997, 1999). Furthermore, foster families must be able to discern when particular placements are not working well, for either the children or for their families, and be able to initiate the removal of children with sensitivity and confidence. Lastly, the effects of integrating foster children and birth children on marital relationships must be managed (Denby & Rindfleisch, 1996; Jordan & Rodway, 1984; McFadden, 1996; Seaberg & Harrigan, 1999; Triseliotis et al., 1998; Twigg, 1994).

A fourth set of unique challenges that foster families must face relates to the inherent ambiguity of the foster parent role (Le Prohn, 1994; McFadden, 1996). There seems to be great variability in the perceptions of a foster parent's rights and responsibilities (DHHS, 1993; GAO, 1995; Mietus & Fimmen, 1987; Rhodes, Orme, & McSurdy, 2003; Wolins, 1963). Foster parents vary among themselves in their opinions of their roles as foster parents, workers vary among themselves as to their opinions of the roles of foster families, and workers and foster parents differ in their perceptions about role responsibilities and rights. This role ambiguity is particularly challenging for new foster parents who often have relatively little understanding of or experience (Cautley, 1980; Pasztor, 1985). In addition to role ambiguity, it is stressful when foster parents think that others believe their service is trivial and unimportant (Brown & Calder, 1999; Erkut, 1991; GAO, 1993).

Part of the uniqueness of fostering derives from the foster parents' relationships and shared responsibilities with child welfare agencies, workers, and other state bureaucracies. In their personal interviews with foster parents, Buehler et al. (2003) found that the challenges of this situation focused on foster parents' stresses and

tensions associated with these relationships and shared responsibilities, and this has been documented in much of the literature on fostering (Brown & Calder, 1999; Campbell & Downs, 1987; Denby et al., 1999; Denby & Rindfleisch, 1996; Downs, 1986; Erkut, 1991; McFadden, 1996; Rodwell & Biggerstaff, 1993; Ryan, 1985; Stone & Stone, 1983; Triseliotos et al., 1998; Wilkes, 1974).

Finally, the complexity of the foster care system and the indistinct status of children in foster care often creates boundary ambiguity among foster families (Dando & Minty, 1987; McFadden, 1996; Seaberg & Harrigan, 1997; Wilkes, 1974). Children come and go with greater frequency than they do in most birth families and foster parents are expected to love these children as their own, but also are expected to prepare these children to leave if they're moved to another placement or if reunified with their birth families. Given these unique challenges, it is critical that our nation's foster families have the resources they need in order to provide successful foster care to the vulnerable children placed in their charge.

Resources for foster families

Despite the challenges faced by foster families, the federal and state resources for foster families have not kept pace with the needs of these families and the needs of the children placed in their care (Blumberg, Landsverk, Ellis-MacLeod, Ganger, et al., 1996; Burns, Costello, Angold, Tweed, et al., 1995; Cuddeback & Orme, 2002; DHHS, 1995, 1997; Faver, Crawford, & Combs-Orme, 1999; GAO, 1995; Glisson, 1996; Nugent & Glisson, 1999; Rhodes, Orme, Cox, & Buehler, 2003; Risley-Curtiss, Combs-Orme, Chernoff, & Hesler, 1996; Trupin, Tarico, Low, Jemelka, & McClellan, 1993). A high proportion of foster children with behavioral, emotional, and health problems that are referred for services do not receive them (Blumberg et al., 1996; Risley-Curtiss et al.,

1996). In addition, hiring freezes, low pay, and difficult working conditions have led to worker shortages, less experienced and educated workers, unmanageable caseloads, and high burnout and turnover rates among workers (DHHS, 1995, 1997; GAO, 1995). Finally, increasing numbers of child maltreatment reports, coupled with the decreasing availability of mental health and other services are contributing to an ever-increasing disparity between need and available services (Faver et al., 1999). This disparity is exacerbated by a nationwide shortage of foster families available to foster the many children in foster care.

Foster family shortages

There is a shortage of foster families at the same time that there is a large and increasing number of children in out-of-home care in need of family foster homes (Casey Family Programs, 2000; DHHS, 1993; GAO, 1995; Pasztor & Wynne, 1995). This need is especially acute for foster families willing to care for the large and increasing number of children with special needs (Cox, 2000; Cox et al., 2002, 2003; DHHS, 1993). This disparity between supply and demand leads to pressure to approve foster families who in the past might not have been approved (Volard, 1983). In addition, this disparity leads to pressure to place more children with available families, reduces options for matching children and families, restricts case planning options for workers, and jeopardizes the quality of services provided to foster children. Finally, it contributes to placement disruptions, placement in unnecessarily restrictive and otherwise inappropriate environments, overcrowding in foster families, and mismatched children and foster families (Denby & Rindfleisch, 1996; DHHS, 1995; Pasztor & Wynne, 1995).

A major reason for the shortage of foster families, if not the major reason, is the failure to retain foster families (Chamberlain, Moreland, & Reid, 1992; Pasztor & Wynne,

1995; Rhodes, 1998). There are reports that some foster care agencies lose 30 to 50 percent of family foster homes each year (Chamberlain et al., 1992; Pasztor & Wynne, 1995). In addition to the pressures and challenges faced by these families and the failure to provide needed services to these families (Rhodes, Orme, Cox, & Buehler, 2003), factors such as normative life changes contribute to the decision to quit fostering (Baring-Gould et al., 1983; Ryan, 1985; Triseliotis et al., 1998). Ultimately, the consequence of public and private agencies' inability to retain foster families is a reduction in the number of experienced foster families and this is significant because retaining experienced foster families would most likely improve the quality of services provided to foster children. Moreover, retaining experienced foster families would reduce the associated agency costs of recruiting and training new families. And, more importantly, retaining experienced foster families would reduce the human costs to children associated with placement disruptions, placement in unnecessarily restrictive and otherwise inappropriate environments, overcrowding in foster families, and mismatched foster children and foster families.

In summary, our nation's foster care system is facing crises on many fronts and reform is needed to address these crises. Helping both experienced and inexperienced workers make decisions about the strengths, service needs, and potential of applicants to foster effectively is a feasible and practical way to begin to address some areas of needed reform. Therefore, it is important to understand the skills, characteristics, and abilities that applicants are expected to have in order to provide successful foster care.

Chapter 2: Literature Review

The need to assess the strengths, service needs, and potential to provide successful fostering among applicants cannot be understated. And, knowing what personal and familial characteristics are desirable in foster families is critical. To this end, the literature relevant to parental and familial characteristics associated with the behavioral and emotional adjustment of children in the general population will be reviewed and this will be followed by an examination of the characteristics desirable among foster families as identified by professional standards and empirical research. Next, the potential benefits of using standardized measures in the assessment of foster families will be discussed, and, finally, existing measures designed to assess foster families will be evaluated.

Behavioral and emotional adjustment of children

Extensive research on children and families in the general population has identified a number of parental and familial characteristics that contribute to children's behavioral and emotional adjustment (Bradley, Corwyn, Whiteside-Mansell, Caldwell, et al. 1998; Buehler, Anthony, Krishnakumar, Stone, et al., 1997; Downey & Coyne, 1990; Orme & Buehler, 2001; Rothbaum & Weisz, 1994; Simons, 1996). These include the quality of parenting, the quality of family functioning, the quality of marital functioning (in families with two parents), the quality of the home environment, parents' mental health, and the availability of needed social support. It is logical to expect that foster families and applicants would have these same parental and familial characteristics. It is unknown, however, if foster families need to have the same "amount" of the aforementioned characteristics as families in the general population plus additional desirable characteristics specific to the unique challenges of fostering, or more of the

aforementioned characteristics plus additional characteristics specific to the unique challenges that fostering presents.

Desirable characteristics of foster families

Social work has developed an extensive literature concerning desirable characteristics of foster families and applicants. In one of the earliest studies of workers and applicants, workers identified their ideal foster families as possessing, among other characteristics, the capacity to give without expecting immediate return, having character, values, and ethical standards conducive to the well-being of children, having flexibility and modifiability of expectations, and being able to accept the children's relationships with birth parents and agencies (Wolins, 1963). Since that time, professional standards for family foster care have been developed (Child Welfare Institute, 1987; CWLA, 1975, 1995, 2000; Illinois Department of Children and Family Services, 1993). According to these standards, foster families should possess the knowledge and abilities to: (a) protect and nurture children in a safe healthy environment with unconditional positive support; (b) support relationships among children and their parents, siblings, and kin; (c) meet the developmental needs of children by facilitating attachment, building self-esteem, using appropriate discipline, and supporting intellectual and educational growth; (d) support permanency planning; (e) participate as essential and effective team members; (f) share parenting responsibilities; and (g) deal with grief and loss issues.

Other factors are often considered when selecting families to foster. These factors include (a) motivation to foster, (b) expectations of the role of foster parent, (c) personal qualities of the potential foster parent, (d) family functioning, (e) parenting styles and skills, (f) ability to relate to agency staff, (g) ability to accept the role as a substitute parent, and (h) the ability to accept children's birth families (Fish, 1984).

Also, foster families are expected to have knowledge and competencies in the following areas: (a) child development; (b) philosophy and practice of permanency planning; (c) impact of separation and placement on children and their families; (d) behavior management; (e) appreciation of human diversity and sensitivity to issues of ethnicity, race, gender, sexual orientation, and sociocultural aspects; and (f) involvement of children and their biological parents in decision making and goal planning (Pecora, Whittaker, Maluccio, Barth, & Plotnick, 2000).

Empirical research has informed social work about the desirable qualities of foster parents and families (e.g., Cautley, 1980; Orme & Buehler, 2001; Teather, Davidson, & Pecora, 1994). For example, Cautley (1980) found that factors such as a democratic decision-making structure among fostering couples, an ability to appropriately handle behavior situations and behavior problems, and good general parenting skills predicted success among foster family applicants. These desirable characteristics of foster families are essential to successful foster care for several reasons. For example, as documented previously, many children in foster care have behavioral and emotional problems (Heflinger, Simpkins, & Combs-Orme, 2000; Pilowsky, 1995; Rosenfeld, Pilowsky, Fine, Thorpe, et al., 1997). Second, even those children who do not exhibit problems are at risk for developing problems because of a history of abuse and neglect, family poverty, or parental mental health problems (DHHS, 1997; Rutter, 2000; Rosenfeld et al., 1997), or because of the stress associated with being removed from their families or placement disruption in foster care (Fanshel, Finch, & Grundy, 1990; Fanshel & Shinn, 1978; Pardeck, 1984; Rowe, Cain, Hundleby, & Keane, 1984). Third, foster children with more behavioral and emotional problems are reunified more slowly with their birth families (Glisson, Bailey, & Post, 2000),

and are more likely to experience placement disruptions (Croft, 1999; Stone & Stone, 1983; Teather et al., 1994).

It is clear that a great deal is expected of foster families, and to some extent these expectations surpass what is expected of families in general. The empirical measurement of how these expectations are met by applicants, what we know from empirical research about the characteristics that applicants should have, and what has been established in professional standards for foster families should be translated into standardized measures with demonstrated psychometric properties. The importance and benefits of having standardized measures with demonstrated psychometric properties designed for applicants will be addressed below.

Benefits of assessing foster families with standardized measures

Given the limited amount of time and resources typically available to workers to assess foster family applicants and the comprehensiveness with which applicants should be assessed, psychometrically sound standardized measures provide an especially efficient assessment method. Such tools can enhance the critical but often ambiguous and difficult decisions made by workers who have varying amounts and types of experience and education (Combs-Orme, Orme, & Guidry, 1991) and who oftentimes are faced with a wide variety of competing job pressures and demands (GAO, 1995).

Professional judgment always will and should be an important part of the critical decision-making processes foster care agencies and workers use to license applicants. However, professional judgment can be used along with high quality standardized measures to produce even better assessments of the potential of foster families to foster successfully. Specifically, such measures can provide guidance concerning relevant information to consider, which is especially important for new and relatively

inexperienced workers. Second, standardized measures can take some of the subjectivity out of the licensing process. Third, standardized measures can facilitate communication and accountability because they provide quantitative information that can be incorporated easily into reports and can be used to gauge the effectiveness of a training protocol or the development of a foster family at an annual re-certification. Fourth, standardized measures can save money and professional time, relative to subjective evaluations, especially when such measures require relatively little training or effort to employ (AERA, APA, NCME, 1999; Bloom, Fischer, & Orme, 2003; Nunnally & Bernstein, 1994). Finally, and most importantly, standardized measures with demonstrated psychometric properties for assessing the potential of applicants to provide successful family foster care can be used to better understand the relationship between the potential to provide successful family foster care and important outcomes for foster children such as safety, well-being, and permanence. And, they can be used to better understand the relationship between the potential to provide successful family foster care and important outcomes for agencies, such as retention and foster family well-being.

In summary, standardized measures can be created to help inform decisions as to how best to recruit, screen, support, monitor, and retain foster families, and how best to match, place, and maintain foster children with foster families that provide care for vulnerable children. Historically, the use of standardized measures is prevalent in the family foster care literature, but for the most part the measures that are used are not designed specifically for foster families and the extent to which these measures are appropriate for use with applicants is largely unknown. An overview of the use of standardized measures and family foster care is presented below.

Existing measures

A wide variety of standardized measures designed for use with families and parents *in general* have been used to assess practicing foster families (Orme & Buehler, 2001; Orme, Buehler, McSurdy, Rhodes, & Cox, 2003). These include, for example, measures of parenting, quality of the home environment, family functioning, and, to a limited extent, marital functioning, temperament, parental mental health, and social support. Few studies have reported information concerning the psychometric properties of these measures as used with foster family samples, although the available results are encouraging (e.g., Cautley, 1980; Green, Braley, & Kisor, 1996; Kufeldt, Armstrong, & Dorosh, 1995; Orme, Buehler, McSurdy, Rhodes, & Cox, 2003; Seaberg & Harrigan, 1997). However, although these measures for families and parents in the general population can be used to assess foster families, these measures were not designed to address many of the unique challenges of fostering.

Standardized scales have been developed to assess foster parents' effectiveness in the context of some of the unique aspects of fostering (Doelling & Johnson, 1989, 1990; Ray & Horner, 1990; Rowe, 1976), role performance and involvement (Fanshel, 1961, 1966; Fanshel & Shinn, 1978), satisfaction (Fanshel, 1966), capacity to cope with problems of foster children (Fanshel, 1966), stress in separating from foster children (Fanshel, 1966), and attitudes and behaviors toward birth parents, workers, and foster children (Erera, 1997). However, most of these measures have been designed to assess the performance of practicing foster families and parents, <u>not</u> the potential of applicants to foster successfully.

Two measures have been developed for or used with applicants to measure specific aspects of fostering. Le Prohn (1994) developed a standardized scale designed

to measure foster parents' perceptions of their responsibilities as foster parents (Le Prohn, 1993, 1994; Pecora, Le Prohn, & Nasuti, 1999), and this measure has shown promise for use with applicants (Rhodes, Orme, & McSurdy, 2003). Cautley (1980) developed a standardized scale designed to measure foster parents' attitudes toward foster home care and the responsibilities of foster parents, and this measure was used with applicants (see Cautley, Aldridge, & Finifter, 1966). However, these measures are narrow in their scope and not designed to fully and comprehensively assess the unique challenges faced by foster families and the evidence concerning their psychometric properties has been limited.

A number of studies have used single-item measures of selected unique aspects of fostering directly relevant or easily adapted to the assessment of potential foster families. These include, for example, items measuring foster parents' motivation to succeed at fostering, attitudes toward foster children's birth families, rapport with the foster care agency, degree of familiarity with foster care, and attitudes toward social workers' supervision (Cautley, 1980; Cautley & Aldridge, 1975; Fanshel, 1966; Stone & Stone, 1983; Walsh & Walsh, 1990). Motivation to foster has been examined most extensively (Cautley, 1980; Dando & Minty, 1987; Denby & Rindfleisch, 1996; DHHS, 1993; Fanshel, 1966; Jones, 1975; Kraus, 1971; Le Prohn, 1993; Lewis & Fraser, 1987; Martin, Altemeier, Hickson, Davis, & Glascoe, 1992; Proch, 1982; Rowe et al., 1984; Soliday, McCluskey-Fawcett, & Meck, 1994), but the extent to which motivation can be connected to desirable child outcomes is unclear. Moreover, little is known about the psychometric properties of the single-item measures used in these studies, and single-item measures are vulnerable to having poor psychometric characteristics (Nunnally & Bernstein, 1994).

Finally, overall global ratings of foster families and parents by workers or research staff have been developed and used to measure the performance of foster families or parents in a number of studies (Campbell et al., 1980; Cautley, 1980; Cautley & Aldridge, 1975; Fanshel, 1961, 1966; Jordan & Rodway, 1984; Rowe et al., 1984; Walsh & Walsh, 1990). Such overall assessments are based, at least in part, on the unique challenges of fostering and possibly could be adapted to assess potential foster families. However, such global measures are limited in the information they can provide for matching foster children with foster families, for identifying specific types of training, intervention, support, and other services that might be needed by foster family applicants, and for understanding the influence of foster families on foster children's outcomes.

Currently, there are only two standardized scales designed to assess comprehensively the potential of applicants to provide successful family foster care. The first is the Potential for Foster Parenthood Scale (PFPS) (Stone & Stone, 1983; Touliatos & Lindholm, 1977, 1981). The PFPS is a 54-item scale designed for completion by workers to measure the potential for foster parenting. Items were derived from the 1975 standards for foster parenting developed by the Child Welfare League of America (CWLA, 1975). An examination of this measure based on the ratings of 472 practicing foster families by 236 workers in 91 agencies indicated excellent internal consistency reliability.

Although the PFPS was designed to assess the potential of applicants to provide family foster care, the standards on which the content of the measure was based have been updated significantly (CWLA, 1995). Also, there have been critical changes in

foster care since the initial development of the PFPS almost 25 years ago (Pecora et al., 2000). Moreover, this measure was never tested with applicants.

The second standardized scale designed to assess comprehensively the potential of applicants to provide successful family foster care is the Foster Parent Potential Scale (FPPS) (Orme, Buehler, McSurdy, Rhodes, & Cox, 2003). The FPPS is a 76-item scale designed to be completed by workers. Each item is rated on a 6-point scale ranging from "Very unlikely (0 - 10%)" (1) to "Very likely (90-100%)" (6). Items are rated separately for potential mothers and fathers. Items were derived from the 1995 Child Welfare League of America's most recent *Standards of Excellence for Family Foster Care Services*, which served as the foundation of the content validity of the measure. In addition, after constructing a comprehensive pool of items from the 1995 "Standards," the final items and their wording were revised in consultation with approximately 20 workers.

The FPPS was administered as part of a larger study of the parental and familial characteristics of family foster care applicants (Orme, Buehler, McSurdy, Rhodes, Cox, & Patterson, 2003). The worker who conducted a family's home study was asked to complete the FPPS after the second home visit. Twenty-three foster care workers completed the FPPS for 105 families for whom a second home visit was made (88% of eligible families). Coefficient alpha was .98 for mothers and fathers, indicating excellent internal consistency reliability. The FPPS predicted whether or not a family was approved and whether or not a child was placed with a family, supporting its predictive validity. The FPPS correlated negatively with the number of psychosocial problems as measured using a battery of established self-report scales administered to foster parent applicants, supporting its convergent validity. In addition, the FPPS had, at most,

relatively small correlations with demographic characteristics and foster families' willingness to foster certain types of children, supporting its discriminant validity.

However, although the results of the FPPS are promising, the extent to which the FPPS can be generalized to all workers and applicants throughout the United States is unknown and the FPPS was not tested with applicants who planned on providing kinship family foster care.

The Casey Foster Applicant Inventory

In the fall of 1999, Casey Family Programs asked researchers at the University of Tennessee to develop and standardize an assessment tool for use with foster family applicants. The team of researchers who conducted the work were John G. Orme, Ph.D., University of Tennessee, College of Social Work; Cheryl Buehler, Ph.D., University of North Carolina at Greensboro, Human Development and Family Studies; Kathryn (Katie) Rhodes, Ph.D., clinical social worker; Mary Ellen Cox, Ph.D., Children's Mental Health Services Research Center at the University of Tennessee College of Social Work; and Gary Cuddeback, MSW, MPH, a graduate research assistant and doctoral student at the University of Tennessee in the College of Social Work (now a research associate at the Cecil G. Sheps Center for Health Services Research at the University of North Carolina at Chapel Hill). Building on previous experiences with the development and testing of the Foster Parent Potential Scale (Orme, Buehler, McSurdy, Rhodes, & Cox, 2003), the research team decided to create an assessment tool that used a questionnaire format and could be used by workers and applicants. The applicant version (CFAI-A) would be used by family foster care applicants to evaluate themselves and the worker version (CFAI-W) would be used by workers to evaluate applicant families. The research team identified several essential sources for the content of the

CFAI items: (a) experienced foster parents, (b) relevant literature and research on family foster care, (c) professional standards that guide foster care agency practice, and (d) existing measures designed for use with foster families.

Foster parents' perceptions. Members of the research team interviewed 22 experienced foster parents to learn more about the personal and familial characteristics needed in order to provide successful fostering (see Buehler, Cox, and Cuddeback, 2003 for details). These parents were asked a series of questions that focused on attributes of the parent or family that facilitated or inhibited fostering success:

1. What do you find particularly rewarding about fostering?
2. What do you find particularly stressful about fostering?
3. Think about your family. What are some of the things about your family that makes fostering a more successful experience?
4. Continue thinking about your family. What are some of the things about your family that makes fostering more difficult?
5. Describe personal or parenting beliefs you have that make fostering easier.
6. Describe personal or parenting beliefs you have that make fostering more difficult.
7. In general, how would you describe a family that would do well in fostering?
8. In general, how would you describe a family that would have a tough time with fostering?
9. What special characteristics do foster parents and families need to have to do well in fostering?
10. What about when it is time for a foster child to leave?

11. Is there anything else you would like to add, about what it takes to be a foster parent?

The interviews were transcribed and reviewed to identify common themes. Some of the common themes that emerged included:

1. the perception that good fostering is something different from parenting birth, adoptive, or step children because of the unique needs and demands presented by foster children;
2. the need for plenty of time and energy;
3. the importance of family routine and organization;
4. the need to understand the unique circumstances from which the child comes and be able to adapt parenting accordingly;
5. the importance of faith;
6. the importance of consistent but empathic discipline;
7. the ability to parent while knowing very little about the child's previous functioning;
8. the importance of social support, both instrumental and emotional,;
9. a deep concern for children;
10. the benefits of having a strong problem-solving orientation; and
11. the importance of a solid marriage prior to fostering (when applicable).

In addition, members of the research team interviewed 9 kinship caregivers, and they were asked similar questions as those asked of nonkinship foster parents. Their responses were transcribed and examined for themes and the themes identified from kinship caregivers' responses were similar to those identified in interviews with

nonkinship foster families, with the issues regarding relations with birth families being more complex (Cuddeback, Coakley, Buehler, & Cox, 2003).

Literature and professional standards. Current literature and professional standards were reviewed to validate the content culled from the semi-structured interviews and to identify important areas of fostering that were not suggested in the interviews. These sources of additional information included the 1995 Child Welfare League of America's (CWLA's) Standards of Excellence for Family Foster Care Services (CWLA, 1995) and the 2000 CWLA's Standards of Excellence for Kinship Care Services (CWLA, 2000); relevant foster care literature (e.g., Campbell et al., 1980; Cautley & Aldridge, 1975; Jordan & Rodway, 1984; Kadushin & Martin, 1988; Orme & Buehler, 2001; Orme, Buehler, Rhodes, Cox, McSurdy, & Cuddeback, 2003; Pecora et al., 2000; Ray & Horner, 1990; Robinson, 1991; Twigg, 1991), including foster family training curricula (Child Welfare Institute, 1987; Illinois Department of Children and Family Services, 1993); and previous studies of foster family applicants (Cautley, 1980; Orme, Buehler, McSurdy, Rhodes, & Cox, 2003; Wolins, 1963).

The review of existing materials validated the inclusion of the content identified from the foster parent interviews and suggested that the following additional content be considered for inclusion in the CFAI: promoting children's development; dealing with separation and attachment issues; additional training needs; handling ambiguity; and parental warmth.

The review and the semi-structured interviews were the basis for the content of the CFAI. Items were written to cover the identified content areas of fostering potential. Care was given to constructing items using principles of item construction and to writing clear instructions for completion (e.g., DeVellis, 1991; Nunnally & Bernstein, 2001).

CFAI review and revision. After the items were written, the CFAI went through an extensive review process. A draft of the inventory was reviewed for clarity, comprehensiveness, sensitivity, and practice relevance by a group of 10 family foster care professionals. This review was conducted during a two-day workshop on the CFAI in Seattle, Washington. These professionals were highly experienced in the areas of foster care and service delivery. Items were revised, clarified, eliminated, and a few new items were added to cover needed content. In addition, the group of items was examined carefully to assess the extent to which reviewers believed the inventory would help predict important fostering outcomes, such as child well-being, placement stability, and foster family satisfaction and retention. Reviewers believed that the inventory would have a good chance of predicting these important indicators of fostering success.

After additional minor revisions, experienced foster parents, foster care workers, and researchers reviewed the inventory. Diverse points of view were obtained by recruiting a mix of foster parent reviewers who had various experiences and backgrounds. The group of 16 experienced foster parents who reviewed the CFAI included mothers and fathers, European American and African American parents, and married and single foster parents. As a group, these parents fostered both for public and private agencies. A few of the parents had fostered for both. These parents lived in three different regions of the U.S. Foster parents were sent the review materials in advance, along with instructions for conducting the review. Two members of the research team met with parents in small focus groups of two to four parents to discuss the CFAI.

Seventeen experienced foster care workers with diverse backgrounds also reviewed the CFAI. The group of workers had worked for private and public agencies, with several workers having worked for both sometime during their professional careers.

The group included women and men, as well as African American, Hispanic, and European American workers who worked in three different regions of the U.S. Workers were sent the review materials and instructions in advance. Two members of the research team met with workers in small focus groups of two to four workers to discuss the CFAI.

Five experienced researchers in family foster care also reviewed the CFAI. After receiving and processing the review materials, two of the instrument developers talked with each researcher to get his or her thoughts about general content, specific items, and the inventory format. Each discussion averaged an hour in length.

Finally, information from focus groups with children residing in family foster care was considered during the revision of the CFAI (McSurdy & Rubenstein, 1999). Youth were asked to describe positive aspects of care, and these perceptions were considered as CFAI items were evaluated. This review indicated that the content of the CFAI included their perspectives.

The CFAI was revised again after input from these reviewers. The thorough evaluation process, including the original interviews with foster parents, the extensive examination of the fostering literature, and the review of the inventory by experienced foster parents, workers, and researchers, further ensured adequate attention to the concept of the potential to foster successfully. Because the concept of successful fostering is broad and not clearly defined, this extensive development process was needed to make sure that the important aspects of potential for fostering were included in the inventory.

The development of the CFAI resulted in a 210-item worker version (CFAI-W) and a 185-item applicant version (CFAI-A), both designed to assess the strengths,

development needs, and potential to foster successfully among family foster care applicants. Items were written to cover 21 areas relevant to fostering potential. These areas are (a) adequate resources, (b) knowledge of child background, (c) child focused attitudes, (d) ability to deal with ambiguity, (e) ability to deal with authority, (f) use of effective discipline, (g) flexibility, (h) interpersonal skills, (i) methods for handling loss, (j) structural organization of family, (k) ability to handle parent/worker/agency relationships, (l) ability to promote development, (m) readiness to foster, (n) ability to deal with separation/attachment, (o) adequacy of social support, (p) willingness to participate in training, (q) expression of warmth, (r) ability to work with birth parents, (s) methods for coparenting, (t) integration of foster children with birth/adopted children, and (u) providing kinship care.

In the 210-item worker version, the number of items in each of these areas ranged from 6-19. The last three content areas mentioned (i.e., coparenting, integrating foster children with birth/adopted children, providing kinship care) are special subgroup areas because they are intended for specific types of family foster care applicants. The coparenting subscale applies only to two-parent couples. The integrating foster children area applies only to applicants who already have birth or adopted children at the time of application. The kinship care area applies only to applicants who plan to care for the children of relatives. Each CFAI item is rated on a 4-point scale ranging from “strongly disagree” (coded as 1) to “strongly agree” (coded as 4). The reading level is sixth grade, on average, and only an English version exists.

In summary, foster families are called upon to be the frontline service providers for the vulnerable children placed in their care. The considerable knowledge base of the desirable characteristics expected of applicants and the numerous standards guiding the

assessment of applicants has not been translated into standardized assessment tools to be used to assess the strengths and service needs of families that apply to foster. To this end, the Casey Foster Applicant Inventory was created with the intention of addressing this gap beyond what currently exists in the literature. Therefore, the purpose of this research is to examine the psychometric properties of the Casey Foster Applicant Inventory – Worker Version (CFAI-W). The following research questions will be addressed:

1. What is the factorial structure of the CFAI-W?
2. What is the internal consistency reliability of CFAI-W subscale scores?
3. Are CFAI-W subscale scores valid toward their intended interpretation and use?

Chapter 3: Methods

In this chapter, sample recruitment, study design, and measures are presented. Subject recruitment is discussed first.

Subject recruitment

Family foster care workers were recruited to participate in this field test of the CFAI-W. Probability sampling of populations of family foster care workers or of settings in which such workers are employed was not feasible. Therefore, a heterogeneous multisite non-probability purposive sampling design was used to enhance generalizability as much as possible. The sample of family foster care workers was limited to workers with at least one year of experience in training and licensing foster family applicants, and workers voluntarily participated in the study. This limitation in the amount of experience was used so that participating workers would have an adequate sample of foster family applicants from which to select their *best* and *worst* foster families (see the Design section below for the rationale behind asking workers to evaluate their *best* and *worst* families), and a reasonable level of experience in assessing foster family applicants.

A number of strategies were used to ensure that the sample of participating workers was heterogeneous. Demographically, workers were recruited who varied in terms of education, years of child welfare experience, years of foster care experience, primary job responsibility, involvement in conducting pre-service training, and race. Geographically, workers from across the U.S. were invited to participate. Workers who were employed at private and public agencies were recruited. In addition to agencies that provided more generalized care, workers in agencies that provided specialized and therapeutic care also were asked to participate in the study.

The heterogeneity of the sample ensured broader generalizability, ensuring a more representative sample of workers who would provide data about a more representative sample of foster families. Moreover, this heterogeneity potentially reduced certain sampling biases, helping to increase the likelihood that results would not be an artifact of the same types of respondents completing the CFAI-W. This heterogeneity also made the analysis of demographic, geographic, or agency-type differences in the assessment of foster family applicants feasible.

Flyers containing information about the study were distributed at national and regional child welfare conferences and at other related conferences. Flyers also were distributed at an annual national conference of state foster care directors. Some public and private agencies were contacted directly (e.g., the State of Tennessee's Department of Children's Services) and Casey Family Programs used organizational meetings and newsletters to recruit participants within this organization (Casey Family Programs operates 23 private foster care agencies in 14 different states, mainly in the western part of the United States). In addition, Casey Family Programs and the University of Tennessee's Family Foster Care Assessment Project created web pages that contained information about the study (http://www.casey.org/research/ffa/index.htm, http://utcmhsrc.csw.utk.edu/caseyproject/). Lastly, news of the study traveled by word-of-mouth, as several key individuals well known in the arena of child welfare provided information about the study to directors of public and private agencies and other potential participants across the country. Data collection began during June 2001, and was completed in October 2003.

After learning of a foster care agency that was interested in participating in the study, a member of the research team from the University of Tennessee's Family Foster

Care Assessment Project sent information that included a description of the study, copies of relevant Institutional Review Board (IRB) forms, a packet of executive summaries of previous research conducted by members of the research team, and copies of the CFAI-W to the agency's contact person, who was often an agency director or supervisor of foster care services. This information was sent to help agencies decide whether or not they could commit to participating in the research and to better understand what their participation would entail.

After giving an agency's contact person an opportunity to review these materials, a member of the research team made a follow-up phone call to this individual in order to answer questions and discuss participation. If, at this time, the agency's contact person agreed that his or her agency would participate in the research, he or she was asked to forward the names and mailing addresses of the agency's foster care workers or family developers who would be participating in the study. Worker participation was voluntary. After receiving these names, a member of the research team sent packets that included a cover letter, an informational letter directing research participants to more information and resources about fostering, two copies of the CFAI-W, an additional Informed Consent Statement form, and a pre-paid return envelope to each worker. In this packet workers also received small gift pendants for their participation. For the purposes of this study, two copies of the CFAI-W were fastened together to create a booklet. Then, participating workers completed one copy for their *best* family, for example, and one copy for their *worst* family. Workers were asked not to complete their questionnaires prior to participating in conference calls with members of the research team.

After allowing the workers at an agency time to review these materials, a conference call was arranged. During this conference call, members of the research

team discussed the purpose of the research, the development of the measure, whom to consider when selecting their *best* and *worst* applicant families, the rationale behind the eligibility criteria, how to complete the CFAI-W, and uses and misuses of the CFAI-W.

Study design

This study employed a case-control design. A case-control study is a type of observational analytic investigation in which subjects are selected on the basis of whether they have (cases) or do not have (controls) a particular condition of interest (Hennekens, Buring, & Mayrent, 1987). Normally, a researcher defines the criteria with which cases and controls are selected. For example, a researcher who studies lung cancer might look at medical records to determine patients' causes of death. Individuals who died of lung cancer would constitute the sample of cases, and individuals who died of causes other than lung cancer would constitute the sample of controls. For this study of the CFAI-W, however, workers selected cases and controls using their own criteria for selection. In this study, workers' *best* applicant families served as controls, and their selected *worst* applicant families served as cases. Though they do have limitations, which will be discussed later, case-control studies are efficient in terms of both time and cost (Hennekens et al., 1987).

Workers were asked to select the *best* foster families whom they had known and the *worst* foster families whom they had known for the kinds of children that their agencies provided services for, and to think of these families when they applied to foster (i.e., as applicants). Workers were invited to draw upon their knowledge of families from any point in their careers of licensing foster parents in selecting their *best* and *worst* families. They could select one- or two-parent families who were licensed or not licensed to foster, families who intended to provide kinship or traditional care, and families who

did or did not have birth or adopted children in their homes at the time of application. Then, workers were instructed to use their *best* professional judgment in answering the questions contained in the CFAI-W about these applicant families. Each worker completed one copy of the CFAI-W on his or her *best* applicant family and one copy of the CFAI-W on his or her *worst* applicant family. In doing so, workers were asked to consider information obtained from their own professional observations and interactions with these applicant families and were invited to review case records or notes in order to help them recall information. For same-sex two-parent applicant families, workers were instructed to answer questions separately for each parent, but to note whether there were two mothers or two fathers. For a male/female two-parent applicant family, workers were asked to answer questions separately for females and males. Workers were asked to complete and return their questionnaires within two to three weeks. Occasionally participants returned their completed questionnaires prior to having participated in a conference call, but this was rare.

To counterbalance the effects of fatigue on the results of the CFAI-W, questionnaires with odd identification numbers asked workers to think of their *worst* foster family first. Questionnaires with even identification numbers asked workers to think of their *best* foster families first. Odd- and even-numbered questionnaires were distributed equally among participating workers.

Measures

In addition to containing two copies of the CFAI-W, the study questionnaire requested demographic and background data for workers and families. These data were collected to describe the sample of workers and families and to examine the psychometric properties of the CFAI-W (e.g., whether the psychometric properties of the

CFAI-W varied with background characteristics of workers or families). This questionnaire also contained a *comments* section at the end of the questionnaire in which workers were asked to provide feedback about the CFAI-W. This qualitative feedback provided a basis to determine the strengths and limitations of the CFAI-W. A considerable amount of demographic and background data were collected about workers, as described below. However, only a limited amount of demographic and background information was collected from workers about *best* and *worst* families because, given the retrospective design of the study, workers were most likely limited in terms of the information that they could remember accurately.

Agency zip code. The questionnaire asked workers to provide the zip codes of their agencies to identify the region of the country.

Today's date. Date of completion of the questionnaire was obtained to determine if changes took place over the course of the study.

Highest degree or level of school completed. Workers provided information about the highest degree or level of school they had completed. The categories were: high school or equivalent, Bachelor's in social work, Bachelor's in psychology/sociology, Bachelor's in another field, Master's in social work, Master's in psychology/sociology, Master's in another field, doctoral degree in social work, other doctoral degree, or other (specify).

Number of years of child welfare experience. Workers provided information about their total number of years of child welfare experience.

Number of years of foster care experience. Workers provided information about their total number of years of foster care experience.

Primary job responsibility. Workers indicated their primary job responsibility as working with either: foster families exclusively, foster children exclusively, or foster families and foster children.

Involvement in pre-service training. Workers indicated whether or not they took part in conducting pre-service training with foster parent applicants.

Race/ethnic background. Workers first were asked, *Are you Spanish/Hispanic/Latino* and provided the following response categories: (a) No, not Spanish/Hispanic/Latino; (b) Yes, Mexican, Mexican/Am., Chicano; (c) Yes, Puerto Rican; (d) Yes, Cuban; or (e) Yes, other Spanish/Hispanic/Latino (specify). Next, they were asked to choose one or more of the following categories to describe their race: (a) White; (b) Black, African Am., or Negro; (c) American Indian or Alaska Native (specify principal tribe); (d) Asian Indian; (e) Chinese; (f) Filipino; (g) Japanese; (h) Korean; (i) Vietnamese; (j) Other Asian (specify); (k) Native Hawaiian; (l) Guamanian or Chamorro; (m) Samoan; (n) Other Pacific Islander (specify); or (o) Some other race (specify). Workers also were asked to report race for their selected *best* and *worst* female and male applicants using these same categories.

Family structure. Using the CFAI-W questions answered by workers it was possible to determine whether an applicant was in a one- or two-parent family, and whether applicants in one-parent families were male or female. The questionnaire also asked whether respondents were answering questions about a same-sex two-parent family.

Kinship care. Workers indicated whether each *best* and *worst* family provided kinship care.

Foster family outcomes. For each *best* and *worst* applicant family, workers were asked to indicate whether the family was licensed to foster and whether the family had one or more children placed.

Quality of CFAI-W responses. In order to measure the quality of the information provided by the workers, they were asked to respond to the statement *I know this family very well* using a 4-point response scale: *strongly disagree* (1), *disagree* (2), *agree* (3), and *strongly agree* (4).

Agency background information. Knowledgeable site representatives were contacted by a member of the research team and asked a number of questions about their agencies. More specifically, in addition to providing city, state, and zip code information for their agencies, these representatives were asked to provide the following: (a) whether their agency was private or public; (b) the number of non-kinship foster families their agency has; (c) the number of kinship foster families their agency has; (d) the number of non-licensed kinship foster families their agency has; (e) the number of children their agency has placed in non-kinship foster homes; (f) the number of children their agencies have placed in kinship foster homes; (g) the number of children their agencies have placed in non-licensed kinship foster homes; (h) the type of training their agencies do (e.g., MAPP, PRIDE, etc.); (i) the number of hours of training required of non-kinship foster homes; (j) the number of hours of training required of kinship homes; (k) the typical number of home visits prior to a licensure decision; (l) the titles and brief job descriptions of all employees that work with foster families and children; (m) the number of employees that work exclusively with foster families; (n) the number employees that work exclusively with foster children; (o) the number of employees that

work with both foster families and foster children; and (p) the range and average board rate their agencies pay non-kinship, kinship, and therapeutic foster homes.

Chapter 4: Results

Results reported in this chapter are based on a sample size of 416 foster family applicants, consisting of 712 separate foster parent applicants, some married or otherwise partnered and some single (see Figure 1 below).

Demographic characteristics

Tables 1 through 4 (All tables appear in Appendix A) show the characteristics of the foster families, individual foster family applicants, foster care workers, and foster care agencies, respectively.

Table 1 shows the demographic characteristics of foster families. Among all foster families (i.e., one- and two-parent), most were married, licensed to foster, had one or more foster children placed with them, and were well known by their foster care workers by the time they completed the foster parent training and licensing periods.
Slightly over half had birth or adopted children at the time of application and less than a quarter of these families provided kinship family foster care. Among those applicants who were married or otherwise partnered, most were licensed to foster, had one or more foster children placed with them, and were well known by their foster care

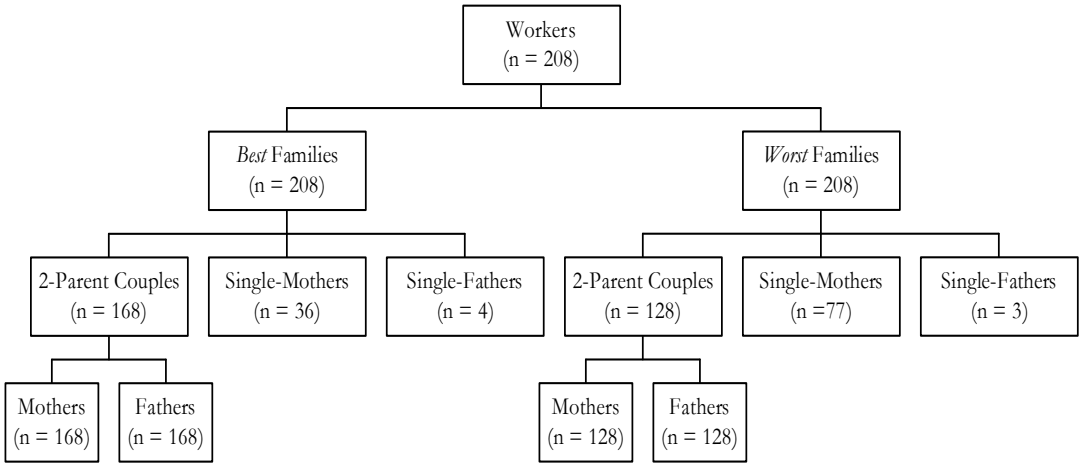

Figure 1: CFAI-W Sample

workers by the time they completed the foster parent training and approval periods. Slightly over half had birth or adopted children with them at the time of application, and only a few provided kinship family foster care.

Table 2 shows the demographic characteristics of female applicants. Among all female applicants almost three-fourths were married, most had birth or adopted children at the time of application, most were licensed, most had one or more foster children placed with them, and were well known to their workers by the time they completed the foster care training and licensing periods. Over half were European American. Among those who were married, almost three-fourths were European American, most were licensed to foster, and most had one or more children placed with them. Most were well known by their foster care workers by the time they completed the foster care training and licensing periods, and only a few provided kinship family foster care.

Also shown in Table 2 are the demographic characteristics of male applicants. Among all male applicants almost all were married, almost three-fourths were European American, most were licensed to foster, and most had one or more foster children placed with them. Most were well known by their workers by the time they completed the foster parent training and licensing periods, and only a few provided kinship family foster care. Among male applicants who were married, almost three-fourths were European American, most were licensed to foster and had one or more children placed with them, most were well known by their workers by the time they completed the foster parent training and licensing periods, and only a few provided kinship family foster care.

Table 3 shows the demographic characteristics of foster care workers. Most were European American, conducted pre-service training with family foster care applicants, and knew these applicants well by the end of the applicants' training and approval

periods. These workers were almost evenly divided among public and private agencies, slightly more than half worked exclusively with foster families, and slightly fewer than half worked with both foster families and foster children. In addition, but not shown in Table 3, a little over half of these workers had Bachelor's degrees in social work or another related field. Also, workers had a range of years of child welfare experience (*M* = 13.50, *SD* = 8.44, *Mdn* = 12.00, *Range* 1 to 35) and of foster care experience (*M* = 9.47, *SD* = 7.27, *Mdn* = 8.00, *Range* 1 to 33).

Agency characteristics

Table 4 shows the characteristics of participating foster care agencies from 25 different states. There were eight public agencies representing the following states: Colorado, Louisiana, Montana, North Carolina, Ohio, Pennsylvania, Tennessee, and Virginia. And, there were 24 private agencies representing the following 17 states: Arizona, California, Florida, Georgia, Hawaii, Kentucky, Maryland, Massachusetts, Missouri, Montana, North Dakota, Oklahoma, Oregon, Pennsylvania, Texas, Tennessee, and Washington. Table 4 shows the numbers of foster families and foster children served by these agencies, as well as information on training, home visits, and payments. In addition, but not shown in Table 4, most agencies, both public and private, used MAPP or PRIDE, or some derivation of one or the other, as their training protocols for family foster care applicants.

Comparison of best and worst families

As previously mentioned, workers were asked to think about the *best* foster families they had ever worked with and the *worst* foster families they had ever worked with, and to think about these families as they were at the time they applied to foster. This was done to obtain theoretical anchors (i.e., *best* and *worst*) in the context of which

the validity of CFAI-W scores could be examined (e.g., *best* applicants would have higher CFAI-W scores compared to *worst* applicants). The extent to which *best* applicants outperform *worst* applicants on important foster family outcomes (such as licensure status and child placement status) would provide empirical evidence for the validity of these theoretical anchors, and this empirical evidence is paramount to examining the validity of CFAI-W scores. To this end, *best* and *worst* foster family applicants are compared below.

Tables 5 through 10 show comparisons of *best* and *worst* families. As shown in Table 5, for all families (i.e., one- and two-parent), *best* families were more likely to be married, licensed, have birth or adopted children in their homes at the time of application, have one or more children placed with them after they were licensed to foster, and be well known by their workers compared to *worst* foster families. (All of these differences were statistically significant.) *Worst* foster families were more likely to provide kinship foster care compared to *best* foster families, and this difference was also significant. In addition, with one exception, for all foster families, *best-worst* status was positively and significantly correlated with being married, having birth or adopted children in the home at the time of application, being licensed to foster, having one or more children placed in the foster home after becoming licensed to foster, and being well known by a worker. *Best-worst* status was negatively and significantly correlated with providing kinship family foster care.

Table 6 shows comparisons between married *best* and *worst* families. *Best* two-parent families were more likely to be licensed to foster, have one or more children placed with them after they were approved to foster, and be well known by their workers, compared to *worst* two-parent families. (These differences were statistically significant.)

Also, *worst* two-parent families were significantly more likely to provide kinship foster care, compared to *best* two-parent families. There were no significant differences between *best* and *worst* families with regard to having birth or adopted children in the home at the time of application to foster. For married families, *best* foster family status was positively and significantly correlated with becoming licensed, having one or more children placed in the foster home after becoming licensed to foster, and being well known by a worker. *Best-worst* status was negatively and significantly correlated with providing kinship family foster care. There was no statistically significant relationship between *best-worst* status and having one or more children in the home at the time of application.

Table 7 shows comparisons between *best* and *worst* female applicants. Among all female applicants, *best* female applicants were significantly more likely to be married, have birth or adopted children in their homes at the time of application, be licensed to foster, have one or more children placed in their homes after licensure, and be well known by their workers compared to *worst* female applicants. *Worst* female applicants were significantly more likely to provide kinship family foster care compared to *best* female applicants. There were no statistically significant differences between *best* and *worst* female applicants with regard to race. In addition, for all female applicants *best-worst* status was positively and significantly correlated with being married, having birth or adopted children in the home at the time of application, becoming licensed to foster, having one or more children placed in a home after being licensed to foster, and being well known by a worker. *Best-worst* status was negatively and significantly correlated with providing kinship family foster care. There was no relationship between *best-worst* status and race.

Table 8 shows results for all *best* and *worst* male applicants. *Best male* applicants were significantly more likely to be licensed to foster, have one or more children placed in their homes after licensure, and be well known by their workers compared to *worst* applicants. *Worst* male applicants were significantly more likely to provide kinship family foster care compared to *best* applicants. There were no significant differences between *best* and *worst* male applicants with regard to marital status, race, or having birth or adopted children in the home at the time of application. In addition, for all male applicants, *best-worst* status was positively and significantly correlated with being licensed to foster, having one or more children placed in a home after licensure, and being well known by a worker. *Best-worst* status was negatively and significantly correlated with providing kinship family foster care. There was no relationship between *best-worst* status and marital status, race, or having birth or adopted children in the home at the time of application.

Table 9 shows comparisons between married *best* and *worst* female applicants. Among female applicants who were married, *best* applicants were significantly more likely to be licensed to foster, have one or more children placed in their homes after being licensed to foster, and be well known by their workers compared to *worst* applicants. *Worst* applicants were significantly more likely to provide kinship family foster care compared to *best* applicants. There were no statistically significant differences between married *best* and *worst* female applicants with regard to race or having birth or adopted children in the home at the time of application. In addition, for married female applicants, *best* status was positively and significantly correlated with being licensed to foster, having one or more children placed, being licensed, and being well known by a worker. And, *best-worst* status was negatively and significantly correlated with providing

kinship family foster care. For female applicants there was no relationship between *best-worst* status and race, or between *best-worst* status and having birth or adopted children in the home at the time of application.

Table 10 shows the results for *best* and *worst* male applicants who were married. *Best* applicants were significantly more likely to be licensed to foster, have one or more children placed in the home after being licensed to foster, and be well known by their workers compared to *worst* male applicants. *Worst* male applicants were significantly more likely to provide kinship family foster care compared to *best* male applicants. There were no statistically significant differences between *best* and *worst* male applicants with regard to race or having birth or adopted children in the home at the time of application. In addition, for male applicants, *best-worst* status was positively and significantly correlated with having birth or adopted children in the home at the time of application, being licensed to foster, having one or more children placed in a home after licensure, and being well known by a worker. *Best-worst* status was negatively and significantly correlated with providing kinship family foster care. There was no relationship between *best-worst* status and race.

Factorial structure of the CFAI-W

Exploratory factor analyses (EFA) were conducted to determine the subscale structure of each of the CFAI-W. EFA is most appropriate when there is not enough information to specify the underlying factor structure of a set of variables, and generally it is used when constructs are less well defined (Fabrigar, Wegener, MacCallum, Strahan, 1999; Gorsuch, 1983; Loehlin, 1998). EFA was used to examine the subscale structure of these measures because there were no *a priori* hypotheses about the subscale structure of the CFAI-W.

In conducting the factor analyses, Bartlett's test of sphericity and the Kaiser-Meyer-Olkin (KMO) measure of sampling adequacy were used to examine the suitability of the items for factor analysis. Bartlett's test of sphericity tests the null hypothesis that a correlation matrix is an identity matrix (i.e., the variables are unrelated and therefore unsuitable for factor analysis). The KMO indicates the proportion of variance in a set of variables that might be caused by underlying factors; values close to 1.0 generally indicate that a factor analysis may be useful, and values less than 0.50 suggest that a factor analysis probably will not be useful.

After determining the suitability of the items for factor analyses, the scree test was used to get a preliminary idea of how many factors to extract. Unweighted least squares with promax rotation was used to extract factors because this method leads to a consistent estimation of model parameters without the assumption that the observed variables have a particular distribution (Bollen, 1989). Promax rotation was used because it results in an oblique solution that has high and low loadings, with the low loadings reduced to near-zero values when possible (Loehlin, 1998). Promax rotation achieves this by rotating an unrotated factor matrix from an initial orthogonal solution, and then it uses a best least-squares fitting method to identify the most ideal oblique solution (Gorsuch, 1983). Oblique factors are factors that are correlated, and oblique rotation methods are used when the factors are assumed to be correlated; this is the most realistic assumption in most cases.

The structure matrix was used to interpret factors. To enhance *simple structure* items with high loadings on a given factor (i.e., $\geq .30$) and relatively low loadings on other factors (i.e., <.20 than the loading on the given factor) were selected as indicators of the given factor. Finally, empirically derived factors were examined for interpretability.

The 181 core items of the CFAI-W were analyzed first. Then, each set of items in the three subgroup subscales (i.e., coparenting, integrating foster children, and kinship care) were analyzed separately. This was done because the subgroup subscales were completed for subsamples of applicants, whereas the core items were completed for all applicants. The results for the core items are shown first.

Core items and subscales. The number of core items in the general portion of the CFAI-W was too large relative to the number of female and male applicants (i.e., 409 and 303, respectively) to factor analyze all of the core items simultaneously. So, 10 subsets of 35 items (11.7 subjects per item for females and 8.7 subjects per item for males) were selected using random sampling with replacement. This was done by creating an SPSS data file with 181 cases (i.e., items). Then, 35 cases were selected randomly from the 181 cases, 10 times. Samples of 35 were used because this provided a reasonably good ratio of sample size to items for both males and females, and enough items to identify a relatively large number of factors with sufficient items (e.g., seven factors with five items). Only 19 items were not included in at least one of the initial 10 subsets (i.e., items 6,4,172,89,158,136,162,103,111,23,59,140,147,78,53,45,134,8,17). These 19 items were assigned randomly to each of the 10 subsets (so that nine subsets gained two additional items and one subset gained one additional item). Thus, each item appeared in at least one analysis and many items were included in more than one. Ten factor analyses were conducted, one for each of the ten subsets of core items. And, this was done separately for female and male applicants.

For female applicants, with one exception, in each of these analyses the null hypothesis that the correlation matrix was an identity matrix was rejected (Bartlett's test of sphericity), and the Kaiser-Meyer-Olkin (KMO) was greater than .50. In all 10

analyses the scree plot suggested a one-factor solution. Seven items had loadings of < .30, and these were eliminated from the pool of core items.[1]

Similarly, for male applicants, with one exception, in each of these analyses the null hypotheses that the correlation matrix was an identity matrix was rejected, and the KMO was greater than .50. Also, in all 10 analyses the scree plot suggested a one-factor solution. Nine items had loadings of < .30, and seven of those items (i.e. 3, 13, 51, 68, 98, 151, and 160) were the same items eliminated as a result of the factor analyses with the female applicants.[2] These 7 items were eliminated from the larger pool of items that would be used to assess applicants. Items 49 and 50 had multiple factor loadings because these items appeared in multiple subsets. Item 49 had factor loadings of .34, .28, and .31 so it remained in the pool of core items. Item 50 had factor loadings of .30, .28, and .27, and this item was also left in the pool of core items. This 174-item subscale measures a worker's perception of an applicant's general potential to foster successfully, which will be referred to as *General Potential-Worker* (GP-W)[3].

Coparenting subgroup subscale. A total of 588 applicants (294 females and 294 males) were assessed on their abilities to coparent foster children.[4] The null hypothesis that the correlation matrix was an identify matrix was rejected, and the KMO was greater than .50. For both male and female applicants, the factor analyses of these 11 items indicated a one-factor solution, and all items but one (187. *They are willing to spend less time together as a couple*) had factor loadings $\geq$ .30. This 11-item subgroup subscale measures a worker's perception of the potential of two-parent applicant couples

---

[1] *Items 3,13,51,68,98,151,160*
[2] *Item 3,13,49,50,51,68,98,151,160*
[3] *Items for the GP-W are listed in Appendix A*
[4] *Data were missing for two families (i.e., four applicants)*

(different- or same-sex) to parent foster children together, which will be referred to as *Coparenting-Worker* (CP-W)[5].

Integrating Foster Children subgroup subscale. A total of 394 applicants (219 females and 175 males) were assessed on their abilities to integrate foster children into their families. The null hypothesis that the correlation matrix was an identity matrix was rejected, and the KMO was greater than .50. For both male and female applicants, the factor analyses of these 10 items suggested a one-factor solution and three variables were excluded because they had factor loadings < .30:

197. S/he can foster a child who fights with their children.

198. S/he plans their daily life around the children's needs and activities.

203. S/he won't be able to foster a child who is inappropriate sexually with other children in their home.

This 7-item subgroup subscale measures a worker's perception of an applicant's potential to integrate a foster child into a foster family with birth or adopted children, which will be referred to as *Integrating Foster Children-Worker* (IFC-W)[6].

Kinship Care subgroup subscale. A total of 74 applicants (44 females and 30 males) were assessed on their abilities to provide kinship care. The null hypothesis that the correlation matrix was an identity matrix was rejected, and the KMO was greater than .50. For both female and male applicants, the factor analyses of these 7 items indicated a one-factor solution, and all items but one (210. *S/he might pressure the child to take back any statements of abuse about birth parent(s)*) had factor loadings of $\geq$ .30. This 6-item subgroup subscale measures a worker's perception of an applicant's

[5] Items for the CP-W are listed in Appendix C
[6] Items in the IFC-W are listed in Appendix C

potential to provide care to a child of a relative, which will be referred to as *Kinship Care-Worker* (KC-W)[7].

Intercorrelations among subscales. The intercorrelations among the subscales are shown in Table 11 for female applicants and in Table 12 for male applicants. For both female and male applicants, these intercorrelations suggest that these subscales measure marginally distinct but clearly interrelated constructs. The pattern of these intercorrelations will be revisited later when the validity of these subscales is discussed.

Descriptive statistics and reliabilities of the CFAI-W subscales

For each subscale both the mean and the median will be reported because of the skewed distributions of some of the subscales. Both the standard deviation and the range will be reported for each subscale. In addition, the interquartile range also will be reported for each subscale. The interquartile range is the distance between the 75th and the 25th percentile, the subscale score range in which 50% of the sample falls on each subscale. A total of 25% of the sample falls below the subscale mean score for the 25th percentile, 75% below the 75th percentile, and 50% between these two ranges. These ranges can provide rough dividing lines between low, medium, and high mean subscale scores.

In addition to measures of central tendency and variability, the shapes of the distributions of the subscales will be examined. Skew and kurtosis will be examined for each subscale, because these two statistics are useful for identifying markedly non-normal distributions. Although the shapes of the distributions for all of the subscales in the CFAI-W will be examined, only those subscales that have markedly non-normal distributions will be mentioned.

---

[7] Items in the KC-W are listed in Appendix C

Skew is a measure of the asymmetry of a distribution. The normal distribution is symmetric, and skew equals 0. A distribution with a significant positive skew has a long right tail. A distribution with a significant negative skew has a long left tail. As a rough guide, a skewness value more than twice its standard error indicates a departure from symmetry (Norusis, 2002).

Kurtosis is a measure of the extent to which observations cluster around a central point. For a normal distribution kurtosis is 0. A distribution with positive kurtosis has a spiky center and fat tails. A distribution with a negative kurtosis has a flat center and thin tails (Norusis, 2002).

Cronbach's alpha (α) was used to quantify the internal consistency reliability of the subscales (Nunnally & Bernstein, 2001). Internal consistency reliability refers to the consistency with which individuals respond to items within a scale. Cronbach's alpha is a measure of the mean intercorrelation among items weighted by variances, stepped up for the number of items. All else being equal, the larger the number of items in a scale, the higher Cronbach's alpha. Also, the more consistent within-subject responses are, and the greater the variability among subjects, the higher Cronbach's alpha. In addition, Cronbach's alpha will be higher when there is homogeneity of variances among items than when there is not.

The widely-accepted social science convention is that alpha should be equal to .70 or higher to be considered adequate, but some use .75 or .80 while others use .60. The following guidelines will be used to characterize different values of Cronbach's alpha: (a) *Poor*: < .60; (b) *Marginal*: .60 - .69; (c) *Good*: .70 - .79; and (d) *Excellent*: $\geq$ .80.

The standard error of measurement (SEM) also was used to quantify the reliability of the CFAI subscales (Gregory, 2000; Nunnally & Bernstein, 2001). The SEM is an

estimate of the standard deviation of an individual's observed scores from repeated independent administrations of a measure under identical conditions. As such, it is an index of measurement error, and these errors in measurement are assumed to be normally distributed. Unlike Cronbach's alpha and other measures of reliability, the SEM is scale dependent, and so there is no standard for the magnitude of SEM.

The SEM is useful primarily in the interpretation of an individual's score on a measure. That is, the SEM can be used to compute confidence intervals for an individual indicating the likely range for his or her *true* score. So, for example, if a prospective foster mother obtains a score of 2.75 on the Kinship Care subscale, and the SEM for this subscale is .15, the 95% confidence interval for the true score ranges from 2.46 to 3.04 (i.e., $2.75 \pm 1.96 \times .15$). This in turn can be used to examine change over time for an individual or differences between individuals on a particular subscale. The SEM also can be used to determine if an individual scores higher on one subscale than on another.

Subscale descriptive statistics. Tables 13 through 20 show descriptive statistics for the subscales identified through the exploratory factor analyses above. A score was computed for each subscale if at least 80% of the items on that subscale were completed. Descriptive statistics for female applicants (Tables 13 and 14) are shown first, followed by male applicants (Tables 15 and 16). Note that in Tables 13 through 16 four General Potential forms are listed: GP-W, GP(A)-W, GP(B)-W, and GP(C)-W. The 174-item General Potential (GP-W) subscale identified above was separated into 3 alternate forms by randomly assigning 58 items to each of three forms – General

Potential -Form A,[8]General Potential -Form B,[9] and General Potential -Form C.[10] This was done to determine if one 58-item form would be sufficient to measure this domain[11].

As shown in Table 13, for female applicants the distribution of the Coparenting subscale is skewed, and it is negatively skewed. In contrast, as shown in Table 15, for male applicants the distributions of all of the subscales except for the Integrating Foster Children and Kinship Care subscales are negatively skewed. Also, as shown in Table 13, except for the Coparenting and Kinship Care subscales all of the subscales are negatively kurtotic. For male applicants, as shown in Table 15, none of the subscales are kurtotic.

As shown in Tables 13 through 17, the descriptive statistics for the three alternate forms of the GP-W subscale are virtually identical. To examine the equivalence of these forms for female and male applicants *t-tests* for dependent groups were conducted for all possible pairs of the three alternate forms. For female applicants there were significant differences between the means of GP(A)-W and GP(B)-W (t (407) = 4.17, p = .001, two-tailed, r = .98) and between GP(B)-W and GP(C)-W (t (407) = 3.82, p = .001, two-tailed, r = .98). However, in both cases the difference between the means was only .02 on a 4-point scale. There was no significant difference between the means of GP(B)-W and GP(C)-W. For male applicants there were significant differences between GP(A)-W and GP(B)-W (t (302) = 2.78, p = .006, two-tailed, r = .98), GP(A)-W and GP(C)-W (t

---

[8] *1,4,7,8,9,10,21,25,31,33,34,36,46,50,55,57,58,64,67,71,73,78,79,80,85,86,89,90,92,94,96,101,105,107,112,119,122,123,127,129,131,137,138,140,146,147,148,153,158,163,166,169,172,173,175,176,177,180*

[9] *2,11,14,16,17,19,20,23,24,27,28,29,37,38,40,41,43,47,49,53,54,56,60,61,66,69,72,74,75,77,82,88,91,97,100,104,106,118,121,128,133,136,139,141,142,143,144,152,157,159,161,165,167,170,171,178,179,181*

[10] *5,6,12,15,18,22,26,30,32,35,39,42,44,45,48,52,59,62,63,65,70,76,81,83,84,87,93,95,99,102,103,108,109,110,111,113,114,115,116,117,120,124,125,126,130,132,134,135,145,149,150,154,155,156,162,164,168,174*

[11] *The items associated with each of the alternate forms are listed in Appendix D.*

(302) = 2.88, p = .004, two-tailed, r = .98), and GP(B)-W and GP(C)-W (t (302) = 5.87, p = .001, two-tailed, r = .98). The differences among these alternate forms for males were also small, ranging from .02 to .03 on a 4-point scale.

To further test the equivalence of the alternate forms of the GP-W subscale for female and male applicants, differences in variances were tested using a t-test for dependent group variances (Glass & Stanley, 1970). Results indicated that there were no significant differences among the variances of any of the forms, and this was true for female and male applicants. Finally, as shown in Table 17 and 18, for female and male applicants these four forms are highly intercorrelated.

Reliability. Tables 19 and 20 show the reliability of the subscales for both female and male applicants. Listwise deletion was used in these analyses, given that the amount of missing data was small. So, in Table 19, for example, the column labeled *missing* indicates the number of female applicants with missing data on one or more items on each subscale. As shown in Tables 19 and 20, the internal consistency reliability of the four General Potential subscales, the Coparenting subscale, and the Integrating Foster Children subscale is excellent. The internal consistency reliability of the Kinship Care subscales is marginal.

To further examine the equivalence of the three General Potential forms, the correlations in Tables 17 and 18 were corrected for unreliability using the reliability estimates in Tables 19 and 20 for females and males, respectively. The corrected correlations were all 1.00.

For both female and male applicants, the three 58-item General Potential forms have equal raw score means (for all practical purposes), standard deviations, internal consistency reliability, and standard errors of measurement. Correcting for attenuation in

reliability indicates that they are all correlated perfectly, and each is correlated perfectly with the 174-item General Potential form. All of the General Potential forms have excellent internal consistency reliability. Therefore, only one of these 58-item versions is necessary for measuring general potential to foster. However, there is no compelling reason to select one form over the others.

Validity of the CFAI-W

Validity is the degree to which evidence and theory support the proposed interpretation of test scores. The process of validation involves accumulating evidence to provide a sound scientific basis for proposed score interpretation (AERA, APA, NCME, 1999). More specifically, validity is the interpretations of test scores as dictated by the proposed uses that are evaluated, rather than the test itself (AERA, APA, NCME, 1999).

The process of validation begins with a statement of the proposed interpretation of test scores, including a rationale for the relevance of the interpretation to the proposed use (AERA, APA, NCME, 1999). The proposed interpretation of CFAI-W scores, for example, is that lower scores suggest an applicant has fewer of the strengths, skills, and abilities needed to foster successfully, in a relative but not absolute sense, and higher scores suggest an applicant has a greater number of strengths, skills, and abilities needed to foster successfully. The relevance of this interpretation is that the CFAI-W can be used, in combination with other assessment methods, to help foster care workers identify foster family applicants who might benefit from additional training, services, and support in order to help them reach their fullest potential in providing foster care.

Previously, the conceptual domains that represent the specific skills, abilities, and characteristics that are necessary to provide successful foster care were presented, and these conceptual domains considered within the context of the intended use of the

CFAI-W make up the general conceptual framework for the CFAI-W (e.g., general potential to provide successful foster care). Thus, there are specific skills, abilities, and characteristics that an applicant must develop in order to provide successful foster care (e.g., ability to work well with an agency, ability to work well with birth parents, etc.), and scores on the CFAI-W help determine the extent to which an applicant needs additional training, services, and support to develop these skills, abilities, and characteristics.

Moreover, this conceptual framework points to specific propositions that, if empirically validated, support the proposed interpretations for CFAI-W test scores. For example, to assess the general potential to provide successful foster care, evidence for the following propositions should be deemed necessary: (a) certain unique skills and abilities are prerequisite in order to foster well and an applicant should have a certain level of these skills and abilities before beginning to foster; (b) the content domain of the CFAI-W is consistent with these prerequisite skills; (c) test scores on the CFAI-W can be generalized across relevant sets of items; (d) test scores are not unduly influenced by ancillary variables such as race, gender, age, or reading ability; (e) success in fostering can be assessed readily; and (f) applicants with higher scores on the CFAI-W will need less training and support in order to develop the skills, abilities, and characteristics needed to foster well compared to applicants with lower scores. The validation process evolves as these propositions are articulated and evidence is gathered to evaluate their soundness (AERA, APA, NCME, 1999). It is important to understand, however, that strong evidence in favor of one proposition is not sufficient because a validity argument depends upon more than one proposition (AERA, APA, NCME, 1999).

It is also important to consider rival hypotheses that may challenge the proposed interpretations of the CFAI-W. For example, rival hypotheses can be generated by

asking whether a test measures more (construct irrelevance) or less (construct underrepresentation) than its proposed construct (AERA, APA, NCME, 1999). In constructing the CFAI-W, very careful attention was given to ensuring that it contained items relevant to the potential of foster parent applicants to provide successful family foster care, and did not contain irrelevant items. Because focus groups that had the explicit purposes of eliminating items representing irrelevant conceptual domains and ensuring that items represented all relevant conceptual domains were conducted with experienced foster parents and foster care workers, the extent to which construct irrelevance or construct underrepresentation could challenge the proposed interpretations of the CFAI-W is minimal. However, the conceptualization of the domains measured by the CFAI-W is still in an embryonic stage, as is an understanding of the relative importance of different domains. Very little research exists relating these domains to successful fostering (Buehler, Rhodes, Orme, & Cuddeback, 2003), and potential scores should be interpreted and used with these limitations in mind. And, the continuing process of validation may lead to revisions in the CFAI-W, revisions in the conceptual framework of the CFAI-W, or both.

Different types of evidence may be examined in the course of validation, but current conceptualizations of validity eschew the distinct types of validity delineated in the past (e.g., content, criterion, construct) (AERA, APA, NCME, 1999). Such typologies are now considered fragmented and incomplete. Rather, validity is conceptualized as a unitary concept that can be supported by different lines of evidence. Below, several lines of evidence that will be important in validating the use of CFAI-W scores toward their intended interpretation and use are discussed.

Evidence based on test content. Important validity evidence can be obtained from an analysis of the relationship between a test's content and the construct it is intended to measure. Evidence based on test content can include logical and empirical analyses of the adequacy with which the test content represents the content domain and of the relevance of the content domain to the proposed interpretation of scores. Evidence based on test content also can come from expert judgments of the relationship between parts of the test and the construct (AERA, APA, NCME, 1999).

Referring to the general propositions for the CFAI-W outlined above, the first proposition (that certain unique skills and abilities are prerequisite in order to foster well and that an applicant should have a certain level of these skills and abilities before beginning to foster) is validated by the standards for professional practice, current training curricula, empirical studies, and the few existing measures designed to assess foster families. The second proposition (that the content domain of the CFAI-W is consistent with these prerequisite skills) is validated by the activities that were involved in the development of CFAI-W items, which included: (a) semi-structured interviews with a diverse group of foster parents; (b) a review of standards of practice, training curricula, empirical studies, and existing measures relevant to fostering; (c) focus groups with a diverse group of foster care workers to evaluate the items of the CFAI-W for inclusion of all relevant conceptual domains, clarity, and feasibility; and (d) review by experts in the field of child welfare to assess the items for relevance, clarity, and feasibility.

Evidence based on internal structure. Analysis of the internal structure of a test can indicate the degree to which the relationships among test items and test components support the proposed test score interpretations, and the conceptual framework may imply a single dimension of behavior or it may suggest several related

but distinct components (AERA, APA, NCME, 1999). Information and evidence concerning the internal structure of the CFAI-W was presented above, and additional evidence concerning the internal structure of the CFAI-W is presented below.

Evidence based on relations to other variables. Analyses of the relationships of test scores to variables external to the test provide another important source of validity evidence, and external variables may include measures of some criteria that the test is expected to predict or may include relationships to other tests hypothesized to measure related or distinct or unrelated constructs (AERA, APA, NCME, 1999). Scores on the CFAI-W are expected to predict approval to foster, for example, and if this proposition is empirically tested and supported, the proposed interpretation of CFAI-W test scores would be validated. In this section, validity evidence based on the relationship of CFAI-W subscales to variables external to the CFAI-W is examined. It should be noted, however, that many if not most of these propositions are relatively tentative given the paucity of research and theory concerning the potential to provide successful family foster care. Although the primary purpose of this section is to examine validity evidence based on the relationship of the CFAI-W to external variables, first, validity evidence based on the internal structure of the CFAI-W will be examined.

Finally, for all analyses below non-directional hypotheses with $\alpha < .05$ will be tested because results in either direction would be important. In addition, for each analysis below the extent to which the assumptions specific to that analysis have been met will be examined, but only in analyses where a particular assumption is markedly violated will comments be made. Previously, it was determined that any one of the three alternate forms of the General Potential to Foster core subscale (GP-W) (i.e., GP(A)-W, GP(B)-W, GP(C)-W) could be used in place of the GP-W, and that there was no

particular reason to pick one alternate form over the others. Therefore, in examining the validity of scores on the CFAI-W, all three alternate forms will be examined; however, only the results for the GP(C)-W will be presented. The extent to which the results from the analyses with the GP(A)-W or GP(B)-W differ, if at all, will be discussed.

CFAI-W core and subgroup scores were computed for female and male applicants. Also, for each applicant family a family-level score was computed for the CFAI-W core and subgroup subscales. For a one-parent applicant family the family-level scores equaled the parent's individual score. For a two-parent applicant family the family-level scores equaled the mean of the scores for the couple (Orme, Buehler, McSurdy, Rhodes, & Cox, 2003).

All analyses were conducted separately for female and male applicants and at the family level. Analyses were conducted at the family level because foster care agencies and workers make decisions about families rather than individuals (e.g., a family is licensed or not, a child is placed with a family or not). Analyses were conducted separately for female and male applicants to examine the validity of the CFAI-W core and subgroup scores for female and male applicants.

Internal structure of the CFAI-W subscales. Tables 21 through 23 show the intercorrelations among the subscales identified through the exploratory factor analyses above for female, male, and family applicants, respectively. Scores were computed for each subscale if at least 80% of the items on that subscale were completed. These intercorrelations were computed to better understand relationships among the core and subgroup subscales. All of the relationships among these subscales are linear, positive, and theoretically meaningful, such that if an applicant has a high score on the GP(C)-W, for example, that applicant also will tend to have a high score on the CP-W. The large

amount of shared variance (i.e., shared variance among the core and subgroup subscales ranges from 42% to 72%) suggests that the same underlying construct explains scores on the core and subgroup subscales. However, the correlations among the subgroup subscales and between the subgroup subscales and the GP(C)-W suggest that each subgroup subscale is measuring something unique and related to what is being measured by the core subscales, but also something additional to what is being measured by the core subscales. These results provide support that the internal structure of the CFAI-W, as previously established, is valid.

Tables 24 through 26 show the means, standard deviations, and paired-sample *t*-tests comparing the mean differences between subscale scores. These *t*-tests were conducted to examine the extent to which applicants' mean scores were uniform across subscales. For female, male, and family applicants, all but one of the six pairwise comparisons were significantly different, suggesting that applicants were not rated uniformly across subscales. The means of the GP(C)-W and the IFC-W were not significantly different for female, male, or family applicants. Mean differences among the subscales, in absolute value, range from .01 to .39 on a 4-point scale. For female and family applicants, the means of the subscales can be ranked from highest to lowest in the following order: (1) CP-W; (2) IFC-W; (3) KC-W; and (4) KC-W. For male applicants, in general, there are two groups of two subscales, ranked from highest to lowest in the following order: (1) KC-W and GP(C)-W; and (2) CP-W and IFC-W.

Tables 27 through 29 show the paired sample *t*-tests for differences in variances (Glass & Stanley, 1970) for female, male, and family applicants, respectively, which were conducted to further examine the uniformity of subscale scores. These results suggest that, for female, male, and family applicants, the variance for the KC-W is

smaller than the variance for any other subscale. Thus, the potential to provide kinship foster care is less variable than any other domain of fostering measured by the CFAI-W. In addition, for female, male, and family applicants, the variance for the CP-W is larger than the variance for any other subscale. Therefore, the potential to coparent foster children is more variable than any other domain of fostering measured by the CFAI-W.

External relationships. The primary proposition for examining the validity of CFAI-W scores is that applicants rated *best* will have higher scores than applicants rated *worst*. Previously, it was established that *best* applicants were more likely to be licensed to foster and have one or more children placed in their homes compared to *worst* applicants. These results indicate that, despite each worker's using his or her own individual criteria, *best* applicants were relatively better at providing successful foster care than *worst* applicants. These results also lend credence to the methods used in this study (i.e., asking workers to think about their *best* and *worst* foster families as they were during the licensure process); without such support further testing of the validity of the CFAI-W would be suspect.

In this section, additional validity evidence for the proposed use and interpretations of CFAI-W subscale scores is developed. First, however, the variables that will be used to develop the additional validity evidence are described.

Best-worst status. As stated previously, each worker was asked to complete one copy of the CFAI-W for their *best* foster family and one for their *worst* foster family and to think of these families as they were during the licensure process. Workers were allowed to define *best* and *worst* themselves. The terms *best* and *worst* are italicized, throughout this dissertation, because it is important to emphasize that these distinctions are relative rather than absolute. Thus, the term *worst* does not imply an absolute absence of the

skills, characteristics, and abilities needed to provide successful foster care, but that relative to *best* families, *worst* families might need additional training, services, and support in order to realize their fullest potential to provide successful foster care. And, this sample of applicants includes only those families who made it at least through three quarters of the way through the licensing process. Truly "worst" families, in an absolute sense, might be characterized by an absence of the skills, characteristics, and abilities needed to provide successful foster care and might have been more likely to have dropped out of the licensing process at an earlier stage (i.e., earlier than three quarters of the way through). *Best-worst* status was coded 0 = *worst* and 1 = *best* in the analyses below.

Foster family licensure. There is no perfect indicator of an applicant family's ability to provide at least adequate care for foster children, and therefore no *gold standard* for assessing the validity of the CFAI-W. Moreover, the CFAI-W (and the CFAI in general) does not include all of the dimensions relevant to licensure of foster parents, and thus it shouldn't be correlated perfectly with any single indicator. Licensure status, however, though not a perfect indicator, is an important one that should be correlated with the CFAI-W. Therefore, workers were asked on the CFAI-W to indicate whether their *best* and *worst* applicant families were licensed to foster. Licensure status was coded 0 = no and 1 = yes in the analyses below.

Child placement. Placement of a child is an indicator, albeit imperfect, that the home and the family are judged able to provide at least adequate care for foster children. Workers were asked to indicate whether their *best* and *worst* applicant families had children placed in their homes. Child placement was coded 0 = no child placed and 1 = child placed in the analyses below.

The marital status variable was not used any of the analyses with male applicants because only seven (2%) were single. Also, marital status was not used in any of the analyses of the CP-W because this subscale was completed only for applicants who were married or otherwise partnered.

As previously stated, the primary proposition for examining the validity of scores on the CFAI-W subscales is that *best* applicants will have greater potential to foster successfully compared to *worst* applicants. However, more specific propositions that will provide evidence for different aspects of validity toward the intended use and interpretation of scores on the CFAI-W will be enumerated and examined below. Some of these propositions are considered confirmatory, and some are considered exploratory, and using these terms to describe the propositions is somewhat of a departure from the language of the current standards for examining validity (AERA, APA, NCME, 1999). Nevertheless, propositions that are theoretically clear (e.g., *best* applicants will have higher scores on the IFC-W than *worst* applicants) are considered confirmatory (propositions 1 – 3 below). Propositions that don't have any clear theoretical underpinning (e.g., how are gender and scores on the CP-W related) are considered exploratory (propositions 4 – 7 below), and, because they are exploratory, these propositions are phrased as questions rather than statements. It is important to remember, however, that given the paucity of the research in this area, these distinctions warrant cautious interpretation. The confirmatory propositions are articulated and examined first, and these are examined at the individual- (i.e., female and male applicants) and at the family-level.

Confirmatory validity proposition 1: Best applicants will have higher CFAI-W core and subgroup scores than worst applicants, even when controlling for applicants' race

and marital status, and this relationship will not be moderated by race. To examine this proposition, ordinary least squares regression was used and separate regression analyses were conducted for the CFAI-W core and subgroup scores. In each of these analyses the subscale score was regressed on *best-worst* status, race, marital status, and the cross-product of *best-worst* status and race. *Best-worst* status was the first variable entered (step 1), then race and marital status were entered (step 2), and the cross-product of *best-worst* status and race was entered last (step 3).

Table 30 shows the results for GP(C)-W scores. In the first model, *best-worst* status was significantly related to GP(C)-W scores in the predicted direction for female, male, and family applicants. *Best-worst* status explained 71% of the variance in GP(C)-W scores for female applicants, 68% of the variance in GP(C)-W scores for male applicants, and 71% of the variance in GP(C)-W scores for family applicants. In the second model, *best-worst* status was significantly related to GP(C)-W scores in the predicted direction when controlling for race and marital status. Neither race nor marital status was significantly related to GP(C)-W scores, and no additional variance in GP(C)-W scores was explained when race and marital status were entered into the model. There was no significant interaction between *best-worst* status and race.

Next, Proposition 1 was examined with the Coparenting (CP-W) subgroup subscale. (All analyses examining the CP-W were limited to the sample of applicants who were married or otherwise partnered at the time they applied to foster.) Table 31 shows the results for CP-W scores. In the first model, *best-worst* status was significantly related to CP-W scores in the predicted direction for female, male, and family applicants. *Best-worst* status explained 60% of the variance in CP-W scores for female applicants, 61% of the variance in CP-W scores in male applicants, and 61% of the variance in CP-

W scores in family applicants. In the second model *best-worst* status was significantly related to CP-W scores when controlling for race. Race was not significantly related to CP-W scores, and no additional variance in CP-W scores was explained when race was entered into the model. There was no significant interaction between *best-worst* status and race as shown in the third model.

Next, Proposition 1 was examined with the Integrating Foster Children (IFC-W) subgroup subscale. (All analyses of the IFC-W were limited to the sample of applicants who had birth or adopted children at the time they applied to foster.) Table 32 shows the results for IFC-W scores. In the first model *best-worst* status was significantly related to IFC-W scores in the predicted direction for female, male, and family applicants. *Best-worst* status explained 52% of the variance in IFC-W scores for female applicants, 55% of the variance in IFC-W scores for male applicants, and 52% of the variance in IFC-W scores for family applicants. In the second model, *best-worst* status was significantly related to IFC-W scores when controlling for race and marital status. Neither race nor marital status was significantly related to IFC-W scores, and no additional variance in IFC-W scores was explained when race and marital status were entered into the model. There was no significant interaction between *best-worst* status and race as shown in the third model.

Lastly, Proposition 1 was examined with the Kinship Care (KC-W) subgroup subscale. (All analyses of the KC-W were limited to those applicants who were planning on providing kinship family foster care at the time they applied to foster.) Table 33 shows the results for KC-W scores. In the first model, *best-worst* status was significantly related to KC-W scores in the predicted direction for female, male, and family applicants. *Best-worst* status explained 52% of the variance in KC-W scores for female applicants, 52%

of the variance in KC-W scores in male applicants, and 54% of the variance in KC-W scores for family applicants. For female applicants, in the second model *best-worst* status was significantly related to KC-W scores when controlling for race and marital status. Neither race nor marital status was significantly related to KC-W scores, and no additional variance in KC-W scores was explained when race and marital status were entered into the model. Also, for female applicants, there was no interaction between *best-worst* status and race as shown in the third model. For male and family applicants, there was a significant interaction between *best-worst* status and race as shown in the third model, (see Tables 34 and 35), such that an increase in *best-worst* status was associated with an increase in KC-W scores, but this effect was larger for African American/Other applicants compared to European American applicants (see Figure 2 below). This interaction term explains an additional 9% and 5% of the variance in KC-W scores for male and family applicants, respectively. There is evidence, however, that the assumption of homoscedasticity was violated in the analyses with KC-W scores.

Confirmatory validity proposition 2: Applicants who were licensed will have higher CFAI-W core and subscale scores than applicants who were not licensed, even when controlling for applicants' race and marital status, and this relationship will not be moderated by race. First, however, it was important to examine whether the predicted relationships were linear or quadratic (e.g., GP(C)-W scores had a linear and positive relationship to licensure status up to a specific point, but no relationship beyond that point) (Orme, Buehler, McSurdy, Rhodes, Cox, & Patterson, 2003). To examine the nature of these relationships, binary logistic regression was used, licensure status was the dependent variable, CFAI-W subscale scores were entered first and CFAI-W subscale scores were squared and entered second. Results from these analyses will be



Figure 2: Best-worst x race interaction and KC-W scores

presented first for each CFAI-W subscale.

Next, binary logistic regression was used to examine Proposition 2 and licensure status was regressed on CFAI-W subscale scores, race, marital status, and the cross-product of CFAI-W subscale scores and race. CFAI subscale scores were entered first, race and marital status were entered next, and the cross-product of CFAI-W subscale scores and race was entered last.

Table 34 and 35 show the results for the GP(C)-W. Results indicated a linear (not curvilinear) relationship (see Table 34). This was further confirmed by an examination of a scatterplot with the GP(C)-W scores on the horizontal axis and the probability of approval as estimated by the model containing the linear and quadratic terms on the vertical axis.

After establishing that the relationship between the GP(C)-W and licensure status was linear rather than curvilinear, Proposition 2 was examined with the GP(C)-W subscale (see Table 35). In the first model GP(C)-W scores were significantly related to licensure status for female, male, and family applicants in the predicted direction. In the

second model GP(C)-W scores were significantly related to licensure status when controlling for race and marital status. Neither race nor marital status was significantly related to licensure status. There was no significant interaction between GP(C)-W scores and race as shown in the third model.

Proposition 2 was then tested with the CP-W. Table 36 shows the results from the model used to examine the nature of the relationship between CP-W scores and licensure status. Results supported a linear but not curvilinear relationship.

Table 37 shows the results for the regression models used to examine CP-W scores and their relationships to applicants' licensure status. In the first model, CP-W scores were significantly related to licensure status for female, male, and family applicants in the predicted direction. In the second model, CP-W scores were significantly related to licensure status when controlling for race. Race was not significantly related to licensure status. There was no significant interaction between CP-W scores and race as shown in the third model.

Proposition 2 was next tested with the IFC-W. The results shown in Table 38 indicate that the relationship between IFC-W scores and licensure status is linear and not curvilinear. Table 39 shows the results for the regression models used to examine IFC-W scores and their relationship to applicants' licensure status. In the first model, IFC-W scores were significantly related to licensure status for female, male, and family applicants in the predicted direction. In the second, model IFC-W scores were significantly related to licensure status when controlling for race and marital status. Race was not significantly related to licensure status. Marital status was significantly related to licensure status for female and family applicants such that married applicants had higher

IFC-W scores compared to applicants who were single. There was no significant interaction between IFC-W scores and race as shown in the third model.

Proposition 2 was not tested with the KC-W because of the small number of applicants who provided kinship care (i.e., 44 female applicants, 30 male applicants, and 46 family applicants) and the small amount of variance in licensure status among applicants who provided kinship care. Among the 44 female applicants who provided kinship care only eight (18.2%) were not licensed to foster and 36 (81.8%) were licensed to foster. Among the 30 male applicants who provided kinship foster care only seven (23.3%) were not licensed to foster and 23 (76.7%) were licensed to foster. Among family applicants who provided kinship foster care only nine (19.6%) were not licensed to foster and 37 (80.4%) were licensed to foster.

Confirmatory validity proposition 3: Applicants who had children placed will have higher CFAI-W core and subscale scores than applicants who did not, even when controlling for applicants' race and marital status, and this relationship will not be moderated by race. First, however, it was important to examine whether the predicted relationships were linear or quadratic (e.g., whether GP(C)-W scores had a linear and positive relationship to child placement status up to a specific point but no relationship beyond that point) (Orme, Buehler, McSurdy, Rhodes, Cox, & Patterson, 2003). To examine the nature of these relationships, binary logistic regression was used, child placement status was the dependent variable, CFAI-W subscale scores were entered first and CFAI-W subscale scores were squared and entered second. Results from these analyses will be presented first for each CFAI-W subscale (i.e., GP(C)-W, CP-W, IFC-W, and KC-W).

Next, binary logistic regression was used to examine Proposition 3 and child placement status was regressed on CFAI-W subscale scores, race, marital status, and the cross-product of CFAI-W subscale scores and race. CFAI subscale scores were entered first, race and marital status were entered next, and the cross-product of CFAI-W subscale scores and race was entered last.

Tables 40 and 41 show the results for the GP(C)-W. Results indicated a linear but not curvilinear relationship (see Table 40). This was further confirmed by an examination of a scatterplot with the GP(C)-W scores on the horizontal axis and the probability of approval as estimated by the model containing the linear and quadratic terms on the vertical axis. After establishing that the relationship between the GP(C)-W and child placement status was linear and not curvilinear, Proposition 2 was examined with the GP(C)-W subscale (see Table 41). In the first model GP(C)-W scores were significantly related to child placement status for female, male, and family applicants in the predicted direction. In the second model GP(C)-W scores were significantly related to child placement status when controlling for race and marital status. Neither race nor marital status was significantly related to child placement status. There was no significant interaction between GP(C)-W scores and race as shown in the third model.

Proposition 3 was then tested with the CP-W. Table 42 shows the results from the model used to examine the nature of the relationship between CP-W scores and child placement status. Results supported a linear but not curvilinear relationship. Table 43 shows the results for the regression models used to examine CP-W scores and their relationships to applicants' child placement status. In the first model CP-W scores were significantly related to child placement status for female, male, and family applicants in the predicted direction. In the second model CP-W scores were significantly related to

child placement status when controlling for race. Race was not significantly related to child placement status. There was no significant interaction between CP-W scores and race as shown in the third model.

Proposition 3 was next tested with the IFC-W. The results in Table 44 indicate that the relationship between IFC-W scores and child placement status is linear and not curvilinear. Table 45 shows the results for the regression models used to examine IFC-W scores and their relationship to applicants' child placement status. In the first model IFC-W scores were significantly related to child placement status for female, male, and family applicants in the predicted direction. In the third model IFC-W scores were significantly related to child placement status when controlling for race and marital status and there was a significant interaction between IFC-W scores and race for female and family applicants (see Figures 3 and 4 below) such that higher IFC-W scores increased the probability of child placement for European American applicants but decreased the probability of child placement for African American applicants, and this was true for married and single female applicants. Marital status was also significantly related to child placement status for female and family applicants. For male applicants race was not significantly related to child placement status as shown in model two, and there was no significant interaction between IFC-W scores and race as shown in the third model.

Proposition 3 was not tested with the KC-W because of the small number of applicants who provided kinship care (i.e., 44 female applicants, 30 male applicants, and 46 family applicants) and the small amount of variance in child placement status among those applicants who provided kinship care. Among the 44 female applicants who provided kinship care, only two (4.5%) did not have children placed in their homes. Among the 30 male applicants who provided kinship foster care, only two (6.7%) did not

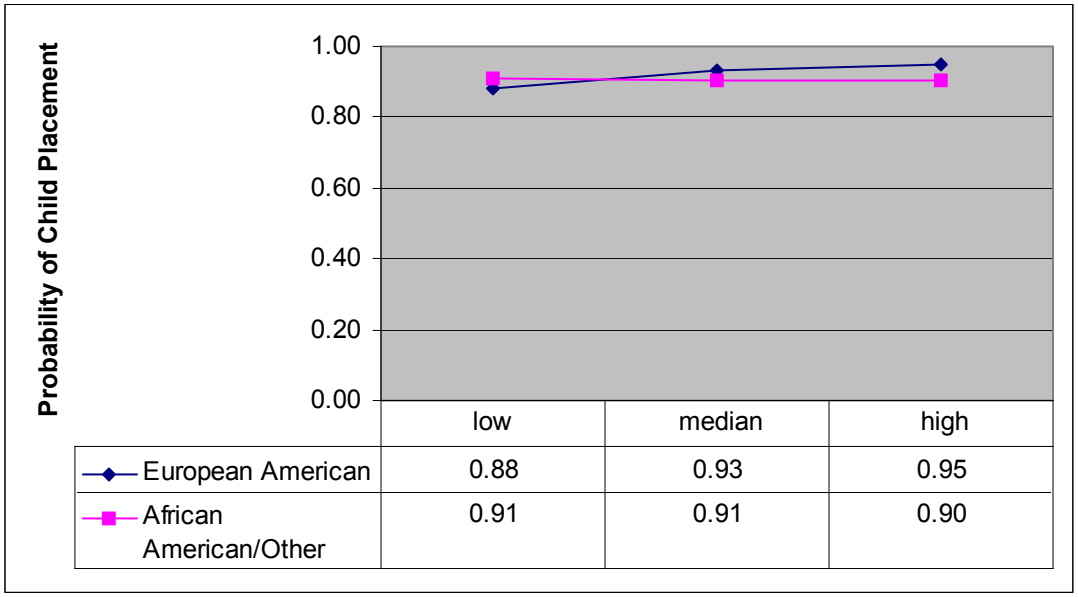

Figure 3: Interaction effect of IFC-W subscale scores and race on child placement status for married female applicants

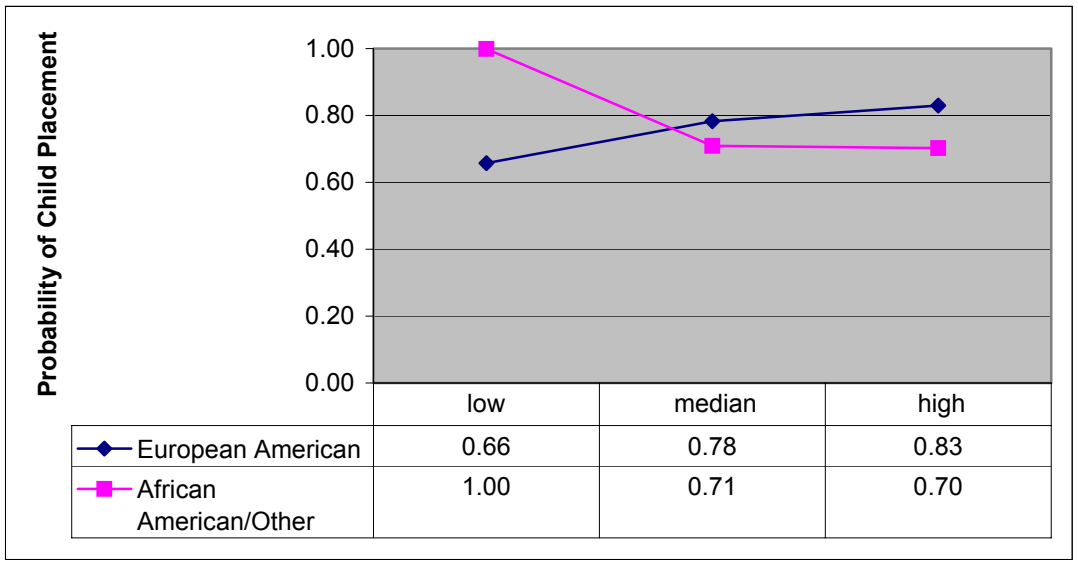

Figure 4: Interaction effect of IFC-W subscale scores and race on child placement status for single female applicants

have children placed in their homes. And, among the 46 family applicants who provided kinship foster care only two (4.3%) did not have children placed in their homes.

Exploratory validity proposition 4: What is the relationship between kinship status and CFAI-W core subscale scores? In order to examine this proposition, independent groups *t*-tests and point-biserial correlations were used. Kinship care was provided by 11% (44) of female, 10% (30) of male, and 11% (46) of family applicants. KC-W subscale scores were not examined because workers completed the KC-W only for applicants who provided kinship foster care.

The results for the GP(C)-W subscale scores are shown in Table 46. Among all applicants (i.e., female, male, and family), those who did not provide kinship foster care had significantly higher GP(C)-W subscale scores compared with those who did provide kinship foster care. GP(C)-W subscale scores and kinship care status were significantly, moderately, and negatively correlated.

The results for the CP-W subscale scores are shown in Table 47. Among all applicants (i.e., female, male, and family), those who did not provide kinship foster care had significantly higher CP-W subscale scores compared with those who did provide kinship foster care. CP-W subscale scores and kinship care status were significantly, moderately, and negatively correlated.

The results for the IFC-W subscale scores are shown in Table 48. Among male and family applicants, those who did not provide kinship foster care had significantly higher IFC-W subscale scores compared with those who did provide kinship foster care. For male and family applicants, IFC-W subscale scores and kinship care status were significantly and negatively correlated. For female applicants, IFC-W subscale scores and kinship status were not significantly related.

Exploratory validity proposition 5: What is the relationship between gender and CFAI-W core and subgroup subscale scores for applicants from two-parent families? In order to examine this proposition, dependent-groups *t*-tests, product-moment correlations, and dependent groups tests of equality of variances were used.

Table 49 shows the results of the dependent groups tests and product-moment correlations for all CFAI-W subscales. Wives had significantly higher mean GP(C)-W and CP-W subscale scores compared to husbands, however, the absolute size of these differences is small. There were no significant differences in the mean scores for wives and husbands on the IFC-W subscale or the KC-W subscale. CFAI-W subscale scores for wives and husbands were significantly, positively, and highly correlated. Although it is not shown in Table 49, there were no differences in the variances of CFAI-W subscales scores between wives and husbands.

Exploratory validity proposition 6. What is the relationship between how well workers know applicant families and the CFAI-W subscale scores of those families? To examine this proposition independent t-tests were conducted. The dependent variable was CFAI-W subscale scores, and the independent variable was workers' knowledge of applicants (coded 0 for not well known and 1 for well or very well known). Point-biserial correlations were computed to examine the strength and direction of these relationships.

The results for the GP(C)-W subscale scores are shown in Table 50. For female applicants, 22.9% (93) were not well known by their workers and 77.1% (314) were well known by their workers. For male applicants, 20.5% (62) were not well known by their workers and 79.5% (240) were well known by their workers. And, for family applicants, 23.2% (n = 96) were not well known by their workers and 76.8% (n = 318) were well known by their workers. All applicants (i.e., female, male, and family) who were well

known by their workers had significantly higher mean GP(C)-W subscale scores, compared to applicants who were not well known by their workers, and GP(C)-W subscale scores and workers' knowledge were significantly, moderately, and positively correlated.

The results for the CP-W subscale scores are shown in Table 51. For female applicants, 20.2% (59) were not well known and 79.8% (233) were well known by their workers. For male applicants, 20.2% (59) were not well known and 79.8% (233) were well known by their workers. And, for family applicants, 20.1% (n = 59) were not well known and 79.9% (n = 234) were well known by their workers. For all applicants (i.e., female, male, and family), those who were well known by their workers had significantly higher CP-W subscale scores, compared to those applicants who were not well known by their workers, and CP-W subscale scores and workers' knowledge were significantly, moderately, and positively correlated.

The results for the IFC-W subscale scores are shown in Table 52. For female applicants, 19.4% (42) were not well known, and 80.6% (174) were well known by their workers. For male applicants, 17.2% (30) were not well known and 82.8% (144) were well known by their workers. And, for family applicants, 19.3% (n = 42) were not well known and 80.7% (n = 176) were well known by their workers. For all applicants (i.e., female, male, and family), those whose were well known by their workers had significantly higher IFC-W subscale scores compared to applicants who were not well known by their workers and IFC-W subscale scores and workers' knowledge were significantly, moderately, and positively correlated.

The results for the KC-W subscale scores are shown in Table 53. For female applicants, 25% (11) were not well known and 75% (33) were well known by their

workers. For male applicants, 23.3% (7) were not well known and 76.7% (23) were well known by their workers. And, for family applicants, 26.1% (n = 12) were not well known and 73.9% (n = 34) were well known by their workers. For all applicants (i.e., female, male, and family) there were no significant differences in mean KC-W subscales scores between applicants who were well known by their workers and those applicants who were not well known by their workers and KC-W subscale scores and workers' knowledge were not significantly correlated.

Exploratory validity proposition 7. What is the relationship between workers' characteristics and CFAI-W core and subgroup subscale scores? To examine this proposition the CFAI-W core and subgroups subscales were used as dependent variables in separate multiple regression analyses. In each of these analyses the independent variables were: (a) workers' race coded as 0 for European American and 1 for African American/Other; (b) workers' experience in conducting pre-service training coded 0 for no experience and 1 for previous experience; (c) workers' education coded 0 for Bachelor's degree or less and 1 for Master's degree or more; (d) workers' foster care experience in years; and (e) workers' agency status coded 0 for public and 1 for private. These variables were entered simultaneously in each analysis. Results indicate that worker characteristics had no relationship with any CFAI-W core and subgroup subscale scores and this was true for female, male, and family applicants.

Chapter 5: Discussion and Implications for Social Work Practice

Foster family applicants form the pool from which caregivers are selected for the day-to-day care of the many vulnerable children placed in out-of-home care. Measures designed to assess foster families and to a lesser extent to assess foster family applicants, do exist. The underlying problem is not a lack of measures, however, but that limited research exists concerning the reliability and validity of standardized measures that can be used by foster care workers and agencies to identify the strengths and training and service needs of applicants. This is remarkable given the large and increasing number of vulnerable children in foster care (i.e., 542,000 on September 30, 2001) (DHHS, 2003). Moreover, this is a problem given the shortage of experienced workers, the high numbers of less experienced and less educated workers, and the high caseloads and turnover rates among workers that characterize our nation's foster care agencies (GAO, 1995). Consequently, greater numbers of inexperienced foster care workers are being charged with making critical decisions about licensing foster family applicants and placing vulnerable foster children in the homes of these applicants after they are licensed to foster.

This dissertation is an examination of the psychometric properties of the CFAI-W, a measure designed to identify the strengths and training and service needs of foster family applicants. In this section, findings demonstrating that CFAI-W subscale scores are reliable and valid toward their intended interpretation and use, in the context of the limitations of the research, are discussed. This is followed by a discussion of how the CFAI-W is a time and cost efficient assessment tool that can introduce much-needed objectivity and accountability to the process of assessing and licensing foster family applicants. This section is concluded with a discussion of how the CFAI-W can

strengthen foster care practice, policy, and research and help social workers involved in foster care practice, policy, and research adopt empirically-based practices in this arena.

Overview

The purpose of this research was to examine the psychometric properties of the CFAI-W, a measure designed to assess the strengths and training and service needs of foster family applicants. The CFAI-W was intended to be used in combination with clinical judgment and other assessment methods to help workers assess applicants and help applicants develop the skills, abilities, and characteristics needed to provide successful foster care. Thus, if adequately reliable and valid, the CFAI-W could introduce much-needed standardization and accountability to the licensing process. This would help both inexperienced and experienced workers in making critical decisions about licensing applicants and this is particularly salient in light of the fact that workers often have large caseloads and limited amounts of time to assess foster family applicants.

The extent to which the previously stated research questions are adequately answered would demonstrate that the CFAI-W has adequate reliability and validity toward its intended interpretation and use. The research questions are as follows: (a) How many family characteristics does the CFAI-W measure, (b) Is the CFAI-W reliable in that it consistently measures the potential to provide successful foster care, and (c) Is the CFAI-W valid toward identifying strengths and service needs of foster family applicants.

Each research question provides a necessary but not sufficient piece of information as to the extent that the goals of this research have been met. Cumulatively, the information provided by these questions will provide evidence that the CFAI-W <u>is</u> or <u>is</u>

not appropriate for use by foster care workers and agencies in the assessment of the strengths and training and service needs of foster family applicants. These questions and the results associated with these questions are addressed below. First, however, it is important to understand the characteristics of the sample in the context of the generalizability of the results of this study.

Characteristics of sample

It is important to examine the composition of the sample of workers and applicants in this study. Obtaining a probability sample of all foster care workers in the United States would have been the ideal method to ensure the external reliability, and thus generalizability of results, of this research. However, because it was not possible to obtain a probability sample it was important to obtain at least a diverse sample, and the sample of workers who participated in this study were diverse with regard to such factors as race, education, experience, and geographic region of the country. Also, these workers represented public and private agencies that provided training, support, and services to foster parents who provided kinship, non-kinship, and therapeutic foster care.

The diversity of the sample of workers ensures two things. First, the CFAI-W, given that it has good psychometric properties, is appropriate for use by workers irrespective of their agency type, training, education, or region of the country. This is critical to the standardization of the CFAI-W. For example, the CFAI-W can be used just as readily to assess the strengths and needs of applicants who apply to a therapeutic foster care agency in the northeast as it can to assess applicants who apply to provide kinship family foster care in the southwest.

Second, the diversity of the sample of workers ensured that the sample of applicants in this study was also diverse. Indeed, the sample of applicants in this study

was diverse with regard to race, licensure status, child placement status, agency status, and geographic region of the country. Thus, just as a wide range of workers can use the CFAI-W, it also can be used to assess a wide range of applicants (i.e., applicants with varying potential to provide successful foster care who are applying to provide various types of foster care all over the country).

The applicability of the CFAI-W to applicants is not limited by race, gender, or marital status. This is important because the foster children and the foster families that care for them that make up a large part of our nation's foster care system are diverse. For example, over half of the children in foster care are children of color, with African American foster children making up the largest proportion of children of color in care (40%) (DHHS, 2003). Also, estimates of the number of children in kinship foster families range from 137,385 (DHHS, 2003) to 405,000 (Ehrle, Geen, & Main, 2003) and kinship foster families are more likely to be African American compared to non-kinship foster families (Cuddeback, in press; Cuddeback & Orme, 2002). Thus, the CFAI-W can accommodate the diversity of the children in our nation's foster care system and the foster families and workers that care for these children.

In addition, the applicants in the sample represent the *best* and *worst* foster families as selected by the workers in the study. This methodology of asking workers to identify their *best* and *worst* foster families and to think about these families as they were during the licensing process, although not completely new (Campbell et al., 1980; Wolins, 1963), was useful for a variety of reasons. For example, this was an efficient way to collect data about a diverse sample of applicants that otherwise would have been much more difficult, if not impossible, to access using more conventional and direct methods. Moreover, this methodology capitalized on the practice wisdom of the workers

in the study, such that the operationalization of *best* and *worst* was driven by real world foster care experience, and therefore the extent that the CFAI-W distinguishes between *best* and *worst* foster family applicants is grounded in practice wisdom. Finally, this methodology was useful in getting workers to think about their *best* and *worst* families in a comprehensive way, such that all aspects of fostering were covered (Cautley, 1980; Child Welfare Institute, 1987; CWLA, 1975, 1995, 2000; Fish, 1984; Illinois Department of Children and Family Services, 1993; Orme & Buehler, 2001; Pecora et al., 2000; Teather, Davidson, & Pecora, 1994; Wolins, 1963). This comprehensiveness is beyond much of what is currently in the literature (Cautley, 1980; Cautley, Aldridge, & Finifter, 1966; Doelling & Johnson, 1989, 1990; Fanshel, 1961, 1966; Fanshel & Shinn, 1978; Green, Braley, & Kisor, 1996; Kufeldt, Armstrong, & Dorosh, 1995; Le Prohn, 1993, 1994; Pecora, Le Prohn, & Nasuti, 1999; Ray & Horner, 1990; Rowe, 1976; Seaberg & Harrigan, 1997). To this end, it is appropriate to discuss how well the operationalization of *best* and *worst* translated from theoretical practice experience to empirical knowledge.

The theoretical *best-worst* distinction was empirically supported because *best* applicants were more likely to be licensed and have one or more children placed in their homes compared to *worst* applicants. These results empirically validated that *best* applicants had relatively greater potential to provide successful foster care compared to *worst* applicants as indicated by the agency's decisions to license and place children with these applicants. However, as previously mentioned, there is no *gold standard* for determining the potential of a foster family to provide quality foster care. Thus, it is difficult to say the extent to which *best* applicants could ameliorate the behavioral problems of foster children, for example, compared to *worst* applicants. Nevertheless,

this *best-worst* distinction provided the necessary basis with which to examine the validity of the CFAI-W.

In addition, *best* applicants were more likely to be married and have birth or adopted children in their homes at the time they applied to foster compared to *worst* families. This comparison further suggests that the *best-worst* distinction is valid in that applicants who are married and have birth or adopted children in their homes have demonstrated some basic level of competency with regard to the familial and personal characteristics necessary for being in a relationship and raising children. However, these results should not be interpreted that applicants who are single and do not have birth or adopted children in their homes at the time they apply to foster cannot provide successful foster care. Rather, these results might suggest that workers consider applicants who are married or otherwise partnered as having a greater number of strengths and resources (e.g., two parents who can share parenting responsibilities, one parent who is available to stay home to care for foster children) compared to single applicants.

In addition, these results have empirical support because there is evidence that children of two-parent homes have better child welfare outcomes compared to children of single-parent homes (Conger, Conger, & Elder, 1997; Hanson, McLanahan, & Thompson, 1997; Lipman & Offord, 1997). However, given the changing demographics of families providing foster care (i.e., the increasing number of single-parent families who provide kinship family foster care) (Cuddeback, in press, GAO, 1999) coupled with a nationwide shortage of foster homes (Casey Family Programs, 2000; DHHS, 1993; GAO, 1995; Pasztor & Wynne, 1995), foster care workers and agencies cannot afford to exclude otherwise capable single-parent applicants who want to foster. Consequently,

workers and agencies must identify ways in which the skills, abilities, and characteristics needed to provide successful foster care can be nurtured among single-applicant families, and having a standardized assessment tool designed to assess those skills, abilities, and characteristics, such as the CFAI-W, is the first step in this process.

Similarly, applicants who have birth or adopted children in their homes at the time they apply to foster have the opportunity to demonstrate successful parenting skills to their workers during home visits throughout the licensing process and thus might be seen as having more parenting experience and parenting resources (i.e., homes already fully prepared for children with regard to toys, high chairs, car seats, etc.) compared to applicants without birth or adopted children in their homes. It is unclear whether the applicants who did not have birth or adopted children in their homes at the time of application but had birth or adopted children in their homes previously (i.e., children are grown and have left the house) or if they never had birth or adopted children in their homes at any time, and this is an important distinction that speaks to separate issues.

For those who had birth or adopted children at some point, it could be an issue of workers and agencies helping these applicants “dust off” or update existing parenting skills. For applicants who never had birth or adopted children in their homes, workers and agencies might need to focus training, services, and support more on helping these applicants develop the parenting skills and abilities needed to provide successful foster care. In either case, the CFAI-W can help inform workers and agencies the extent to which training, services, and support should focus on parenting skills. Further research is needed to examine differences in CFAI-W subscale scores among those applicants who at one time had birth or adopted in their homes but don’t at the time they apply to foster and those applicants who never had birth or adopted children in their homes.

These differences do not suggest deficits among single applicants and applicants who do not have birth or adopted children in their homes at the time of application. And, it is important to note that some *best* applicants were single and did not have birth or adopted children in their homes at the time they applied to foster. Moreover, virtually no studies examine the relationship between foster family demographic characteristics and the socioemotional outcomes of foster children (Orme & Buehler, 2001) and this should be done in future research. In this study, results suggest that higher scores on the CFAI-W are associated with being married and having birth or adopted children at the time of application, but more research is needed to understand the relationships of the CFAI-W and familial demographic characteristics to important child socioemotional outcomes.

In summary, the diversity of the sample of workers, agencies, and applicants, and the empirical support that *best* families had relatively greater potential to provide successful foster care compared to *worst* families, provide support that the CFAI-W can be a useful adjunct to practice for foster care workers in diverse types of agencies and with diverse foster families across the country. The factorial structure of the CFAI-W will be addressed next.

Factorial structure of the CFAI-W

The first research question asked how many aspects of fostering the CFAI-W measured. This is important, and again these results were driven by the practice wisdom of the workers in this study, to understand if workers view the potential to provide successful foster care as one global concept (i.e., a general disposition to provide good foster care) or several related but distinct concepts (i.e., capabilities to nurture a child, to deal with birth parents, to work with an agency, etc.).

Through the process of generating items for the CFAI-W, a number of preliminary conceptual domains were identified and these were presented in the literature review and development of the CFAI-W sections. However, the results of the factor analyses with the core CFAI-W items suggested one factor (i.e., General Potential to Foster). And, this factorial structure was the same for female and male applicants. This could suggest that workers see the potential to foster that applicants have in a general (i.e., an applicant that has good potential to provide successful foster care has good potential in all aspects of fostering) rather than specific sense (i.e., an applicant might have good potential to nurture a child but might need additional training in working with birth parents). However, there is little doubt that the skills, abilities, and characteristics needed to provide successful foster care are varied and many. It is important to understand that although a worker may see a particular applicant as having a high degree of general potential to foster, that same applicant may see himself or herself as needing additional support in working with birth parents, for example. And, these different perspectives are not necessarily contradictory.

To this end, a standardized measure such as the CFAI-W can help open dialogue between workers and applicants (e.g., a worker could review the results of the CFAI-W with an applicant). This dialogue could aid workers in helping families develop skills in areas they themselves identify as needing additional support. Given that foster families often quit fostering because of a lack of communication, services, and support from their agencies (Rhodes, Orme, Cox, & Buehler, 2003), an open dialogue could keep foster families happier and could help foster care agencies retain their foster families, and this will most likely result in better outcomes for children in foster care.

Alternatively, these results could be an artifact of the study design such that when workers were selecting *best* and *worst* foster families they blended the best qualities of their *best* families, for example, and visualized *superfamilies* rather than *best* families who were good at many aspects of fostering but needed support in other areas. This is a potential limitation of the study that will be discussed later.

Finally, the results of the factor analyses with the CFAI-W subgroup subscales each suggested that one characteristic was being measured, for both female and male applicants. More is known about the relationship between mothers' functioning and child outcomes in the general population compared to what is known about fathers functioning and children's outcomes (Orme & Buehler, 2001). However, little is known about the relationships of either foster mothers' or fathers' functioning and foster children's outcomes, and what is known mostly comes from information about foster mothers rather than foster fathers (Orme & Buehler, 2001). Thus, it is unclear as to what differences, if any, should be expected between foster mothers and fathers in terms of the characteristics that the CFAI-W measures, particularly if foster mothers and fathers serve different functions for foster children. To this end, further research is needed.

In summary, these results provide another piece of information that suggest that the CFAI-W can be used to assess the strengths and training and service needs of foster family applicants. The internal consistency reliability of the CFAI-W will be discussed next.

Internal consistency reliability of the CFAI-W

To foster care workers and agencies it is important to be able to rule out unreliability among items as the cause for changes in CFAI-W scores over time and to know that all of the items are consistently measuring the potential to provide successful

foster care. The CFAI-W, or more accurately CFAI-W subscale scores, had excellent internal consistency reliability. This was true for each of the three alternative forms of the core subscales and for the subgroup subscales with the exception of the Kinship Care (KC-W) subgroup subscale. The KC-W had just 6 items and this likely contributed to its low reliability. The KC-W requires additional items and further testing with a larger sample of kinship care foster families before being used in practice, and the results of the analyses with the KC-W warrant cautious interpretation.

In summary, these findings provide support that CFAI-W subscale scores can be a reliable tool that workers can use to assess the strengths and service and training needs of foster care applicants. The validity of the CFAI-W will be discussed next.

Validity of the CFAI-W

Another important research question addresses whether the CFAI-W measures the potential for foster family applicants to provide successful foster care and that CFAI-W scores are not unduly influenced by ancillary characteristics such as reading level or race. This is important because workers should see evidence that scores on any standardized measure are related to important family foster care outcomes. Moreover, valid standardized data can enhance existing training protocols for foster family applicants and help focus services and support for applicants after they become licensed foster families.

In response to this research question, the following validity evidence was accumulated. First, all of the items contained in the CFAI-W measure conceptual domains relevant to foster care because the CFAI-W is based on the most current standards of foster care and kinship care, training curricula, and research and measures. These standards and training curricula were developed by experienced organizations

committed to the welfare of foster children (Child Welfare Institute, 1987; CWLA 1975, 1995, 2000; Illinois Department of Children and Family Services, 1993) and are widely used in the training and assessment of foster families and foster family applicants. Moreover, the CFAI-W was reviewed by experienced foster families, workers, and researchers who scrutinized the CFAI-W in the collective context of years of practice and research experience. Thus, given this extensive review process, workers using the CFAI-W can be confident that all aspects of fostering are represented and that applicants are being measured with regard to these aspects.

Second, without exception, *best* applicants had higher CFAI-W subscale scores compared to *worst* applicants. This is important in that “real world” practice wisdom was translated into empirical knowledge and became the foundation for the examination of the validity of the CFAI-W. As a result, the CFAI-W is valid in distinguishing between families that have greater versus lesser potential to provide successful foster. Historically, workers have relied almost exclusively on practice wisdom to make critical decisions about foster family applicants and placements for foster children. Given the limitations of clinical judgment (Dawes, Faust, & Meehl, 1989), the CFAI-W can provide standardized information that can inform these critical decisions.

Third, with the exception of the KC-W, CFAI-W subscale scores predicted licensure status and child placement status even when controlling for race and marital status, and these relationships were not moderated by race. Race was not an indicator of the potential to provide successful foster care in this study in that race had no significant relationship with CFAI-W subscale scores. This is important because foster families of all races are needed because there are foster children of all races in need of care. Thus, it is critical that the CFAI-W perform equally well with all races. To this end, however, the

extent to which the CFAI-W performs with races other than European American and African American is largely unknown due to the small sample of other races in this study, and this should be examined in future research.

Marital status could be considered an indicator of a family resource, so it was important to examine the relationship between CFAI-W subscale scores and licensure and child placement status while controlling for marital status. Marital status did have a significant relationship with licensure status and child placement status when controlling for IFC-W subscale scores. And, there was an interaction effect of IFC-W subscale scores and race for married and single female and family applicants on child placement status. The interaction effect suggests that, for married female applicants, European Americans with higher compared to lower IFC-W subscale scores had higher probabilities of having children placed in their homes compared to African Americans with higher compared to lower IFC-W subscale scores. For single applicants, European Americans with higher compared to lower IFC-W scores had higher probabilities of having children placed in their homes but African Americans with lower compared to higher IFC-W scores had higher probabilities of having children placed in their homes. One explanation for these findings is that single African American applicants who were providing kinship care started the licensing process after already having children placed in their homes, and these particular applicants were rated as not being able to integrate their foster children with other children already in the home as well compared to other applicants. These findings indicate areas for future research.

These results do suggest that marital status is a resource for foster family applicants in terms of integrating foster children with birth or adopted children already in the home at the time of application. Thus, workers should be aware that single

applicants with lower CFAI-W subscale scores might need additional training, services, and support in order to reach their full potential in providing successful foster care.

Although licensure status and child placement status are two important outcomes that foster care workers and agencies are concerned with, the extent to which the CFAI-W measures other important outcomes such as the ability to nurture a child, placement outcomes (i.e., disruption, reunification, adoption, etc.), and intent to continue fostering is unknown, and this has indications for future research. The relationships between the CFAI-W and licensure and child placement status need to be examined when controlling for other familial characteristics such as education and socioeconomic status. Arguably, it is possible to “even the playing field” with regard to education and socioeconomic status, at least to some extent. For example, foster children placed in the homes of foster parents with low educational levels can be provided tutors to help with homework. Separating the affects of demographic characteristics and the personal and familial characteristics associated with successful fostering is important so workers can know what to address in aiding foster family applicants in reaching their fullest potential to provide successful foster care.

Fourth, for all practical purposes, CFAI-W subscale scores did not differ by gender. This is important because single-parent applicants can be female-headed or male-headed households and these results suggest that the CFAI-W works equally well for both. In addition, a worker might be interested in understanding how in a two-parent family applicant, for example, CFAI-W scores differ for wives and husbands. Decisions to license applicants are made about families rather than single individuals (i.e., both members of a two-parent family are licensed). The CFAI-W can help workers identify if a husband, for example, has lower potential to provide successful foster care than a wife,

which might help workers focus training, services, and support on helping that husband reach his fullest potential to provide successful foster care.

Fifth, worker characteristics had no relationship with CFAI-W subscale scores. Thus, the CFAI-W is measuring applicant characteristics and is not unduly influenced by worker characteristics. This further ensures that the CFAI-W is valid for use by all types of foster care workers and agencies with all types of foster family applicants.

Sixth, applicants who planned on providing kinship foster care were rated lower on the CFAI-W compared to applicants who did not plan on providing kinship family foster care. These results should not be interpreted to mean that kinship foster families have less potential to provide successful foster care. Kinship foster care has challenged foster care practice, policy, and research for the last decade or longer (Cuddeback, in press) and it is important to understand how fundamental differences between kinship and non-kinship care might affect the interpretation of the results in this study. For example, kinship foster parents become foster parents to care for relative children who have entered the foster care system and this is different from the reasons non-kinship foster parents become foster parents (Cuddeback et al., 2003). Thus, because of a sense of obligation, kinship foster parents may respond differently to workers, agencies, and the licensing process.

Moreover, applicants in this study who were planning on providing kinship foster care were less well known by their workers compared to applicants who were not planning on providing kinship foster care. Workers may have seen the kinship applicants in this study as resistant to the licensing process and to allowing themselves to be as well known, and these factors may have affected the CFAI-W scores these kinship families received.

Kinship foster families face some of the same challenges faced by families who provide traditional foster care but also face additional and unique challenges (i.e., more complex dynamics with birth families). There is evidence that kinship foster families are more often single, of lower socioeconomic status, and have lower education levels compared to traditional foster families (Berrick, 1998; Brooks & Barth, 1998; Gaudin & Sutphen, 1993; Gebel, 1996; Le Prohn, 1994). Also, there is strong evidence that kinship families do not receive the same level of training, services, and support compared to traditional foster families (Berrick et al., 1994; Brooks & Barth, 1998; Franck, 2001; GAO, 1995; Gebel, 1996; Lewis & Fraser, 1987). Thus, the extent to which the kinship families' CFAI-W scores can be separated from these characteristics is unknown.

In addition, there is some debate in the literature as to whether kinship foster family applicants who may be less qualified to provide successful foster care should be accepted as foster parents (see Hegar & Scannapeico, 1999). Children in kinship foster care often benefit from a greater sense of familial belonging (Hegar, 1999), among other things, but it is unclear if the advantages of kinship care outweigh some of the potential disadvantages (i.e., consequences of being in a family of lower socioeconomic status and educational level). How these issues may have affected workers' ratings of the applicants who planned on providing kinship foster care at the time of application is unknown. These issues warrant further investigation.

In summary, in light of the collective evidence and support above, the CFAI-W can be used to assess strengths and training and service needs among foster family applicants. As previously stated, workers were given the opportunity to make comments about the CFAI-W. Workers were given the freedom to comment on any aspect of the CFAI-W or to make no comments at all. These comments will be discussed next.

Workers' comments about the CFAI-W

Workers were given the opportunity to provide feedback about the CFAI-W. Knowing workers' opinions about how the CFAI-W was useful was important in order to better understand how workers would apply the CFAI-W in practice. For example, if the items lacked "face validity" or if the measure was too long, workers might not use the CFAI-W.

Workers had many positive things to say about the CFAI-W. For example, workers suggested that the CFAI-W was comprehensive in that it thoroughly covered all of the important concepts related to providing successful foster care. Moreover, workers suggested that CFAI-W was useful in helping them focus their thoughts about applicants and think more carefully about applicants' strengths and needs. In addition, workers suggested that the CFAI-W could be useful for re-licensing foster families annually. This feedback is critical because workers might not use the CFAI-W, irrespective of its good psychometric properties, if it's difficult or burdensome to use. Most workers had positive things to say about the CFAI-W.

In addition, workers had negative things to say about the CFAI-W but these comments were mostly directed at the design of the study and not the CFAI-W itself. For example, workers expressed difficulty at having to ignore what they knew about their *best* and *worst* families after these families were licensed and to only consider information about these families before they became licensed. Other workers suggested that an "I don't know" category be added to the item responses on the CFAI-W. The most frequent comment was that the CFAI-W was too long. This implication of this latter comment is that workers became fatigued while completing the CFAI-W and were less careful in answering later versus earlier questions. Although the extent to which fatigue

may have affected results cannot be known, the order in which workers answered questions about their *best* and *worst* families were counterbalanced, which may have minimized the potential differential effect on applicants rated *best* vs. *worst*. Shorter alternative forms of the GP-W were created to address this issue. This issue does have implications for future research, however, because the psychometric properties of these new forms need to be examined.

In summary, based upon the feedback discussed above, workers would most likely use the CFAI-W especially given the fact that it has been shortened considerably. Workers would use it for a variety of purposes (i.e., re-licensing, training, assessing applicants).

Limitations

Study design. The design of this study has potential limitations. Workers were asked to visualize families that they considered *best* and *worst* and to think about these families as they were during the licensing process. Thus, recall bias may have affected CFAI-W subscale scores in unknown ways and it might have been difficult for workers to remember specific details about these applicants. Conversely, recall bias may have affected CFAI-W subscale scores in known ways such that workers' knowledge of the quality of foster care provided by their *best* and *worst* applicants influenced their responses to CFAI-W items. For example, in answering questions about their *best* families, workers may have decided that these families were exemplary in every aspect of fostering even when specific details about these families couldn't be recalled. Similarly, *worst* families may have been remembered as having no redeeming qualities toward providing successful foster care. More accurately, *best* families have some deficits and *worst* families have some strengths. As stated earlier, recall bias might

explain why the results from the factor analyses of the CFAI-W suggested one factor and could explain the high internal consistency reliability of the alternate forms of the GP-W.

Moreover, *best* and *worst* were relative, not absolute, terms. The applicants in this sample completed at least three-fourths of the licensing process. *Worst* applicants, in an absolute sense, would be excluded from the sample because these applicants most likely would have dropped out earlier in the licensing process. To this end, although the CFAI-W distinguished between applicants who were licensed and those who were not licensed, among applicants who weren't licensed it is unclear what proportion was rejected by an agency versus those who dropped out of the licensing process. This is an important distinction in general but not necessarily for the purposes of this research. The sample, and the methodology used in this study, did not allow for an examination of the extent to which the CFAI-W distinguishes between applicants who were rejected versus those who dropped out of the licensing process. It's possible that agencies can determine the reasons that applicants with higher CFAI-W scores, for example, are dropping out of the licensing process (i.e., the training is too long, workers aren't engaging applicants in the licensing process as they should, etc.), and work to correct these identified problems. This should be examined in future research.

Lastly, the sample of workers was restricted to those workers who had at least a year's experience in licensing foster family applicants. This was done to ensure that the workers participating in the study had a sufficient number of applicants from whom to select their *best* and *worst* families. Workers with less than a year's experience might not have licensed or worked with enough applicants to be able to identify a *best* and *worst* family. However, because of this restriction, it is unclear how well CFAI-W subscale scores would predict licensure status or child placement status if completed by workers

who had less than a year's experience in licensing foster family applicants. Many states have difficulty retaining caseworkers (GAO, 1995), which means many inexperienced workers are responsible for licensing foster family applicants and placing children with those applicants. To this end, the CFAI-W can introduce standardization and accountability to the licensing process but it is important for less experienced workers to use the CFAI-W as one of many components in an assessment protocol and to rely on supervision and more veteran colleagues for help.

Sample. The sample in this study has potential limitations. First, because a probability sample of all foster care workers across the country could not be obtained the generalizability of these results is unknown. Workers who specialize in adoptions were not included in this sample. Adoptive families may not need all of the same skills and abilities that foster families may need. For example, an adoptive family may not be expected to work with the birth family of a foster child that was to be adopted. Consequently, the extent to which these results can be generalized to foster care workers and agencies that specialize in adoptions is unknown, and this should be examined in future research.

Second, the information available about the applicants in the sample is limited. For example, the extent to which other factors such as socioeconomic status, education, and parenting experience are related to *best-worst* status and CFAI-W subscale scores is unknown. Thus, the amount of variance in CFAI-W subscale scores explained by the potential to provide successful foster care cannot be partitioned from the amount of variance in CFAI-W subscale scores explained by socioeconomic status, education, or previous parenting experience. The relationships of foster families' socioeconomic status and education levels to outcomes for children in foster care have not been examined to

date (Orme & Buehler, 2001). In the general population, higher socioeconomic status is associated with better child outcomes (Hanson et al., 1997) and it is not unreasonable to expect the same for foster families and outcomes for foster children. Moreover, providing foster care is expensive and because not all expenses are covered by public or private foster care agencies, foster families often must pay for things out-of-pocket (Buehler et al., 2003). This is particularly important for kinship foster families because there is evidence that kinship foster families are more often of lower socioeconomic status and have lower education levels compared to non-kinship foster families (Berrick, 1998; Brooks & Barth, 1998; Gaudin & Sutphen, 1993; Gebel, 1996; Le Prohn, 1994). For future research it is important to understand how CFAI-W subscale scores are influenced by socioeconomic status and education and to better understand the effects of socioeconomic status and education on outcomes for foster children.

Selection bias. Sample selection bias could have influenced the results of this study. Sample selection bias could have been introduced in several stages of the sampling process. First, not all of the foster care agencies in the country participated in the study. It could be that the better agencies that were more invested in improving their abilities to assess and license foster family applicants participated in this study. Or, it could be that agencies with higher caseloads and greater worker shortages did not participate in this study. Likewise, not all of the workers from the participating agencies volunteered to participate in the study. It could be that only those workers who were interested in research or interested in improving their agencies' licensing process participated in this study. These issues might have introduced bias such that only highly motivated workers participated and these results might not be generalizable to less motivated workers or workers not involved in making decisions about the licensing

processes for their agencies. The extent to which this is true cannot be known, however, if more motivated workers participated in this study it is reasonable to assume that the quality of the data collected is higher than if less motivated workers had participated in the study. In this manner selection bias may have served a useful function because norms on the CFAI-W subscales may provide better information based on more insightful evaluations from more motivated workers. However, there is a risk that more motivated agencies and workers are rare in the real world and the norms mentioned above might be too high or unrealistic in some manner.

The response rate in this study was approximately 82%. No data were collected on the workers, or applicants for that matter, representing the 18% who agreed to participate in the study but failed to return completed CFAI-W questionnaires. However, these non-participants are, for all practical purposes, evenly distributed among public and private agencies from several states. In addition, to the extent that it was possible, data on the workers from participating agencies who did not volunteer for the study were being collected. However, this effort ended shortly because it proved too difficult and the data it generated were too inaccurate to continue.

Implications for social work practice

The CFAI-W, in combination with professional judgment and other assessment methods, can be used to assess the strengths and training and service needs of foster family applicants. Despite the limitations noted above, scores on the CFAI-W are valid toward their intended interpretation and use and the contribution of this study to the foster care knowledge base is important. As stated earlier, limited research exists concerning the reliability and validity of standardized assessment tools designed to assess the potential to provide successful foster care among foster family applicants and

given the many vulnerable children placed in foster family care each year the need that the CFAI-W addresses cannot be understated. Many children come into foster care with severe behavioral and emotional problems (Brown & Calder, 1999; Campbell, Simon, Weithorn, Krikston, & Connolly, 1980; Denby, Rindfleisch, & Bean, 1999; Nissim, 1996; Stone & Stone, 1983; Triseliotis, Borland, & Hill, 1998) and are at an increased risk for developing severe behavioral and emotional problems (Fanshel, Finch, & Grundy, 1990; Fanshel & Shinn, 1978; Pardeck, 1984; Rowe, Cain, Hundleby, & Keane, 1984). In many cases society has failed to protect these children from the abuse and neglect that has robbed them of the safe and nurturing homes they deserve. Foster families provide the day-to-day care for these children and are our nation's best hope of ameliorating the problems of these children. It is our national responsibility to ensure that these families are of the highest quality and have the training, services, and support they need to provide successful foster care. Therefore, this research has implications for foster care workers, administrators, policy makers, and researchers and these implications are discussed below.

Foster care workers. The CFAI-W introduces standardization and accountability to the licensing process and requires very little training to use. This is particularly important given the fact that the turnover rate among foster care workers is high (GAO, 1995) and less experienced workers are often asked to make critical decisions about foster family applicants and foster children. Moreover, given the limited amount of time and resources typically available to workers to assess foster family applicants (GAO, 1995), and the comprehensiveness with which applicants should be assessed, psychometrically sound standardized measures provide an especially efficient assessment method. The CFAI-W

can enhance the critical, but often ambiguous and difficult decisions made by workers who have varying amounts and types of experience and education.

In addition, foster care workers can use the CFAI-W for training purposes (e.g., more inexperienced workers may benefit from comparing their ratings of applicants to the ratings given to the same applicants by more veteran workers) and at annual re-evaluations of licensed foster families (e.g., assessing whether a family has improved in an area of need identified by an initial assessment).

Foster care administrators and agencies. Foster care administrators can use the CFAI-W to help shape training modules, examine the relationship between the provision of training and services to foster family retention, and evaluate workers' abilities with regard to the provision of training, services, and support to foster families. Using the CFAI-W can save money and professional time, relative to subjective evaluations, especially when standardized measures like the CFAI-W require relatively little training or effort to employ (AERA, APA, NCME, 1999; Bloom, Fischer, & Orme, 2003; Nunnally & Bernstein, 1994). The CFAI-W can assess the potential of foster families to provide successful family foster care and can be used to better understand the relationship between the potential to provide successful family foster care and important outcomes for foster children such as safety, well-being, permanence, and children's relationships with their families-of-origin. Finally, the CFAI-W can be used to better understand the relationship between the potential to provide successful family foster care and important outcomes such as retention and foster family well-being.

Foster care policy. The rush to implement empirically-based practices has had little impact in the foster care arena to date. This is remarkable because children in foster care are some of the most vulnerable children in need of empirically-based mental

health services and treatment (Brown & Calder, 1999; Campbell et al., 1980; Denby, Rindfleisch, & Bean, 1999; Nissim, 1996; Stone & Stone, 1983; Triseliotis et al., 1998). Adopting standardized methods of assessing foster family applicants is an important first step in providing empirically-based foster care services. The CFAI-W could easily be adopted by state foster care agencies to enhance practice wisdom and clinical judgment and help standardize the way foster family applicants are licensed, trained, served, supported, and re-licensed at local, state, and federal levels.

Directions for future research

Additional research is needed to test the psychometric properties of the CFAI-W and this should be done in real time with applicants as they apply to become foster parents. Prospective testing of the CFAI-W could reveal a different factor structure (i.e., the CFAI-W measures distinct characteristics of fostering rather than just one). So, with increased sensitivity (i.e., the CFAI-W measure several distinct aspects of fostering), the CFAI-W could help workers focus training and services on an applicant's specific needs, for example.

Moreover, the extent to which the CFAI-W predicts other important foster care outcomes should be examined. For example, the relationship between CFAI-W scores and child outcomes such as behavioral and emotional problems (as measured by scores on standardized measures), educational outcomes, independent living outcomes, and adult functioning should be examined. And, the relationship between CFAI-W scores and foster family outcomes such as satisfaction with the agency, satisfaction with training and support, and intent to continue fostering (applicable to practicing foster families) should be examined. Finally, the relationship between CFAI-W scores and foster family retention is an important outcome that warrants further research.

REFERENCES

REFERENCES

American Educational Research Association, American Psychological Association, & National Council on Measurement in Education (1999). *Standards for educational and psychological testing* (2nd ed.). Washington, DC: American Educational Research Association.

Baring-Gould, M., Essick, D., Kleinkauf, C., & Miller, M. (1983). Why do foster homes close? *Arete, 8*(2), 49-63.

Berrick, J. D. (1998). When children cannot remain home: Foster family care and kinship care. *The Future of Children, 8*(1), 72-87.

Berrick, J. D., Barth, R. P., & Needell, B. (1994). A comparison of kinship foster homes and foster family homes: Implication for kinship foster care as family preservation. *Children and Youth Services Review, 16*(1), 33-63.

Bloom, M., Fischer, J., & Orme, J. G. (2003). *Evaluating practice: Guidelines for the accountable professional* (4th ed.). Boston: Allyn & Bacon.

Blumberg, E., Landsverk, J., Ellis-MacLeod, E., Ganger, W., & Culver, S. (1996). Use of the public mental health system by children in foster care: Client characteristics and service use patterns. *The Journal of Mental Health Administration, 23*(4), 389-405.

Bollen, K. A. (1989). *Structural equations with latent variables.* John Wiley: New York.

Bradley, R. H., Corwyn, R. F., Whiteside-Mansell, L., Caldwell, B. M., Wasserman, G. A., Walker, T. B., & Mink, I. T. (1998). Measuring the home environment of children in early adolescence. *Journal of Research of Adolescence, 10*, 247-288.

Brooks, D., & Barth, R. P. (1998). Characteristics and outcomes of drug-exposed and non drug-exposed children in kinship and non-relative foster care. *Children and Youth Services Review, 20*(6), 475-501.

Brown, J., & Calder, P. (1999). Concept-mapping the challenges faced by foster parents. *Children and Youth Services Review, 21*(6), 481-495.

Buehler, C., Anthony, C., Krishnakumar, A., Stone, G., Gerard, J., & Pemberton, S. (1997). Interparental conflict and youth problem behaviors: A meta-analysis. *Journal of Child and Family Studies, 6,* 233-247.

Buehler, C., Cox, M.E., & Cuddeback, G. (2003). Foster parent's perceptions of factors that promote or inhibit successful fostering. *Qualitative Social Work*, *2*(1), 61-83.

Buehler, C, Rhodes, K. W., Orme, J.G., & Cuddeback, G. S. (2003). *The potential for successful family foster care: Conceptualizing competency domains*. Manuscript submitted for publication.

Burns, B., Costello, J., Angold, A., Tweed, D., Stangl, D., Farmer, E., & Erkanli, A. (1995). Data watch: Children's mental health service use across service sectors. *Health Affairs, 14*(3), 148-159.

Campbell, C., & Downs, S. W. (1987). The impact of economic incentives on foster parents. *Social Service Review, 61*(4), 599-609.

Campbell, S. B., Simon, R., Weithorn, L., Krikston, D., & Connolly, K. (1980). Successful foster homes need parent-child match. *Journal of Social Welfare, 6,* 49-60.

Casey Family Program. (2000). *Lighting the way: Attracting and supporting foster families.* Seattle, WA: Author.

Cautley, P. W. (1980). *New foster parents: The first experience*. New York: Human Science Press.

Cautley, P. W., & Aldridge, M. J. (1975). Predicting success for new foster parents. *Social Work, 4*(2), 48-53.

Cautley, P. W., Aldridge, M. J., & Finifter, B. (1966). *Successful foster homes: An exploratory study of their characteristics*. Madison, WI: Wisconsin Department of Public Welfare.

Chamberlain, P., Moreland, S., & Reid, K. (1992). Enhanced services and stipends for foster parents: Effects on retention rates and outcomes for children. *Child Welfare, 71*(5), 387-401.

Child Welfare Institute. (1987). *MAPP: Model Approach to Partnerships in Parenting.* Child Welfare Institute, Center for Foster and Residential Care. Atlanta, GA.

Child Welfare League of America. (2000). *Standards of excellence for kinship care services.* Washington, DC: Child Welfare League of America.

Child Welfare League of America. (1995). *Standards of excellence for family foster care services* (Revised ed.). Washington, DC: Child Welfare League of America.

Child Welfare League of America. (1975). *CWLA standards of excellence for family foster care services*. Washington, DC: Author.

Combs-Orme, T. D., Orme, J. G., & Guidry, C. (1991). Reliability and validity of the Protective Services Questionnaire (PSQ). *Journal of Social Service Research, 14*, 1-20.

Conger, R. D., Conger, K. J., & Elder, G. (1997). Family economic hardship and adolescent academic performance: Medicating and moderating process. In G. J. Duncan & J. Brooks-Gunn (Eds.), *Consequences of Growing Up Poor* (pp. 288-310). New York: Russell Sage Foundation.

Corser, A. S., & Furnell, J. R. G. (1992). What do foster parents think of the natural

parents? A comparative study. *Child: Care, Health, and Development, 18*, 67-80.

Cox, M. E., Orme, J. G., & Rhodes, K. W. (2003) Willingness to foster children with emotional or behavioral problems. *Journal of Social Service Research,29*(4), 23-51.

Cox, M. E., Buehler, C., & Orme, J. G. (2002) Recruitment and foster family service. *Journal of Sociology and Social Welfare, 29*, 151-177.

Cox, M. E. (2000). *Characteristics of foster family applicants willing to accept hard to place foster children.* Unpublished doctoral dissertation, University of Tennessee, Knoxville, TN.

Cox, M. J., & Cox, R. D. (1985). The foster care system: An Introduction. *Foster care: Current issues, policies, and practices*. Norwood, NJ: Ablex.

Croft, M. (1999). *Substitute care in Tennessee: A study of placement and stability*. Unpublished doctoral dissertation, University of Tennessee.

Cuddeback, G. S. (in press). Kinship family foster care: A methodological and substantive synthesis of research. *Children and Youth Services Review*.

Cuddeback, G. S., Coakley, T., Buehler, C., & Cox, M.E. *Kinship foster parents' perceptions of familial and parental factors that promote and inhibit successful fostering*. Unpublished manuscript, University of Tennessee.

Cuddeback, G. S., & Orme, J. G. (2002). Training and services for kinship and non-kinship foster families. *Child Welfare, 71*(6), 879-909.

Dando, I., & Minty, B. (1987). What makes good foster parents? *British Journal of Social Work, 17*, 383-400.

Dawes, R. M., Faust, D., & Meehl, P. E. (1989). Clinical versus actuarial judgment. *Science, 243*, 1668-1674.

Denby, R., & Rindfleisch, N. (1996). African Americans' foster parenting experiences: Research findings and implications for policy and practice. *Children and Youth Services Review, 18*(6), 523-551.

Denby, R., Rindfleisch, N., & Bean, G. (1999). Predictors of foster parents' satisfaction and intent to continue to foster. *Child Abuse & Neglect, 23*(3), 287-303.

Department of Health and Human Services (2003) 'Adoption and Foster Care Analysis and Reporting System (AFCARS)', Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau, http://www.acf.hhs.gov/programs/cb/publications/afcars/report8.htm

Department of Health and Human Services (2002) 'Adoption and Foster Care Analysis and Reporting System (AFCARS)', Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau, http://www.acf.hhs.gov/programs/cb/publications/afcars/report7.pdf

Department of Health and Human Services. (1997). Children's Bureau *National study of protective, preventive and reunification services delivered to children and their families*. Washington, DC: U.S. Government Printing Office.

Department of Health and Human Services. (1995). National Center on Child Abuse and Neglect *Child maltreatment in 1993: Reports from the states to the National Center on Child Abuse and Neglect*. Washington, DC: U.S. Government Printing Office.

Department of Health and Human Services. (1993). Administration for Children and Families, Administration on Children, Youth and Families *The National Survey of Current and Former Foster Parents*. Rockville, MD: Author.

DeVellis, R. F. (1991). *Scale development: Theory and applications*. Newbury Park, CA: Sage.

Doelling, J. L., & Johnson, J. H. (1989). Foster Placement Evaluation Scale: Preliminary findings. *Social Casework, 70*(2), 96-100.

Downey, G., & Coyne, J. C. (1990). Children of depressed parents: An integrative review. *Psychological Bulletin, 108*, 50-76.

Downs, S. W. (1986). Black foster parents and agencies: Results of an eight state survey. *Children and Youth Services Review, 8*, 201-218.

Ehrle, J., Geen, R., & Main, R. (2003). Kinship foster care: Custody, hardships, and services. *Snapshots of America's Families III, No. 14*.

Erera, P. I. (1997). Foster parents' attitudes toward birth parents and caseworkers: Implications for visitations. *Families in Society*, 511-519.

Erkut, S. (1991). *Professionalization of foster parenting*. Wellesley, MA: Center for Research on Women.

Fabrigar, L. R., Wegener, D. T., MacCallum, R. C., & Strahan, E. J. (1999). Evaluating the use of exploratory factor analysis in psychological research. *Psychological Methods, 4*(3), 272-299.

Fanshel, D., Finch, S. J., & Grundy, J. F. (1990). *Foster children in a life course perspective*. New York, NY: Columbia University Press.

Fanshel, D., & Shinn, E. B. (1978). *Children in foster care: A longitudinal investigation.* New York, NY: Columbia University Press.

Fanshel, D. (1966). *Foster Parenthood: A Role Analysis*. Minneapolis, MN: University of Minnesota Press.

Fanshel, D. (1961). Studying the role performance of foster parents. *Social Work, 6*, 74-81.

Faver, C. A., Crawford, S. L., & Combs-Orme, T. (1999). Services for child maltreatment: Challenges for research and practice. *Children and Youth Services Review, 21*(2), 89-109.

Fish, S. (1984). Social work practice and foster care: Pre-placement activities. In F. Maidman (Ed.), *Child welfare: A sourcebook of knowledge and practice* (pp. 213-233).

Franck, K. (2001). *The characteristics of kinship and nonkinship care children and their families of origin*. Unpublished master's thesis, University of Tennessee, Knoxville, TN.

Gaudin, Jr. J. M., & Sutphen, R. (1993). Foster care vs. extended family care for children of incarcerated mothers. *Journal of Offender Rehabilitation, 19*(3/4), 129-147.

Gebel, T. J. (1996). Kinship care and non-relative family foster care: A comparison of caregiver attributes and attitudes. *Child Welfare, 75*(1), 5-18.

General Accounting Office. (1999). *Foster care: Kinship care quality and permanency issues*. Washington, DC: U.S. General Accounting Office.

General Accounting Office. (1995). *Child welfare: Complex needs strain capacity to provide services*. Washington, DC: U.S. General Accounting Office.

General Accounting Office. (1993). *Foster care: Federal policy on title IV-E share of training costs*. Washington, DC: U.S. General Accounting Office.

Glass, G. V., & Stanley, J. C. (1970). *Statistical methods in education and psychology*. Englewood Cliffs, NJ: Prentice-Hall.

Glisson, C., Bailey, J. W., & Post, J. A. (2000). Predicting the time children spend in state custody. *Social Service Review, 74*(2), 253-280.

Glisson, C. (1996). Judicial and service decisions for children entering state custody: The limited role of mental health. *Social Service Review, 70*(2), 257-281.

Gorsuch, R. L. (1983). *Factor analysis* (2nd ed.). Hillsdale, NJ: Lawrence Erlbaum.

Green, R. G., Braley, D., & Kisor, A. (1996). Matching adolescents with foster mothers and fathers: An evaluation of the role of temperament. *Journal of Child and Family Studies, 5*(3), 267-283.

Gregory, R. J. (2000). *Psychological testing* (3rd ed.). Needham Heights, MA: Allyn & Bacon.

Hanson, T. L., McLanahan, S., & Thomson, E. (1997). Economic resources, parental practices, and children's well-being. In G. J. Duncan & J. Brooks-Gunn (Eds.), *Consequences of Growing Up Poor* (pp. 190-238). New York: Russell Sage Foundation.

Heflinger, C. A., Simpkins, C. G., & Combs-Orme, T. (2000). Using the CBCL to determine the clinical status of children in state custody. *Children and Youth Services Review, 22*(1), 55-73.

Hegar, R. L. (1999). The cultural roots of kinship care. In R. L. Hegar & M. Scannapeico (Eds.) *Kinship foster care: Policy, practice, and research*. New York: Oxford University Press.

Hegar, R. L. & Scannapeico, M. (Eds.) (1999). *Kinship foster care: Policy, practice, and research*. New York: Oxford University Press.

Hennekens, C. H., Buring, J. E., & Mayrent, S. L. (1987). *Epidemiology in Medicine*. Boston, MA, Little, Brown.

Kadushin, A., & Martin, J. A. (1988). *Child welfare services* (4th ed.). Upper Saddle River, NJ: Prentice-Hall.

Kufeldt, K., Armstrong, J., & Dorosh, M. (1995). How children in care view their own and their foster families: A research study. *Child Welfare, 74*(3), 695-715.

Illinois Department of Children and Family Services. (1993). *PRIDE: Parent resources for information, development, and education.* Washington, DC: Child Welfare League of America.

Jordan, A., & Rodway, M. R. (1984). Correlates of effective foster parenting. *Social Work Research & Abstracts, 20*(2), 27-31.

Kraus, J. (1971). Predicting success of foster placements for school-age children. *Social Work, 16*(1), 63-72.

Le Prohn, N. S. (1994). The role of the kinship foster parent: A comparison of the role conceptions of relative and non-relative foster parents. *Children and Youth Services Review, 16*(1/2), 65-84.

Le Prohn, N. S. (1993). *Relative foster parents: Role perceptions, motivation and agency satisfaction.* Unpublished doctoral dissertation, University of Washington.

Levant, R. F., & Geer, M. F. (1981). A systematic skills approach to the selection and training of foster parents as mental health paraprofessionals: Project overview and selection component. *Journal of Community Psychology, 9*(3), 224-230.

Lewis, R. E., & Fraser, M. (1987). Blending informal and formal helping networks in foster care. *Children and Youth Services Review, 9*, 153-169.

Lipman, E. L., & Offord, D. R. (1997). Psychological morbidity among poor children in Ontario. In G. J. Duncan & J. Brooks-Gunn (Eds.), *Consequences of Growing Up Poor* (pp. 190-238). New York: Russell Sage Foundation.

Loehlin, J. C. (1998). *Latent variable models: An introduction to factor, path, and structural analysis* (3rd ed.). Mahwah, NJ: Lawrence Erlbaum.

Martin, E. D., Altemeier, W. A., Hickson, G. B., Davis, A., & Glascoe, F. P. (1992). Improving resources for foster care. *Clinical Pediatrics, 31*(7), 400-404.

McFadden, E. J. (1996). Family-centered practice with foster-parent families. *Families in Society, 77*(9), 545-556.

McSurdy, M., & Rubenstein, H. Foster youths, families, and workers: What do we know from them? Presented at the Society for Social Work and Research Meeting, Austin, TX, 1999.

Mietus, K. J., & Fimmen, M. D. (1987). Role ambiguity among foster parents: Semi-professionals in professionalizing organizations. *Journal of Sociology and Social Welfare, 14*(1), 33-41.

Molin, R. (1988). Treatment of children in foster care: Issues of collaboration. *Child Abuse & Neglect, 12*, 241-250.

National Commission on Family Foster Care (NCFFC). (1991). *A blueprint for fostering infants, children, and youths in the 1990s.* Washington, DC: Child Welfare League of America.

Nissim, R. (1996). What makes for successful fostering? Using repertory grids to answer this question. *Journal of Educational and Child Psychology, 13*(4), 36-43.

Norusis, M. J. (2002). SPSS 11.0: Guide to data analysis. Upper Saddle River, NJ: Prentice Hall.

Nugent, W. R., & Glisson, C. (1999). Reactivity and responsiveness in children's service systems. *Journal of Social Service Research, 25*(3), 41-60.

Nunnally, J. C., & Bernstein, I. H. (2001). *Psychometric theory* (4th ed.). New York: McGraw-Hill.

Nunnally, J. C., & Bernstein, I. H. (1994). *Psychometric theory* (3rd ed.). New York:

McGraw-Hill.

Orme, J. G., & Buehler, C. (2001). Foster family characteristics and behavioral and emotional problems of foster children: A narrative review. *Family Relations, 50*(1), 3-15.

Orme, J. G., Buehler, C., McSurdy, M., Rhodes, K. W., & Cox, M. E. (2003). The Foster Parent Potential Scale. *Research on Social Work Practice, 13*(2), 181-207.

Orme, J. G., Buehler, C., McSurdy, M., Rhodes, K. W., Cox, M. E., & Patterson, D. (2003). Parental and familial characteristics of family foster care applicants. *Children and Youth Services Review, 25(3), 225-254.*

Orme, J. G., Buehler, C., Rhodes, K.W., Cox, M. E., McSurdy, M., & Cuddeback, G. (in press). Parental and familial characteristics used in the selection of family foster care applicants. *Children and Youth Services Review*.

Pardeck, J. T. (1984). Multiple placement of children in foster family care: An empirical analysis. *Social Work, 29*(6), 506-509.

Pasztor, E. M. (1985). Permanency planning and foster parenting: Implications for recruitment, selection, training, and retention. *Children and Youth Services Review, 7*, 191-205.

Pasztor, E. M., & Wynne, S. F. (1995). *Foster parent retention and recruitment: The state of the art in practice and policy.* Washington, DC: Child Welfare League of America.

Pecora, P. J., Whittaker, J. K., Maluccio, A. N., Barth, R. P., & Plotnick, R. D. (2000). *The child welfare challenge: Policy, practice, and research* (2nd ed.). New York: Aldine DeGruyter.

Pecora, P. J., Le Prohn, N. S., & Nasuti, J. J. (1999). Role perceptions of kinship and other foster parents in family foster care. In R. Hegar, & M. Scannapieco (eds.), *Kinship foster care: Policy, practice, and research* (pp. 155-178). New York: Oxford University Press.

Pilowsky, D. (1995). Psychopathology among children placed in family foster care. *Psychiatric Services, 46*(9), 906-910.

Proch, K. (1982). Differences between foster care and adoption: Perceptions of adopted foster children and adoptive foster parents. *Child Welfare, 61*, 259-268.

Ray, J., & Horner, W. C. (1990). Correlates of effective therapeutic foster parenting. *Residential Treatment for Children & Youth, 7(*4), 57-69.

Rhodes, K. W., Orme, J. G., Cox, M. E., & Buehler, C. (2003) Foster family resources, psychosocial functioning, and retention. *Social Work Research, 27*, 135-150.

Rhodes, K. W., Orme, J. G., & McSurdy, M. (2003). Foster parents' role performance responsibilities: Perceptions of foster mothers, fathers, and workers. *Children and Youth Services Review, 25,* 935-964.

Rhodes, K. W. (1998). *Predicting risk for early exit from foster care for newly approved foster parents.* Unpublished doctoral dissertation, University of Tennessee, Knoxville, TN.

Risley-Curtiss, C., Combs-Orme, T., Chernoff, R., & Heisler, A. (1996). Health care utilization by children entering foster care. *Research on Social Work Practice, 6*(4), 442-461.

Robinson, J. (1991). Beyond the frontiers of fostering--the employment of a 'professional career'. *Adoption and Fostering, 15*(1), 47-49.

Rodwell, M. K., & Biggerstaff, M. A. (1995). Strategies for recruitment and retention of

foster families. *Children and Youth Services Review, 15*, 403-419.

Rosenfeld, A. A., Pilowsky, D. J., Fine, P., Thorpe, M., Fein, E., Simms, M. D., Halfon, N., Irwin, M., Alfaro, J., Saletsky, R., & Nickman, S. (1997). Foster care: An update. *Journal of the American Academy of Child and Adolescent Psychiatry, 36*(4), 448-457.

Rothbaum, F., & Weisz, J. R. (1994). Parental caregiving and child externalizing behavior in nonclinical samples: A meta-analysis. *Psychological Bulletin, 116*, 55-74.

Rowe, D. C. (1976). Notes on policy and practice: Attitudes, social class, and the quality of foster care. *Social Service Review,* 506-513.

Rowe, J., Cain, H., Hundleby, M., & Keane, A. (1984). The foster families and how the children joined them. In *Long-term foster care* (pp. 57-70). New York: St. Martin's Press.

Rutter, M. (2000). Children in substitute care: Some conceptual considerations and research implications. *Children and Youth Services Review, 22*(9/10), 685-703.

Ryan, P. (1985). Analysis of foster parents who leave fostering. *Impact, 1,* 3.

Seaberg, J. R., & Harrigan, M. P. (1999). Foster families' functioning, experiences and views: Variations by race. *Children and Youth Services Review, 21*(1), 31-55.

Seaberg, J. R., & Harrigan, M. P. (1997). Family functioning in foster care. *Families in Society, 78*(5), 463-470.

Simons, R. L. (1996). *Understanding differences between divorced and intact families: Stress, interaction, and child outcome* . Thousand Oaks, CA: Sage Publications.

Soliday, E. (1998). Services and supports for foster caregivers: Research and Recommendations*. Children's Services: Social Policy, Research, and Practice,*

1(1), 19-38.

Stone, N. M., & Stone, S. F. (1983). The prediction of successful foster placement. *Social Casework, 64*, 11-17.

Teather, E. C., Davidson, S. D., & Pecora, P. J. (1994). *Placement disruption in family foster care*. Seattle, WA: The Casey Family Program.

Touliatos, J., & Lindholm, B. W. (1977). Development of a scale measuring potential for foster parenthood. *Psychological Reports, 40*, 1190.

Touliatos, J., & Lindholm, B. W. (1981). Measurement of potential for foster parenthood. *Journal of Psychology, 109*, 255-263.

Triseliotis, J., Borland, M., & Hill, M. (1998). Foster carers who cease to foster. *Adoption & Fostering, 22*(2), 54-61.

Trupin, E. W., Tarico, V. S., Low, B. P., Jemelka, R., & McClellan, J. (1993). Children on child protective service caseloads: Prevalence and nature of serious emotional disturbance. *Child Abuse and Neglect, 17*, 345-55.

Twigg, R. C. (1994). The unknown soldiers of foster care: Foster care as loss for the foster parents' own children. *Smith College Studies in Social Work, 64*(3), 297-312.

Volard, J. (1983). Recruiting foster parents: Socio-economic characteristics of foster parents of intellectually handicapped and non-intellectually handicapped children in Queensland. *Australian Child and Family Welfare, 8*(2), 3-9.

Walsh, J. A., & Walsh, R. A. (1990). Studies of the maintenance of subsidized foster placements in The Casey Family Program. *Child Welfare, 69*(2), 99-114.

White, M., Albers, E., & Bitonti, C. (1996). Factors in length of foster care: Worker activities and parent-child visitation. *Journal of Sociology and Social Welfare, 23*(2), 75-84.

Wilkes, J. R. (1974). The impact of fostering on the foster family. *Child Welfare, 53*(6), 373-379.

Wolins, M. (1963). *Selecting foster parents: The ideal and the reality*. New York, NY: Columbia University Press.

APPENDICES

APPENDIX A

Tables

Table 1. Foster families' characteristics.

Characteristic	Total Families (*n* = 416) %	Married Families (*n* = 296) %
Married	71.2	100.0
Family type		
Two-Parent	71.2	100.0
Single-Mother	27.2	
Single-Father	1.7	
Number with birth or adopted children	53.1	58.4
Licensed to foster	86.5	88.5
One or more children placed	83.7	86.1
Provided kinship care	11.1	9.5
Well known by worker	76.8	80.0

Note. P*ercentages for family type do not add to 100 due to rounding. For total families data for licensed to foster were missing for two (.5%) families. Data for one or more children placed were missing for four (1.0%) families. Data for well known by worker were missing for two (.5%) families. For married families data for licensed to foster were missing for one (.3%) family. Data for one or more children placed were missing for two (.7%) families. Data for well known by worker missing for one (.3%) family.*

Table 2. Foster parent applicants' characteristics.

Characteristic	Total Families (*n* = 416) Women (*n* = 409) %	Total Families (*n* = 416) Men (*n* = 303) %	Married Families (*n* = 296) Wives %	Married Families (*n* = 296) Husbands %
Marital Status				
Married	72.4	97.7	100	100
Single	27.6	2.3		
Race				
European American	60.3	69.7	69.6	70.6
African American	30.3	20.3	17.4	19.1
Hispanic	2.5	3.0	3.4	3.1
Multiracial	4.9	5.3	6.9	5.4
Other	1.9	1.7	2.7	1.7
Number with birth or adopted children	53.5	57.8	58.4	58.4
Licensed to foster	86.5	88.4	88.5	88.5
One or more children placed	83.5	86.4	86.1	86.1
Provided kinship care	10.8	9.9	9.5	9.5
Well known by their worker	77.1	79.5	80.0	80.0

Note. For all females, data for race were missing for three (.7%) applicants. Data for licensed to foster were missing for two (.5%) applicants. Data for one or more children placed were missing for four (1.0%) applicants, and data for well known by their worker were missing for two (.5%) applicants. For married females, data for race were missing for three (1.0%) applicants. Data for licensed were missing for one (.3%) applicant. Data for one or more children placed were missing for two (.7%) applicants. Data for well known by their worker were missing for one (.3%) applicant. For all males, data for race were missing for three (1.0%) applicants. Data for licensed to foster were missing for one (.3%) applicant. Data for one or more children placed were missing for two (.7%) applicants and data for well known by their worker were missing for one (.3%) applicant. For married males, data for race were missing for three (1.0%) applicants. Data for licensed to foster were missing for one (.3%) applicant. Data for one or more children placed were missing for two (.7%) applicants and data for well known by their worker were missing for one (.3%) applicant.

Table 3. Workers' characteristics.

Characteristic	(*N* = 208) %
Race	
European American	73.9
African American	17.7
Hispanic	0
Multiracial	5.9
Other	2.5
Agency Status	
Public	51.4
Private	48.6
Primary job responsibility	
Foster families only	44.7
Foster children only	1.4
Both foster families and children	53.8
Conduct pre-service training	83.2
Knew their family applicants well	76.8

Note. Data for race were missing for five (2.4%) workers. For participation in pre-service training data were missing for one (.5%) worker. *For knowledge of family applicants, data were missing for two (.5%) workers. No other variable had missing data.*

Table 4. Agencies' characteristics.

	Private (n = 24)			Public (n = 8)		
Characteristic	***M***	***SD***	***Mdn***	***M***	***SD***	***Mdn***
Foster families						
Nonkinship	68.63	97.16	145.00	167.14	99.90	37.00
Kinship	12.13	15.60	21.50	25.10	20.02	6.00
Kinship (Non-licensed)	3.80	2.78	25.00	27.25	20.78	3.00
Foster children						
Nonkinship	97.65	138.01	340.00	374.83	224.60	38.50
Kinship	17.60	15.42	45.00	60.21	77.33	15.00
Training (hours)						
Nonkinship	30.80	12.45	30.00	28.50	4.5	30.00
Kinship	23.94	7.48	30.00	24.73	7.74	25.00
Home visits prior to licensing	4.00	1.78	3.00	2.71	.72	4.00
Average payment						
Nonkinship	$632.33	$186.76	$702.00	$407.84	$72.94	$369.00
Kinship	$759.21	$277.08	$609.00	$407.84	$72.94	$369.00
Therapeutic	$1,230.67	$794.14	$1076.00	1,294.36	$497.24	$1569.00

Note. Data for number of home visits prior to an approval were missing for one (3%) agency. No data were missing for any other variable. Data were missing for 8 agencies representing 24 workers.

Table 5. Characteristics of *best* and *worst* families: total families.

Characteristic	*Best* (*n* = 208) %	*Worst* (*n* = 208) %	X^2(df)	*r*
Married	80.8	61.5	18.74(1)**	.21**
Family type				
Two-Parent	80.8	61.5	20.42(2)**	.22**
Single-Mother	17.3	37.0		
Single-Father	1.9	1.4		
Number with birth or adopted children	60.6	45.7	9.28(1)**	.15**
Licensed to foster	97.6	75.4	43.70(1)**	.34**
One or more children placed	91.3	76.1	17.49(1)**	.21**
Provided kinship care	5.3	16.8	14.08(1)**	-.18**
Well known by worker	90.3	63.5	41.83(1)**	.32**

*Note. * p < .05, two tailed, ** p ≤ .01, two tailed. For dichotomous variables r is phi and for multicategorical variables r is Cramer's V. For best families, data for licensed to foster were missing for one (.5%) family. Data for one or more child placed were missing for one (.5%) family. Data for well known by worker were missing for two (1.0%) families, and no other variable had missing data. For worst families, data for licensed to foster were missing for one (.5%) family, data for one or more children placed were missing for three (1.4%) families, and no other variable had missing data.*

Table 6. Characteristics of *best* and *worst* families: married couples.

Characteristic	*Best* (*n* = 168) %	*Worst* (*n* = 128) %	X^2(df)	*r*
Number with birth or adopted children	61.9	53.9	1.91(1)	.08
Licensed to foster	98.2	75.8	35.73(1)**	.35**
One or more children placed	92.8	77.2	14.72(1)**	.22**
Provided kinship care	4.2	16.4	12.71(1)**	-.21**
Well known by worker	91.0	65.6	29.20(1)**	.32**

*Note. * p < .05, two tailed, ** p < .01, two-tailed.. For dichotomous variables r is phi. For best married couples, data for licensed to foster were missing for one (.6%) family, data for one or more children placed were missing for one (.6%) family, data for well known by worker were missing for one (.6%) family, and no other variable had missing data. For worst married couples, for one or more children placed data were missing for one (.8%) family and no other variable had missing data.*

Table 7. Characteristics of all female *best* and *worst* applicants.

Characteristic	*Best* (n = 204) %	*Worst* (n = 205) %	X^2 (df)	*r*
Married	82.4	62.4	20.28(1)**	.22**
Race				
European American	64.5	56.2		
African American	24.1	36.5		
Hispanic	3.4	1.5		
Multiracial	4.9	4.9		
Other	3.0	1.0		
Number with birth or adopted children	60.8	46.3	8.56(1)**	.15**
Licensed to foster	97.5	75.5	42.32(1)**	.32**
One or more children placed	91.1	75.7	17.31(1)**	.21**
Provided kinship care	4.9	16.6	14.54(1)**	-.19**
Well known by their worker	90.6	63.9	41.12(1)**	.32**

*Note. * p < .05, two tailed, ** p < .01, two tailed. For best female applicants data for race were missing for one (.5%) applicant, data for licensed to foster were missing for one (.5%) applicant, data for one or more children placed were missing for one (.5%) applicant, data for well known by worker were missing for two (1.0%) applicants, and no other variable had missing data. For worst female applicants data for race were missing for two (1.0%) applicants, data for licensed to foster were missing for one (.5%) applicant, data for one or more children placed were missing for three (1.5%) applicants, and no other variable had missing data.*

Table 8. Characteristics of all male *best* and *worst* applicants.

Characteristic	*Best* (n = 172) %	*Worst* (n = 131) %	X^2 (df)	*r*
Married	97.7	97.7		
Race				
European American	69.6	60.8		
African American	19.9	20.9		
Hispanic	3.5	2.3		
Multiracial	5.9	4.7		
Other	1.2	2.4		
Number with birth or adopted children	61.6	52.7		
Licensed to foster	98.2	75.6	37.22(1)**	.35**
One or more children placed	93.0	77.7	14.68(1)**	.22**
Provided kinship care	4.7	16.8	12.29(1)**	-.20**
Well known by their worker	90.6	64.9	30.16(1)**	.32**

*Note. * p < .05, two tailed, ** p < .01, two tailed. For best male applicants data for race were missing for one (.6%) applicant, data for licensed to foster were missing for one (.6%) applicant, data for one or more children placed were missing for one (.6%) applicant, and data for well known by their worker were missing for one (.6%) applicant. For worst male applicants data for one or more children placed were missing for one (.8%) applicant and no other variable had missing data.*

Table 9. Characteristics of *best* and *worst* female applicants: married applicants.

Characteristic	Best (*n* = 168) %	Worst (*n* = 127) %	X^2(df)	r
Race				
European American	70.1	69.0		
African American	16.2	19.0		
Hispanic	4.2	2.4		
Multiracial	6.0	8.0		
Other	4.2	1.6		
Number with birth or adopted children	61.9	53.9		
Licensed to foster	98.2	75.8	35.73(1)**	.35**
One or more children placed	92.8	77.2	14.72(1)**	.22**
Provided kinship care	4.2	16.4	12.71(1)**	-.21**
Well known by their worker	91.0	65.6	29.20(1)**	.32**

*Note. * p < .05, two tailed, ** p < .01, two tailed. For dichotomous variables r is phi. For best married female applicants data for race were missing for one (.6%) applicant, and data for licensed to foster were missing for one (.6%) applicant. Also, data for one or more children placed were missing for one (.6%) applicant, and data for well known by their worker were missing for one applicant (.6%). For worst married female applicants data for race were missing for two (1.6%) applicants, data for one or more children placed were missing for one (.8%) applicant, and no other variable had missing data.*

Table 10. Characteristics of *best* and *worst* male applicants: married applicants.

Characteristic	Best (*n* = 168) %	Worst (*n* = 127) %	X^2(df)	r
Race				
European American	70.7	70.6		
African American	18.6	19.8		
Hispanic	3.6	2.4		
Multiracial	6.0	4.8		
Other	1.2	2.4		
Number with birth or adopted children	61.9	53.9		
Licensed to foster	98.2	75.8	35.73(1)**	.35**
One or more children placed	92.8	77.2	14.72(1)**	.22**
Provided kinship care	4.2	16.4	12.71(1)**	-.21**
Well known by their worker	91.0	65.6	29.20(1)**	.32**

*Note. * p < .05, two tailed, ** p < .01, two tailed. For dichotomous variables r is phi. For best married male applicants data for licensed to foster were missing for one (.6%) applicant, data for one or more children placed were missing for one (.6%) applicant, data for well known by their worker were missing for one (.6%) applicant, and no other variable had missing data. For worst married male applicants data for one or more children placed were missing for one (.8%) applicant and no other variable had missing data.*

Table 11. Intercorrelations among subscales for female applicants.

Subscales	GP-W	CP-W	IFC-W	KC-W
GP-W	1.00			
CP-W	**.85 (294)	1.00		
IFC-W	**.80 (219)	**.75 (172)	1.00	
KC-W	**.75 (44)	**.73 (27)	**.64 (21)	1.00

*Note. * p < .05, two-tailed, ** p < .01, two-tailed. Pairwise deletion was used and sample sizes are shown within parentheses. General Potential to Foster (GP-W), Coparenting (CP-W), Integrating Foster Children (IFC-W), Kinship Care (KC-W).*

Table 12. Intercorrelations among subscales for male applicants.

Subscales	GP-W	CP-W	IFC-W	KC-W
GP-W	1.00			
CP-W	**.85	1.00		
	(294)			
IFC-W	**.79	**.75	1.00	
	(175)	(172)		
KC-W	**.69	**.69	**.70	1.00
	(30)	(27)	(15)	

*Note. * p < .05, two-tailed, ** p < .01, two-tailed. Pairwise deletion was used and sample sizes are shown within parentheses. General Potential to Foster (GP-W), Coparenting (CP-W), Integrating Foster Children (IFC-W), Kinship Care (KC-W).*

Table 13. Descriptive statistics for subscales for female applicants.

Subscale	M	SD	Mdn	Range	Skew (SE)	Kurtosis (SE)	N	Missing
GP-W	2.85	.50	2.88	1.24-3.84	-.18(.12)	-.66(.24)	408	1
GP(A)-W	2.86	.50	2.91	1.31-3.84	-.20(.12)	-.61(.24)	408	1
GP(B)-W	2.84	.50	2.85	1.17-3.90	-.20(.12)	-.60(.24)	408	1
GP(C)-W	2.86	.51	2.89	1.22-3.86	-.14(.12)	-.69(.24)	408	1
CP-W	3.12	.62	3.10	1.27-4.00	-.44(.14)	-.47(.28)	293	1
IFC-W	2.90	.48	3.00	1.43-4.00	-.02(.17)	-.01(.33)	216	3
KC-W	2.88	.42	2.92	1.83-3.83	.05(.36)	.18(.70)	44	0

Note. General Potential (GP(W)), General Potential-Form A (GP(A)), General Potential - Form B (GP(B)), General Potential -Form C (GP(C)), Coparenting (CP-W), Integrating Foster Children (IFC-W), Kinship Care (KC-W).

Table 14. Interquartile ranges for female applicants.

Subscale	25th Percentile	75th Percentile
GP-W	2.4603	3.2759
GP(A)-W	2.4828	3.2759
GP(B)-W	2.4483	3.2759
GP(C)-W	2.4483	3.2759
CP-W	2.7273	3.6364
IFC-W	2.5714	3.1429
KC-W	2.5000	3.1250

Table 15. Descriptive statistics for subscales for male applicants.

Subscale	M	SD	Mdn	Range	Skew (SE)	Kurtosis (SE)	N	Missing
GP-W	2.85	.49	2.92	1.24-3.79	-.42(.14)	-.35(.28)	303	0
GP(A)-W	2.85	.49	2.91	1.31-3.79	-.38(.14)	-.36(.28)	303	0
GP(B)-W	2.84	.49	2.91	1.17-3.88	-.44(.14)	-.32(.28)	303	0
GP(C)-W	2.87	.50	2.93	1.22-3.83	-.43(.14)	-.32(.28)	303	0
CP-W	3.10	.62	3.10	1.45-4.00	-.42(.14)	-.56(.28)	293	1
IFC-W	2.91	.50	3.00	1.43-4.00	-.13(.18)	.10(.37)	174	1
KC-W	2.91	.42	2.83	2.17-3.83	.39(.43)	.12(.83)	30	0

Note. General Potential (GP-W), General Potential -Form A (GP(A)), General Potential - Form B (GP(B)), General Potential -Form C (GP(C)), Coparenting (CP-W), Integrating Foster Children (IFC-W), Kinship Care (KC-W).

Table 16. Interquartile ranges for male applicants.

Subscale	25th Percentile	75th Percentile
GP-W	2.4798	3.2384
GP(A)-W	2.4655	3.2414
GP(B)-W	2.4561	3.2069
GP(C)-W	2.5000	3.2632
CP-W	2.7273	3.6364
IFC-W	2.5714	3.2857
KC-W	2.6667	3.1667

Table 17. Intercorrelations among General Potential forms for female applicants.

Subscales	GP-W	GP(A)-W	GP(B)-W	GP(C)-W
GP-W	1.00			
GP(A)-W	.99	1.00		
GP(B)-W	.99	.98	1.00	
GP(C)-W	.99	.98	.98	1.00

Note. For each correlation p< .001, two-tailed, N = 408.

Table 18. Intercorrelations among General Potential forms for male applicants.

Subscales	GP-W	GP(A)-W	GP(B)-W	GP(C)-W
GP-W	1.00			
GP(A)-W	.99	1.00		
GP(B)-W	.99	.98	1.00	
GP(C)-W	.99	.98	.98	1.00

Note. For each correlation p < .01, two-tailed, N = 303.

Table 19. Reliability of subscales for female applicants.

Subscale	α	SEM	N	Missing
GP-W	.99	.05	343	66
GP(A)-W	.98	.07	374	35
GP(B)-W	.98	.07	377	32
GP(C)-W	.98	.07	378	31
CP-W	.95	.14	290	4
IFC-W	.88	.19	208	11
KC-W	.63	.26	44	0

Table 20. Reliability of subscales for male applicants.

Subscale	α	SEM	N	Missing
GP-W	.99	.05	238	65
GP(A)-W	.98	.07	275	28
GP(B)-W	.97	.08	274	29
GP(C)-W	.98	.07	272	31
CP-W	.95	.14	287	6
IFC-W	.83	.20	163	5
KC-W	.60	.26	30	0

Table 21. Intercorrelations among core and subgroup subscales for female applicants.

Subscales	GP(C)-W	CP-W	IFC-W	KC-W
GP(C)-W	1.00			
CP-W	.85**	1.00		
	(293)			
IFC-W	.81**	.76**	1.00	
	(216)	(171)		
KC-W	.72**	.73**	.64**	1.00
	(44)	(27)	(21)	

*Note. * p < .05, two-tailed, ** p < .01, two-tailed. Pairwise deletion was used and sample sizes are shown within parentheses.*

Table 22. Intercorrelations among core and subgroup subscales for male applicants.

Subscales	GP(C)-W	CP-W	IFC-W	KC-W
GP(C)-W	1.00			
CP-W	.86**	1.00		
	(293)			
IFC-W	.79**	.76**	1.00	
	(174)	(171)		
KC-W	.66**	.69**	.70**	1.00
	(30)	(27)	(15)	

*Note. * p < .05, two-tailed, ** p < .01, two-tailed. Pairwise deletion was used and sample sizes are shown within parentheses.*

Table 23. Intercorrelations among core and subgroup subscales for family applicants.

Subscales	GP(C)-W	CP-W	IFC-W	KC-W
GP(C)-W	1.00			
CP-W	.86**	1.00		
	(294)			
IFC-W	.80**	.77**	1.00	
	(219)	(172)		
KC-W	.75**	.73**	.68**	1.00
	(46)	(27)	(21)	

*Note. * p < .05, two-tailed, ** p < .01, two-tailed. Pairwise deletion was used and sample sizes are shown within parentheses.*

Table 24. Paired-sample tests of mean differences: *t*-values (mean differences) (female applicants).

Subscales	GP(C)-W	CP-W	IFC-W	KC-W
GP(C)-W				
CP-W	-9.92**			
	(-.19)			
IFC-W	1.62	9.00**		
	(.03)	(.28)		
KC-W	-7.48**	-2.69*	-3.47**	
	(-.36)	(-.21)	(-.26)	
M	2.93	3.12	2.90	2.88
SD	.49	.62	.48	.42

*Note. * $p \leq .05$, two-tailed, ** $p < .01$, two-tailed. Sample sizes are those shown in Table 21.*

Table 22. Paired-sample tests of mean differences: *t*-values (mean differences) (male applicants).

Subscales	GP(C)-W	CP-W	IFC-W	KC-W
GP(C)-W				
CP-W	-12.21**			
	(-.23)			
IFC-W	.33	8.49**		
	(.01)	(.26)		
KC-W	-5.51**	-2.73*	-3.65**	
	(-.39)	(-.21)	(-.31)	
M	2.88	3.10	2.91	2.91
SD	.50	.62	.50	.42

*Note. * $p \leq .05$, two-tailed, ** $p < .01$, two-tailed. Sample sizes are those shown in Table 22.*

Table 26. Paired-sample tests of mean differences: *t*-values (mean differences) (family applicants).

Subscales	GP(C)-W	CP-W	IFC-W	KC-W
GP(C)-W				
CP-W	-11.56**			
	(-.21)			
IFC-W	.90	8.96**		
	(.02)	(.27)		
KC-W	-8.30**	-2.77**	-3.85**	
	(-.38)	(-.21)	(-.27)	
M	2.90	3.11	2.90	2.89
SD	.49	.62	.48	.43

*Note. * $p \leq .05$, two-tailed, ** $p < .01$, two-tailed. Sample sizes are those shown in Table 23.*

Table 27. Paired sample tests of differences in variances: *t*-values (difference in variances) (female applicants).

Subscales	GP(C)-W	CP-W	IFC-W	KC-W
GP(C)-W				
CP-W	-6.18**			
	(-.12)			
IFC-W	1.53	5.07**		
	(.03)	(.15)		
KC-W	1.73	2.80**	.70	
	(.08)	(.20)	(.05)	
M	2.86	3.12	2.90	2.88
SD	.51	.62	.48	.42

*Note. * $p \leq .05$, two-tailed, ** $p < .01$, two-tailed. Sample sizes are those shown in Table 21.*

Table 28. Paired sample tests of differences in variances: *t*-values (difference in variances) (male applicants).

Subscales	GP(C)-W	CP-W	IFC-W	KC-W
GP(C)-W				
CP-W	-7.05**			
	(-.13)			
IFC-W	.00	4.22**		
	(.00)	(.13)		
KC-W	1.37	2.85*	.98	
	(.08)	(.21)	(.08)	
M	2.87	3.10	2.91	2.91
SD	.50	.62	.50	.42

*Note. * $p \leq .05$, two-tailed, ** $p < .01$, two-tailed. Sample sizes are those shown in Table 22.*

Table 29. Paired sample tests of differences in variances: *t*-values (difference in variances) (family applicants).

Subscales	GP(C)-W	CP-W	IFC-W	KC-W
GP(C)-W				
CP-W	-7.06**			
	(-.13)			
IFC-W	1.02	5.18**		
	(.02)	(.15)		
KC-W	1.38	2.59*	.57	
	(.06)	(.19)	(.04)	
M	2.84	3.11	2.90	2.90
SD	.50	.62	.48	.43

*Note. * $p \leq .05$, two-tailed,** $p < .01$, two-tailed. Sample sizes are those shown in Table 23.*

Table 30. GP(C)-W regressed on *best-worst*, race, marital status, and *best-worst* x race.

	Female (N = 408)			Male (N = 303)			Families (N = 416)		
Variable	***B***	***β***	***t***	***B***	***β***	***t***	***B***	***β***	***t***
Step 1									
Best-worst	.85	.84	31.26**	.83	.83	25.36**	.84	.84	31.88**
	R^2 = .71 $F(1,406)$ = 976.91, p < .001			R^2 = .68 $F(1,301)$ = 643.04, p < .001			R^2 = .71 $F(1,414)$ = 1016.15, p < .001		
Step 2									
Best-worst	.85	.84	30.24**	.83	.83	25.32**	.84	.84	31.05**
Race	-.01	-.01	-.27	-.00	-.00	-.12	-.02	-.02	-.55
Married	.02	.02	.75				-.00	-.00	-.07
	R^2_{change} = .00 $F_{change}(2,404)$ = .41, p = .66			R^2_{change} = .00 $F_{change}(1,300)$ = .02, p = .90			R^2_{change} = .00 $F_{change}(2,412)$ = .16, p = .85		
Step 3									
Best-worst	.82	.81	22.94**	.81	.80	20.45**	.81	.81	23.38**
Race	-.05	-.04	-1.13	-.05	-.04	-.85	-.05	-.05	-1.28
Married	.02	.02	.65				-.00	-.00	-.15
***Best-worst* x Race**	.08	.06	1.36	.07	.06	1.02	.07	.05	1.28
	R^2_{change} = .00 $F_{change}(1,403)$ = 1.85, p = .17			R^2_{change} = .00 $F_{change}(1,299)$ = 1.05, p = .31			R^2_{change} = .00 $F_{change}(1,411)$ = 1.65, p = .20		

*Note: *p < .05, two-tailed, ** p < .01, two-tailed. For female applicants data were missing for one (< .01%) applicant.*

Table 31. CP-W regressed on *best-worst*, race, and *best-worst* x race.

	Female (N = 293)			Male (N = 293)			Families (N = 294)		
Variable	***B***	***β***	***t***	***B***	***β***	***t***	***B***	***β***	***t***
Step 1									
Best-worst	.96	.78	20.90**	.97	.78	21.21**	.97	.78	21.25**
	R^2 = .60 $F(1,291)$ = 436.69, p < .001			R^2 = .61 $F(1,291)$ = 449.90, p < .001			R^2 = .61 $F(1,292)$ = 451.58, p < .001		
Step 2									
Best-worst	.96	.78	20.86**	.97	.78	21.18**	.97	.78	21.21**
Race	.00	.00	.01	.01	.00	.10	.00	.00	.04
	R^2_{change} = .00 $F_{change}(1,290)$ = .00, p = .99			R^2_{change} = .00 $F_{change}(1,290)$ = .01, p = .92			R^2_{change} = .00 $F_{change}(1,291)$ = .00, p = .97		
Step 3									
Best-worst	.95	.76	17.02**	.95	.76	17.20**	.96	.77	17.42**
Race	-.03	-.02	-.34	-.05	-.04	-.63	-.01	-.01	-.20
Best-worst **x Race**	.05	.03	.46	.09	.06	.92	.03	.02	.30
	R^2_{change} = .00 $F_{change}(1,289)$ =.21, p = .65			R^2_{change} = .00 $F_{change}(1,289)$ = .85, p = .36			R^2_{change} = .00 $F_{change}(1,290)$ =.09, p = .76		

*Note: * p < .05, two-tailed, ** p < .01, two-tailed.*

Table 32. IFC-W regressed on *best-worst*, race, marital status, and *best-worst* x race.

	Female (N = 216)			Male (N = 174)			Families (N = 219)		
Variable	***B***	***β***	***t***	***B***	***β***	***t***	***B***	***β***	***t***
Step 1									
Best-worst	.70	.72	15.16**	.75	.74	14.37**	.70	.72	15.43**
	R^2 = .52 $F(1,214)$ = 229.67, p < .001			R^2 = .55 $F(1,172)$ = 206.49, p < .001			R^2 = .52 $F(1,217)$ = 238.20, p < .001		
Step 2									
Best-worst	.71	.73	15.23**	.75	.74	14.42**	.71	.73	15.54**
Race	.05	.05	1.04	.07	.07	1.31	.06	.06	1.17
Married	-.05	-.04	-.87				-.05	-.04	-.86
	R^2_{change} = .01 $F_{change}(2,212)$ = 1.25, p = .29			R^2_{change} = .01 $F_{change}(1,171)$ = 1.71, p = .19			R^2_{change} = .01 $F_{change}(2,215)$ = 1.45, p = .24		
Step 3									
Best-worst	.73	.75	11.94**	.73	.72	11.35**	.73	.75	12.02**
Race	.08	.08	1.13	.03	.03	.40	.08	.08	1.09
Married	-.05	-.04	-.83				-.05	-.04	-.84
***Best-worst* x Race**	-.05	-.05	-.57	.06	.05	.56	-.04	-.03	-.42
	R^2_{change} = .00 $F_{change}(1,211)$ =.33, p = .57			R^2_{change} = .00 $F_{change}(1,170)$ = .31, p = .58			R^2_{change} = .00 $F_{change}(1,214)$ =.17, p = .68		

*Note: * p < .05, two-tailed, ** p < .01, two-tailed.*

Table 33. KC-W regressed on *best-worst*, race, marital status, and *best-worst* x race.

	Female (N = 44)			Male (N = 30)			Families (N = 46)		
Variable	***B***	***β***	***t***	***B***	***β***	***t***	***B***	***β***	***t***
Step 1									
Best-worst	.72	.72	6.72**	.67	.72	5.51**	.74	.74	7.23**
	R^2 = .52 $F(1,42)$ = 45.09, p < .001			R^2 = .52 $F(1,28)$ = 30.39, p < .001			R^2 = .54 $F(1,44)$ = 52.26, p < .001		
Step 2									
Best-worst	.72	.72	6.42**	.67	.72	5.42**	.74	.74	7.03**
Race	-.02	-.02	-.17	.01	.02	.13	.02	.02	.18
Married	-.05	-.05	-.44				-.05	-.05	-.47
	R^2_{change} = .00 $F_{change}(2,40)$ =.10, p = .91			R^2_{change} = .00 $F_{change}(1,27)$ =.02, p = .90			R^2_{change} = .01 $F_{change}(2,42)$ =.21, p = .81		
Step 3									
Best-worst	.52	.52	3.56**	.45	.49	3.12**	.52	.52	3.63**
Race	-.12	-.15	-1.07	-.13	-.16	-1.12	-.09	-.11	-.83
Married	-.06	-.07	-.58				-.05	-.06	-.53
***Best-worst* x Race**	.42	.29	1.95	.57	.42	2.43*	.43	.31	2.12*
	R^2_{change} = .04 $F_{change}(1,39)$ = 3.79, p = .06			R^2_{change} = .09 $F_{change}(1,26)$ = 5.89, p = .02			R^2_{change} = .05 $F_{change}(1,41)$ = 4.50, p = .04		

*Note: * p < .05, two-tailed, ** p < .01, two-tailed.*

Table 34. Licensure status regressed on GP(C)-W and GP(C)-W^2.

	Female (N = 406)			Male (N = 302)			Families (N = 414)		
Variable	***B***	***X*^{2}**	***OR***	***B***	***X*^{2}**	***OR***	***B***	***X*^{2}**	***OR***
Step 1									
GP(C)-W	2.22	36.58**	9.19	2.23	27.99**	9.28	2.39	39.42**	10.90
		$X^2(1) = 47.96$, $p < .001$			$X^2(1) = 35.12$, $p < .001$			$X^2(1) = 53.34$, $p < .001$	
Step 2									
GP(C)-W	.52	.03	1.69	-2.72	.61	.07	1.0	.10	2.71
GP(C)-W^2	.33	.30	1.39	.99	2.00	2.70	.27	.19	1.31
		$X^2_{diff}(1) = .30$, $p = .58$			$X^2_{diff}(1) = 2.15$, $p = .14$			$X^2_{diff}(1) = .19$, $p = .66$	

*Note: *p < .05, two-tailed, ** p < .01, two-tailed.*

Table 35. Licensure status regressed on GP(C)-W, race, marital status, and GP(C)-W x race.

	Female (N = 406)			Male (N = 302)			Families (N = 407)		
Variable	***B***	***X^2***	***OR***	***B***	***X^2***	***OR***	***B***	***X^2***	***OR***
Step 1									
GP(C)-W	2.22	36.58**	9.19	2.23	27.99**	9.28	2.34	37.96**	10.38
		$X^2(1) = 47.96$, $p < .001$			$X^2(1) = 35.12$, $p < .001$			$X^2(1) = 50.95$, $p < .001$	
Step 2									
GP(C)-W	2.17	34.35**	8.80	2.22	27.70**	9.20	2.0	35.88**	9.94
Race	-.15	.21	.86	-.26	.40	.77	-.15	.19	.86
Married	.14	.16	1.15				.15	.18	1.16
		$X^2_{diff}(2) = .55$, $p = .76$			$X^2_{diff}(1) = .39$, $p = .53$			$X^2_{diff}(2) = .56$, $p = .76$	
Step 3									
GP(C)-W	2.02	15.88**	7.51	2.70	20.30**	14.84	2.21	17.67**	9.07
Race	-.99	.27	.37	2.40	1.24	10.99	-.62	.11	.54
Married	.13	.13	1.14				.14	.16	1.16
GP(C)-W x Race	.33	.20	1.39	-1.06	1.58	.35	.19	.06	1.21
		$X^2_{diff}(1) = .20$, $p = .66$			$X^2_{diff}(1) = 1.57$, $p < .21$			$X^2_{diff}(1) = .06$, $p < .80$	

*Note: *p < .05, two-tailed, ** p < .01, two-tailed.*

Table 36. Licensure status regressed on CP-W and CP-W^2.

	Female (N = 292)			Male (N = 292)			Families (N = 293)		
Variable	***B***	***X*^{2}**	***OR***	***B***	***X*^{2}**	***OR***	***B***	***X*^{2}**	***OR***
Step 1									
CP-W	1.63	24.92**	5.11	1.71	26.55**	5.54	1.68	25.70**	5.36
	$X^2(1) = 29.07$, $p < .001$			$X^2(1) = 31.61$, $p < .001$			$X^2(1) = 30.31$, $p < .001$		
Step 2									
CP-W	-1.45	.29	.24	.80	.09	2.23	-.18	.01	.83
CP-W^2	.58	1.32	1.78	.17	.12	1.18	.35	.48	1.41
	$X^2_{diff}(1) = 1.44$, $p = .23$			$X^2_{diff}(1) = .12$, $p = .73$			$X^2_{diff}(1) = .51$, $p = .48$		

*Note: * p < .05, two-tailed, ** p < .01, two-tailed.*

Table 37. Licensure status regressed on CP-W, race, and CP-W x race.

	Female (N = 292)			Male (N = 292)			Families (N = 293)		
Variable	***B***	***X^2***	***OR***	***B***	***X^2***	***OR***	***B***	***X^2***	***OR***
Step 1									
CP-W	1.63	24.92**	5.11	1.71	26.55**	5.54	1.68	25.70**	5.36
	$X^2(1) = 29.07$, $p < .001$			$X^2(1) = 31.61$, $p < .001$			$X^2(1) = 30.31$, $p < .001$		
Step 2									
CP-W	1.63	24.86**	5.10	1.71	26.53**	5.55	1.68	25.67**	5.35
Race	-.20	.23	.82	-.45	1.20	.64	-.22	.29	.80
	$X^2_{dif}(1) = .23$, $p = .63$			$X^2_{dif}(1) = 1.18$, $p = .28$			$X^2_{dif}(1) = .28$, $p = .60$		
Step 3									
CP-W	1.97	20.78**	7.15	2.01	20.79**	7.46	2.03	21.55**	7.63
Race	2.22	1.42	9.25	1.58	.72	4.84	2.32	1.52	10.17
CP-W x Race	-.89	1.79	.41	-.76	1.27	.47	-.94	1.94	.39
	$X^2_{diff}(1) = 1.77$, $p = .18$			$X^2_{diff}(1) = 1.24$, $p = .27$			$X^2_{diff}(1) = 1.91$, $p = .17$		

*Note: * p < .05, two-tailed, ** p < .01, two-tailed.*

Table 38. Licensure status regressed on IFC-W and IFC-W^2.

	Female (N = 215)			Male (N = 174)			Families (N = 217)		
Variable	***B***	***X*^{2}**	***OR***	***B***	***X*^{2}**	***OR***	***B***	***X*^{2}**	***OR***
Step 1									
IFC-W	1.97	15.51**	7.20	2.14	12.08**	8.49	2.02	16.18**	7.53
	$X^2(1) = 18.09$, $p < .001$			$X^2(1) = 14.00$, $p < .001$			$X^2(1) = 18.90$, $p < .001$		
Step 2									
IFC-W	-1.44	.08	.24	-1.93	.11	.15	-1.68	.11	.19
IFC-W^2	.66	.46	1.93	.81	.47	2.25	.72	.54	2.04
	$X^2_{diff}(1) = .50$, $p = .48$			$X^2_{diff}(1) = .53$, $p = .47$			$X^2_{diff}(1) = .59$, $p = .44$		

*Note: * p < .05, two-tailed, ** p < .01, two-tailed.*

Table 39. Licensure status regressed IFC-W, race, marital status, and IFC-W x race.

	Female (N = 215)			Male (N = 174)			Families (N = 217)		
Variable	***B***	***X²***	***OR***	***B***	***X²***	***OR***	***B***	***X²***	***OR***
Step 1									
IFC-W	1.97	15.51**	7.20	2.14	12.08**	8.49	2.02	16.18**	7.53
	$X^2(1) = 18.09$, $p < .001$			$X^2(1) = 14.00$, $p < .001$			$X^2(1) = 18.90$, $p < .001$		
Step 2									
IFC-W	2.09	15.64**	8.07	2.15	12.23**	8.62	2.15	16.61**	8.60
Race	-.05	.01	.95	.40	.46	1.49	-.04	.01	.96
Married	1.37	7.52**	3.95				1.35	7.35*	3.87
	$X^2_{dif}(2) = 8.21$, $p = .02$			$X^2_{dif}(1) = .45$, $p = .50$			$X^2_{dif}(2) = 7.95$, $p = .02$		
Step 3									
IFC-W	1.99	8.42**	7.30	2.15	7.86**	8.54	2.03	8.82**	7.62
Race	-.67	.06	.51	.46	.02	1.58	-.79	.08	.45
Married	1.38	7.55**	3.99				1.37	7.30	3.93
IFC-W x Race	.24	.05	1.27	.02	.00	1.02	.29	.07	1.34
	$X^2_{diff}(1) = .05$, $p = .82$			$X^2_{diff}(1) = .00$, $p = .99$			$X^2_{diff}(1) = .08$, $p = .79$		

*Note: * p < .05, two-tailed, ** p < .01, two-tailed.*

Table 40. Child placement status regressed on GP(C)-W and GP(C)-W^2.

	Female (N = 405)			Male (N = 301)			Families (N = 412)		
Variable	***B***	***X*^{2}**	***OR***	***B***	***X*^{2}**	***OR***	***B***	***X*^{2}**	***OR***
Step 1									
GP(C)-W	1.00	13.14**	2.72	1.10	10.32**	2.99	1.07	14.26**	2.91
		$X^2(1) = 13.83$, $p < .001$			$X^2(1) = 10.64$, $p < .001$			$X^2(1) = 15.09$, $p < .001$	
Step 2									
GP(C)-W	-.33	.02	.72	-1.84	.34	.16	.77	.09	2.17
GP(C)-W^2	.25	.28	1.28	.55	.87	1.74	.05	.01	1.06
		$X^2_{diff}(1) = .29$, $p = .59$			$X^2_{diff}(1) = .94$, $p = .33$			$X^2_{diff}(1) = .01$, $p = .91$	

*Note: *p < .05, two-tailed, ** p < .01, two-tailed.*

Table 41. Child placement status regressed on GP(C)-W, race, marital status, and GP(C)-W x race.

	Female (N = 405)			Male (N = 301)			Families (N = 412)		
Variable	***B***	***X^2***	***OR***	***B***	***X^2***	***OR***	***B***	***X^2***	***OR***
Step 1									
GP(C)-W	1.00	13.14**	2.72	1.10	10.32**	2.99	1.07	14.26**	2.91
		$X^2(1) = 13.83$, $p < .001$			$X^2(1) = 10.64$, $p = .001$			$X^2(1) = 15.09$, $p < .001$	
Step 2									
GP(C)-W	.93	10.79**	2.53	1.09	10.31**	2.99	1.02	12.49**	2.77
Race	.10	.11	1.10	-.04	.01	.96	.15	.25	1.16
Married	.48	2.41	1.61				.44	2.03	1.55
		$X^2_{diff}(2) = 2.39$, $p = .30$			$X^2_{diff}(1) = .01$, $p = .92$			$X^2_{diff}(2) = 1.99$, $p = .37$	
Step 3									
GP(C)-W	1.25	9.80**	3.48	1.58	12.48**	4.84	1.43	11.91**	4.17
Race	1.89	1.48	6.59	3.49	3.01	32.70	2.39	2.30	10.93
Married	.51	2.73	1.66				.47	2.32	1.60
GP(C)-W x Race	-.66	1.39	.52	-1.30	3.26	.27	-.84	2.10	.43
		$X^2_{diff}(1) = 1.39$, $p = .24$			$X^2_{diff}(1) = 3.33$, $p = .07$			$X^2_{diff}(1) = 2.12$, $p = .15$	

*Note: *p < .05, two-tailed, ** p < .01, two-tailed.*

Table 42. Child placement status regressed on CP-W and CP-W^2.

	Female (N = 291)			Male (N = 291)			Families (N = 292)		
Variable	***B***	***X*^{2}**	***OR***	***B***	***X*^{2}**	***OR***	***B***	***X*^{2}**	***OR***
Step 1									
CP-W	.84	9.58**	2.32	.89	10.73**	2.44	.87	10.05**	2.38
	$X^2(1) = 9.77$, $p = .002$			$X^2(1) = 11.03$, $p = .001$			$X^2(1) = 10.29$, $p = .001$		
Step 2									
CP-W	-.14	.00	.87	1.55	.52	4.70	.79	.13	2.21
CP-W^2	.17	.21	1.19	-.12	.10	.89	.01	.00	1.01
	$X^2_{diff}(1) = .21$, $p = .65$			$X^2_{diff}(1) = .09$, $p = .76$			$X^2_{diff}(1) = .00$, $p = .97$		

*Note: * p < .05, two-tailed, ** p < .01, two-tailed.*

Table 43. Child placement status regressed on CP-W, race, and CP-W x race.

	Female (N = 291)			Male (N = 291)			Families (N = 292)		
Variable	***B***	***X^2***	***OR***	***B***	***X^2***	***OR***	***B***	***X^2***	***OR***
Step 1									
CP-W	.84	9.58**	2.32	.89	10.73**	2.44	.87	10.05**	2.38
	$X^2(1) = 9.77$, $p = .002$			$X^2(1) = 11.03$, $p = .001$			$X^2(1) = 10.29$, $p = .001$		
Step 2									
CP-W	.85	9.65**	2.34	.89	10.74**	2.44	.87	10.09**	2.39
Race	.40	1.03	1.49	-.11	.09	.90	.39	.97	1.47
	$X^2_{dif}(1) = 1.08$, $p = .30$			$X^2_{dif}(1) = 08$, $p = .77$			$X^2_{dif}(1) = 1.01$, $p = .32$		
Step 3									
CP-W	1.11	11.53**	3.04	1.20	12.24**	3.31	1.14	11.99**	3.11
Race	3.23	2.87	25.17	2.51	2.07	.08	3.27	2.92	26.26
CP-W x Race	-.96	2.41	.38	-.90	2.43	.41	-.98	2.48	.37
	$X^2_{diff}(1) = 2.44$, $p = .12$			$X^2_{diff}(1) = 2.43$, $p = .12$			$X^2_{diff}(1) = 2.51$, $p = .11$		

*Note: * p < .05, two-tailed, ** p < .01, two-tailed.*

Table 44. Child placement status regressed on IFC-W and IFC-W^2.

	Female (N = 215)			Male (N = 173)			Families (N = 217)		
Variable	***B***	***X*^{2}**	***OR***	***B***	***X*^{2}**	***OR***	***B***	***X*^{2}**	***OR***
Step 1									
IFC-W	1.07	6.37**	2.91	1.62	9.05**	5.06	1.11	6.83**	3.02
		$X^2(1) = 6.69$, $p = .01$			$X^2(1) = 9.83$, $p = .002$			$X^2(1) = 7.17$, $p = .007$	
Step 2									
IFC-W	3.53	1.12	34.08	-3.88	.49	.02	3.58	1.17	35.71
IFC-W^2	-.45	.56	.64	1.07	.98	2.91	-.45	.58	.64
		$X^2_{diff}(1) = .53$, $p = .47$			$X^2_{diff}(1) = 1.18$, $p = .28$			$X^2_{diff}(1) = .55$, $p = .46$	

*Note: * p < .05, two-tailed, ** p < .01, two-tailed.*

Table 45. Child placement status regressed on IFC-W, race, marital status, and IFC-W x race.

	Female (N = 215)			Male (N = 173)			Families (N = 215)		
Variable	***B***	***X^2***	***OR***	***B***	***X^2***	***OR***	***B***	***X^2***	***OR***
Step 1									
IFC-W	1.07	6.37*	2.91	1.62	9.05*	5.06	1.09	6.63*	2.97
		$X^2(1) = 6.69$, $p = .01$			$X^2(1) = 9.83$, $p = .002$			$X^2(1) = 6.97$, $p = .008$	
Step 2									
IFC-W	1.09	6.10*	2.97	1.63	9.08*	5.08	1.11	6.37*	3.04
Race	.18	.17	1.20	-.08	.02	.92	.18	.16	1.19
Married	1.34	8.83**	3.80				1.34	8.82**	3.81
		$X^2_{dif}(2) = 8.80$, $p = .01$			$X^2_{dif}(1) = .02$, $p = .88$			$X^2_{dif}(2) = 8.80$, $p = .01$	
Step 3									
IFC-W	2.17	11.36**	8.79	2.16	9.55*	8.69	2.20	11.73**	9.03
Race	6.81	2.57*	908.20	3.95	1.65	51.78	6.87	7.13**	960.17
Married	1.38	8.93**	3.95				1.38	8.95**	3.97
IFC-W x Race	-2.40	6.95*	.09	-1.50	1.82	.22	-2.43	7.11**	.09
		$X^2_{diff}(1) = 7.23$, $p = .007$			$X^2_{diff}(1) = 1.80$, $p = .18$			$X^2_{diff}(1) = 7.39$, $p = .007$	

*Note: * p < .05, two-tailed, ** p < .01, two-tailed.*

Table 46. GP(C)-W subscale scores and kinship foster care

	Female (N = 408)		Male (N = 303)		Family (N = 416)	
	No Kinship *M (SD)*	Kinship *M (SD)*	No Kinship *M (SD)*	Kinship *M (SD)*	No Kinship *M (SD)*	Kinship *M (SD)*
GP(C)-W	2.90 (.50)	2.52 (.43)	2.91 (.49)	2.52 (.51)	2.88 (.49)	2.52 (.44)
	$t(57.91) = 5.35$, $p < .001$, two tailed, $r = -.23$, $p < .001$		$t(301) = 4.20$, $p < .001$, two tailed, $r = -.24$, $p < .001$		$t(59.59) = 5.17$, $p < .001$, two tailed, $r = -.23$, $p < .001$	

Note: The assumption of equality of variances was not met for t-tests with female and family applicants therefore t-tests that don't assume equality of variances were used for these analyses.

Table 47. CP-W subscale scores and kinship foster care

	Female (N = 293)		Male (N = 293)		Family (N = 294)	
	No Kinship *M (SD)*	Kinship *M (SD)*	No Kinship *M (SD)*	Kinship *M (SD)*	No Kinship *M (SD)*	Kinship *M (SD)*
CP-W	3.16 (.60)	2.69 (.60)	3.15 (.61)	2.69 (.56)	3.15 (.61)	2.69 (.59)
	$t(291) = 3.87$, $p < .001$, two tailed, $r = -.22$, $p < .001$		$t(291) = 3.76$, $p < .001$, two tailed, $r = -.22$, $p < .001$		$t(292) = 3.80$, $p < .001$, two tailed, $r = -.22$, $p < .001$	

Note: The assumption of equality of variances was not met for t-tests with female and family applicants therefore t-tests that don't assume equality of variances were used for these analyses.

Table 48. IFC-W subscale scores and kinship foster care

	Female (N = 216)		Male (N = 174)		Family (N = 219)	
	No Kinship *M (SD)*	Kinship *M (SD)*	No Kinship *M (SD)*	Kinship *M (SD)*	No Kinship *M (SD)*	Kinship *M (SD)*
IFC-W	2.91 (.49)	2.71 (.38)	2.93 (.50)	2.64 (.41)	2.92 (.49)	2.69 (.37)
	$t(214) = 1.91$, $p = .06$, two tailed, $r = -.13$, $p = .06$		$t(172) = 2.25$, $p = .03$, two tailed, $r = -.17$, $p = .03$		$t(217) = 2.11$, $p = .04$, two tailed, $r = -.14$, $p = .04$	

Note: The assumption of equality of variances was not met for t-tests with female and family applicants therefore t-tests that don't assume equality of variances were used for these analyses.

Table 49. Dependent groups t-tests and correlations for CFAI-W subscale scores for wives and husbands

	Wives	Husbands
	M (SD)	**M (SD)**
GP(C)-W	2.92 (.50)	2.87 (.50)
	t(295) = 4.79, p < .001, two-tailed, r = .93, p < .001, N = 296	
CP-W	3.12 (.62)	3.10 (.62)
	t(292) = 2.92, p = .004, two-tailed, r = .99, p = .004, N = 293	
IFC-W	2.91 (.49)	2.91 (.50)
	t(171) = .12, p = .91, two-tailed, r = .98, p < .001, N = 172	
KC-W	2.88 (.40)	2.88 (.39)
	t(27) = .00, p = 1.00, two-tailed, r = .93, p < .001, N = 28	

Note: There was one same sex two-parent family applicant in the sample. These applicants were treated as husband and wife for these analyses.

Table 50. GP(C)-W subscale scores and workers' knowledge of applicants

	Female (N = 407)		**Male (N = 302)**		**Family (N = 414)**	
	Not Well Known *M (SD)*	**Well Known** *M (SD)*	**Not Well Known** *M (SD)*	**Well Known** *M (SD)*	**Not Well Known** *M (SD)*	**Well Known** *M (SD)*
GP(C)-W	2.62 (.42)	2.92 (.51)	2.64 (.41)	2.93 (.51)	2.60 (.41)	2.91 (.50)
	t(176.41) = -5.71, *p* < .001, two tailed, *r* = .25, *p* < .001		*t*(114.09) = -4.69, *p* < .001, two tailed, *r* = .23, *p* < .001		*t*(187.80) = -6.12, *p* < .001, two tailed, *r* = .26, *p* < .001	

Note: The assumption of equality of variances was not met for t-tests with female and family applicants therefore t-tests that don't assume equality of variances were used for these analyses.

Table 51. CP-W subscale scores and workers' knowledge of applicants

	Female (N = 292)		**Male (N = 292)**		**Family (N = 293)**	
	Not Well Known ***M (SD)***	**Well Known** ***M (SD)***	**Not Well Known** ***M (SD)***	**Well Known** ***M (SD)***	**Not Well Known** ***M (SD)***	**Well Known** ***M (SD)***
CP-W	2.83 (.52)	3.19 (.62)	2.81 (.53)	3.18 (.62)	2.82 (.52)	3.18 (.62)
	$t(290) = -4.09$, $p < .001$, two tailed, $r = .23$, $p < .001$		$t(290) = -4.19$, $p < .001$, two tailed, $r = .24$, $p < .001$		$t(291) = -4.12$, $p < .001$, two tailed, $r = .24$, $p < .001$	

Table 52. IFC-W subscale scores and workers' knowledge of applicants

	Female (N = 216)		**Male (N = 174)**		**Family (N = 218)**	
	Not Well Known ***M (SD)***	**Well Known** ***M (SD)***	**Not Well Known** ***M (SD)***	**Well Known** ***M (SD)***	**Not Well Known** ***M (SD)***	**Well Known** ***M (SD)***
IFC-W	2.61 (.41)	2.97 (.48)	2.58 (.47)	2.98 (.47)	2.61 (.42)	2.97 (.47)
	$t(214) = -4.50$, $p < .001$, two tailed, $r = .29$, $p < .001$		$t(172) = -4.26$, $p < .001$, two tailed, $r = .31$, $p < .001$		$t(216) = -4.58$, $p < .001$, two tailed, $r = .30$, $p < .001$	

Table 53. KC-W subscale scores and workers' knowledge of applicants

	Female (N = 44)		Male (N = 30)		Family (N = 46)	
	Not Well Known ***M (SD)***	**Well Known** ***M (SD)***	**Not Well Known** ***M (SD)***	**Well Known** ***M (SD)***	**Not Well Known** ***M (SD)***	**Well Known** ***M (SD)***
KC-W	2.77 (.24)	2.91 (.47)	2.81 (.22)	2.93 (.46)	2.78 (.22)	2.94 (.48)
	t(42) = -.96, *p* = .34, two tailed, *r* = .15, *p* = .34		*t*(28) = -.69, *p* = .50, two tailed, *r* = .13, *p* = .50		*t*(41.00) = -1.53, *p* = .13, two tailed, *r* = .16, *p* = .28	

Note: The assumption of equality of variances was not met for t-tests with female and family applicants therefore t-tests that don't assume equality of variances were used for these analyses.

APPENDIX B
General Potential (GP-W) – 174 Items (females and males)

General Potential (GP-W)—174 items (Females)

165 S/he is motivated by what is best for the foster child
42 S/he will help a foster child feel good about him/herself
167 S/he can provide discipline in a respectful way
127 S/he is easy to talk to
84 S/he is able to help a foster child prepare for where they're going to live next
126 S/he can handle the extra stresses of fostering
111 The foster family will change what's needed to care for a foster child
141 There is a lot of love in their home
161 S/he will be an active team member in permanency planning
61 S/he will be good at getting services a foster child might need
158* S/he is not prepared to begin fostering
91 S/he can help a child handle feelings related to visits with the birth parent(s)
72 S/he won't put down a foster child's birth parents
174 S/he will get the support needed to handle problems that might come up with a foster child
10 S/he is able to handle being a substitute parent
171 S/he will work to avoid placement disruption
43 S/he will ease a child's fears about going back home to live with birth parents
41 S/he can teach foster children to get along with adults
57 S/he has time and energy to work with "The System" to get services for a foster child
124* S/he might be mean to a foster child when stressed out
172 S/he will look forward to adopting new traditions a child might bring to the family
168 S/he is consistent with children
25 S/he is good at solving problems, even when they don't know the cause
58* S/he believes that threatening a foster child with having to leave their home might be the only way to get them to obey
96 S/he has enough flexibility in their life to deal with a foster child's needs
6 S/he will be able to adjust if fostering isn't what they expected
106 S/he is very committed to being a foster parent
59 S/he can easily live with differences in other people
1 S/he can foster a child who has been neglected
148 S/he is able to help a child who is trying to be loyal to foster and birth parent(s)
16 S/he can provide emotional support to a child who has been sexually abused
19 S/he is willing to change in order to meet a foster child's needs
76 S/he is committed to keeping a foster child for as long as the child needs
67 S/he is able to give affection to a child who might return to live with birth parent(s)
162 S/he will support reunification with birth parent(s), if applicable
23 S/he will help a child get ready for living with another foster family, if needed
140 S/he is able to teach foster children to get along with other children
170* S/he seems somewhat rigid when coping with stress
177 S/he can care for a foster child who acts unappreciative
46 S/he will be very involved in raising a foster child
175* S/he might be unwilling to accept training, agency support, or agency advice
62 S/he will support foster children's friendships
26* S/he will have a hard time caring for a child who does not appreciate the care
103 S/he will ask for advice about fostering a child of a different race or ethnicity

105* S/he has a hard time showing affection
130* S/he believes that when a foster child refuses to tell what's bothering them there is no point in trying to help them
132* The way s/he feels about the birth parent(s) might get in the way of visits with birth family
169 S/he can focus discipline on behaviors causing the most difficulty for the child and others
116 S/he doesn't overreact to problems
164* S/he seems to have a hard time fitting new people into the family
22 S/he will work hard to help a foster child do the best they can in school
100 S/he is respectful to people with whom s/he is upset
107 S/he will be able to work just fine with a worker of a different race or ethnic group than their own
110 S/he can foster a child who says mean and hurtful things to them
81* S/he is impatient
27* S/he won't be able to handle being blamed for a foster child's problems
125* S/he believes that some children need to be spanked to get them to behave
44 S/he is willing to ask for help when needed
14 S/he knows how to work respectfully with birth parents of a different race than their own
138 S/he understands that it's very important for a foster child to stay in touch with birth family
153 S/he can foster a child who has lots of bad habits
34 S/he can foster a child whose problems don't get better
101 S/he likes teaching children how to do new things
85 S/he plans to attend classes on how to care for children with special problems or needs
102 S/he is able to think of a couple of things to do to help a foster child feel comfortable when they first come to the foster home
112 S/he can afford some out-of-pocket expenses to care for a foster child
173 S/he doesn't have too many family difficulties
159 S/he handles loss appropriately
8 Others believe s/he is good with people
166 S/he has a lot of energy
38* She needs things to go their way most of the time
123 S/he can care respectfully for a child with a different ethnic, racial, or cultural background
17 S/he can foster a child who lies about everything
35 The progress a child makes (even if it's slow) will keep him/her going as a foster parent
2 S/he has time to help a child with schoolwork
90* S/he doesn't want too much contact with the worker
157 S/he will teach foster children to live on their own when they grow up
60 S/he has family or friends to care for a foster child(ren) if the foster parent is sick
179* S/he lacks objectivity toward the birth parent(s)
143 S/he understands that visits with birth family might be a good idea, even if a foster child is upset afterwards
87 S/he is able to foster a child who rejects the foster parent

114 S/he can change their schedule on short notice
12 It's ok with her/him that the agency doesn't allow spanking
108 S/he will let a foster child keep gifts and pictures from birth family
31 S/he can help a foster child continue a relationship with birth parent(s)
137* S/he can't be a good foster parent if not satisfied with the worker
136* S/he doesn't know a lot about the age when children begin to do certain things like use a toilet alone and do their homework by themselves
83 S/he will encourage a foster child to do after-school activities
36 S/he has time to take foster children to counseling
24* S/he doesn't think they need to go through any more agency training
82 S/he is willing to go to cultural activities with a foster child of a different racial or ethnic background
47* S/he won't be able to handle it if a foster child accuses the foster parent of sexual abuse
65 S/he will ask for advice about fostering a child of a different social class
39 S/he has friends who can help when they are having trouble parenting
142* S/he will need a lot of agency support to foster well
176 S/he can deal with uncertainty about when a foster child might be removed from the family's care
120 S/he understands it can be confusing for a foster child to love both birth and foster family
33 S/he can be a good foster parent to a young teen who is sexually active
135 S/he is able to work with the state medical care system
70* S/he can't handle being told by the foster care system how to be a parent
146 S/he can promote a child's spirituality
11 S/he can handle a foster child going home if they believe the child will be well cared for
48* S/he doesn't have the information needed to begin fostering
155* S/he would rather foster a child who doesn't have contact with birth parent(s)
66 S/he is able to parent effectively without much information about the child's previous life
80 S/he plans to get advice from other foster parents
7* S/he doesn't have anyone to talk to about parenting worries
21 S/he thinks it's good for children to speak their minds
181* S/he might allow birth parent(s) to endanger the welfare of the foster child
77 S/he has enough time to take a foster child to lots of doctor appointments, if needed
154 S/he is ready to care for a foster child who might not be as smart as the rest of the family
5 S/he likes trying to figure out why children do things
163 S/he will be comfortable setting rules and guidelines for a child
89 S/he will support the judge's decisions about a foster child's life, even if they don't agree
149 S/he can foster a child who uses bad language, such as dirty words for body parts and sex
109 S/he will make household rules clear to foster children
94 S/he can be a good foster parent to a child who is gay or lesbian
95* S/he will give up fostering if a child's problems don't get better
156 S/he can foster a child who steals

15 Her/his life is organized
113 S/he will consistently stick to limits set for children
118 S/he is able to foster a child who isn't attached to the foster parent
122 S/he can foster a child who has a really bad temper
147 S/he is able to foster a child who isn't affectionate with the foster parent
4 S/he believes that good behavior should be rewarded
29 S/he can live with it if the agency overrules one of their decisions
71 S/he will be able to adjust to frequent changes in workers
54 S/he can foster a child who is always sad and unhappy
40 S/he is used to dealing with lots of people to solve problems
64 S/he thinks it's important for a child to keep a journal or memory book
37 S/he will set rules and guidelines for a foster child
180* S/he might allow the birth parent(s) unapproved access to the foster child
139 S/he can foster a young child who cries all the time
131* S/he can't foster if a worker doesn't return phone calls within 2-3 days
32 Her/his household has regular routines and times to do things during the week
56 When a foster child first comes to live with them, they will place the child's needs above most other family needs
79* S/he doesn't like to change plans once starting to do something
134* S/he can't foster a child who wets the bed every night
144* S/he can't foster a child who has a really low IQ
63 S/he believes that foster children should be encouraged to continue schooling after high school
92 S/he believes that children need regular mealtimes
93 S/he can foster a child who is physically handicapped
30* S/he can't be a good foster parent if a worker is too busy to provide help when needed
117* S/he is not comfortable talking about sex with children
104 She will foster a child long-term if adoption is not possible
150 S/he can foster a child who doesn't respect people's privacy
78 S/he knows that you can use rewards to help change almost any child's bad behavior
52* S/he won't let a foster child visit birth family if past visits haven't gone well
28* S/he won't be able to handle it if a foster child they love has to leave their home
73 S/he believes that children need a regular bedtime
152* Her/his desire to adopt a foster child might interfere with visits with birth family
97* S/he believes that almost all of foster children's behavior problems can be solved through strict discipline
178* S/he is more likely to adhere to the wishes of the birth parent(s) than to the agency's plan
133 S/he can foster a child who is mean or cruel to a lot of people
69 S/he plans to foster for a long time
128 S/he wants children to be independent
121* S/he can't foster a child who has been physically abused
99 Her/his neighbors will accept a foster child living in their home
74* It'll be hard for her/him to care for a child whose religious beliefs differ from their own
75* S/he can't foster a child who doesn't try at all in school
55* S/he can't foster a child who masturbates
9 S/he enjoys reading

129* S/he believes that most of foster children will adjust to a new home within a month or so
53 Everyone in their household has chores and responsibilities
86* Her/his strong attachment to a foster child might make it hard to foster well
145* S/he expects a foster child to share their values, especially after some time has passed
88* S/he is worried about handling several demanding roles at one time
115* Her/his relatives are concerned about the applicant's fostering
119* S/he can't foster if not respected by a worker
49* S/he won't be able to handle it if a child goes home and the family hasn't changed
20* S/he is worried about being able to work well with a foster child's teachers
18* S/he can't foster a child who argues with everything they say
45* S/he will need to know several weeks in advance when a child will be removed from their care
50* S/he won't be able to foster well unless included by the agency in planning a foster child's future

General Potential (GP-W)—174 items (Males)

111 The foster family will change what's needed to care for a foster child
165 S/he is motivated by what is best for the foster child
61 S/he will be good at getting services a foster child might need
171 S/he will work to avoid placement disruption
141 There is a lot of love in their home
84 S/he is able to help a foster child prepare for where they're going to live next
127 S/he is easy to talk to
167 S/he can provide discipline in a respectful way
174 S/he will get the support needed to handle problems that might come up with a foster child
158* S/he is not prepared to begin fostering
106 S/he is very committed to being a foster parent
72 S/he won't put down a foster child's birth parents
91 S/he can help a child handle feelings related to visits with the birth parent(s)
42 S/he will help a foster child feel good about him/herself
110 S/he can foster a child who says mean and hurtful things to them
168 S/he is consistent with children
16 S/he can provide emotional support to a child who has been sexually abused
22 S/he will work hard to help a foster child do the best they can in school
172 S/he will look forward to adopting new traditions a child might bring to the family
25 S/he is good at solving problems, even when they don't know the cause
96 S/he has enough flexibility in their life to deal with a foster child's needs
138 S/he understands that it's very important for a foster child to stay in touch with birth family
58* S/he believes that threatening a foster child with having to leave their home might be the only way to get them to obey
43 S/he will ease a child's fears about going back home to live with birth parents
41 S/he can teach foster children to get along with adults
126 S/he can handle the extra stresses of fostering
59 S/he can easily live with differences in other people
46 S/he will be very involved in raising a foster child
17 S/he will be able to work just fine with a worker of a different race or ethnic group than their own
124* S/he might be mean to a foster child when stressed out
161 S/he will be an active team member in permanency planning
162 S/he will support reunification with birth parent(s), if applicable
67 S/he is able to give affection to a child who might return to live with birth parent(s)
123 S/he can care respectfully for a child with a different ethnic, racial, or cultural background
140 S/he is able to teach foster children to get along with other children
1 S/he can foster a child who has been neglected
169 S/he can focus discipline on behaviors causing the most difficulty for the child and others
23 S/he will help a child get ready for living with another foster family, if needed
101 S/he likes teaching children how to do new things
177 S/he can care for a foster child who acts unappreciative

170* S/he seems somewhat rigid when coping with stress
103 S/he will ask for advice about fostering a child of a different race or ethnicity
76 S/he is committed to keeping a foster child for as long as the child needs
19 S/he is willing to change in order to meet a foster child's needs
57 S/he has time and energy to work with "The System" to get services for a foster child
130* S/he believes that when a foster child refuses to tell what's bothering them there is no point in trying to help them
6 S/he will be able to adjust if fostering isn't what they expected
148 S/he is able to help a child who is trying to be loyal to foster and birth parent(s)
159 S/he handles loss appropriately
164* S/he seems to have a hard time fitting new people into the family
10 S/he is able to handle being a substitute parent
112 S/he can afford some out-of-pocket expenses to care for a foster child
132* The way s/he feels about the birth parent(s) might get in the way of visits with birth family
82 S/he is willing to go to cultural activities with a foster child of a different racial or ethnic background
90* S/he doesn't want too much contact with the worker
105* S/he has a hard time showing affection
143 S/he understands that visits with birth family might be a good idea, even if a foster child is upset afterwards
153 S/he can foster a child who has lots of bad habits
83 S/he will encourage a foster child to do after-school activities
102 S/he is able to think of a couple of things to do to help a foster child feel comfortable when they first come to the foster home
81* S/he is impatient
116 S/he doesn't overreact to problems
44 S/he is willing to ask for help when needed
62 S/he will support foster children's friendships
175* S/he might be unwilling to accept training, agency support, or agency advice
34 S/he can foster a child whose problems don't get better
157 S/he will teach foster children to live on their own when they grow up
26* S/he will have a hard time caring for a child who does not appreciate the care
100 S/he is respectful to people with whom s/he is upset
87 S/he is able to foster a child who rejects the foster parent
173 S/he doesn't have too many family difficulties
85 S/he plans to attend classes on how to care for children with special problems or needs
14 S/he knows how to work respectfully with birth parents of a different race than their own
166 S/he has a lot of energy
17 S/he can foster a child who lies about everything
38* She needs things to go their way most of the time
125* S/he believes that some children need to be spanked to get them to behave
176 S/he can deal with uncertainty about when a foster child might be removed from the family's care
179* S/he lacks objectivity toward the birth parent(s)
114 S/he can change their schedule on short notice

65 S/he will ask for advice about fostering a child of a different social class
70* S/he can't handle being told by the foster care system how to be a parent
120 S/he understands that it can be confusing for a foster child to love both birth and foster family
27* S/he won't be able to handle being blamed for a foster child's problems
47* S/he won't be able to handle it if a foster child accuses the foster parent of sexual abuse
24* S/he doesn't thing they need to go through any more agency training
156 S/he can foster a child who steals
155* S/he would rather foster a child who doesn't have contact with birth parent(s)
137* S/he can't be a good foster parent if not satisfied with the worker
146 S/he can promote a child's spirituality
108 S/he will let a foster child keep gifts and pictures from birth family
109 S/he will make household rules clear to foster children
95* S/he will give up fostering if a child's problems don't get better
136* S/he doesn't know a lot about the age when children begin to do certain things like use a toilet alone and do their homework by themselves
4 S/he believes that good behavior should be rewarded
39 S/he has friends who can help when they are having trouble parenting
60 S/he has family or friends to care for a foster child(ren) if the foster parent is sick
29 S/he can live with it if the agency overrules one of their decisions
21 S/he thinks it's good for children to speak their minds
48* S/he doesn't have the information needed to begin fostering
35 The progress a child makes (even if it's slow) will keep him/her going as a foster parent
31 S/he can help a foster child continue a relationship with birth parent(s)
89 S/he will support the judge's decisions about a foster child's life, even if they don't agree
66 S/he is able to parent effectively without much information about the child's previous life
163 S/he will be comfortable setting rules and guidelines for a child
149 S/he can foster a child who uses bad language, such as dirty words for body parts and sex
80 S/he plans to get advice from other foster parents
154 S/he is ready to care for a foster child who might not be as smart as the rest of the family
33 S/he can be a good foster parent to a young teen who is sexually active
5 S/he likes trying to figure out why children do things
12 It's ok with her/him that the agency doesn't allow spanking
135 S/he is able to work with the state medical care system
94 S/he can be a good foster parent to a child who is gay or lesbian
36 S/he has time to take foster children to counseling
139 S/he can foster a young child who cries all the time
113 S/he will consistently stick to limits set for children
104 She will foster a child long-term if adoption is not possible
122 S/he can foster a child who has a really bad temper
64 S/he thinks it's important for a child to keep a journal or memory book
8 Others believe s/he is good with people

97* S/he believes that almost all of foster children's behavior problems can be solved through strict discipline
150 S/he can foster a child who doesn't respect people's privacy
2 S/he has time to help a child with schoolwork
15 Her/his life is organized
37 S/he will set rules and guidelines for a foster child
142* S/he will need a lot of agency support to foster well
79* S/he doesn't like to change plans once starting to do something
77 S/he has enough time to take a foster child to lots of doctor appointments, if needed
63 S/he believes that foster children should be encouraged to continue schooling after high school
118 S/he is able to foster a child who isn't attached to the foster parent
134* S/he can't foster a child who wets the bed every night
71 S/he will be able to adjust to frequent changes in workers
181* S/he might allow birth parent(s) to endanger the welfare of the foster child
40 S/he is used to dealing with lots of people to solve the problems
131* S/he can't foster if a worker doesn't return phone calls within 2-3 days
69 S/he plans to foster for a long time
7* S/he doesn't have anyone to talk to about parenting worries
11 S/he can handle a foster child going home if they believe the child will be well cared for
78 S/he knows that you can use rewards to help change almost any child's bad behavior
56 When a foster child first comes to live with them, they will place the child's needs about most other family needs
30* S/he can't be a good foster parent if a worker is too busy to provide help when needed
152* Her/his desire to adopt a foster child might interfere with visits with birth family
93 S/he can foster a child who is physically handicapped
32 Her/his household has regular routines and times to do things during the week
54 S/he can foster a child who is always sad and unhappy
99 Her/his neighbors will accept a foster child living in their home
117* S/he is not comfortable talking about sex with children
133 S/he can foster a child who is mean or cruel to a lot of people
73 S/he believes that children need a regular bedtime
144* S/he can't foster a child who has a really low IQ
52* S/he won't let a foster child visit birth family if past visits haven't gone well
74* It'll be hard for her/him to care for a child whose religious beliefs differ from their own
180* S/he might allow the birth parent(s) unapproved access to the foster child
147 S/he is able to foster a child who isn't affectionate with the foster parent
28* S/he won't be able to handle it if a foster child they love has to leave their home
178* S/he is more likely to adhere to the wishes of the birth parent(s) than to the agency's plan
75* S/he can't foster a child who doesn't try at all in school
55* S/he can't foster a child who masturbates
121* S/he can't foster a child who has been physically abused
88* S/he is worried about handling several demanding roles at one time
92 S/he believes that children need regular mealtimes
128 S/he wants children to be independent

9 S/he enjoys reading
53 Everyone in their household has chores and responsibilities
145* S/he expects a foster child to share their values, especially after some time has passed
18* S/he can't foster a child who argues with everything they say
115* Her/his relatives are concerned about the applicant's fostering
86* Her/his strong attachment to a foster child might make it hard to foster well
119* S/he can't foster if not respected by a worker
129* S/he believes that most of foster children will adjust to a new home within a month or so
20* S/he is worried about being able to work well with a foster child's teachers
49* S/he won't be able to handle it if a child goes home and the family hasn't changed
45* S/he will need to know several weeks in advance when a child will be removed from their care
50* S/he won't be able to foster well unless included by the agency in planning a foster child's future

APPENDIX C
Subgroup Subscale Items (females and males)

Coparenting (CP-W) (Females)

191 They have a strong marriage
192 They will back each other up in parenting
190 They are used to solving problems together
193* Their marriage seems troubled
183 They have similar beliefs about how to parent foster children
182 They strongly support one another's fostering efforts
185 They are used to talking things over everyday
189 They agree on how to discipline teenagers
186 Their marriage has been stormy because of the different ways they were raised
184 They have differing views on how to discipline young children
188 They share household responsibilities

Coparenting (CP-W) (Males)

191 They have a strong marriage
192 They will back each other up in parenting
193* Their marriage seems troubled
190 They are used to solving problems together
183 They have similar beliefs about how to parent foster children
182 They strongly support one another's fostering efforts
185 They are used to talking things over everyday
189 They agree on how to discipline teenagers
186 Their marriage has been stormy because of the different ways they were raised
184 They have differing views on how to discipline young children
188 They share household responsibilities

Integrating Foster Children (IFC-W) (Females)

195 Her/his children are able to deal with a foster child with serious problems
200 S/he will treat their birth/adopted children and foster children as equals
201 Her/his children are good at handling loss
196 Her/his children are able to handle foster children coming and going
194 Her/his children want to have a foster brother or sister
202* Her/his children are worried about getting enough attention when foster children move in
199* S/he spanks their children

Integrating Foster Children (IFC-W) (Males)

196 Her/his children are able to deal with a foster child with serious problems
200 S/he will treat their birth/adopted children and foster children as equals
201 Her/his children are good at handling loss
196 Her/his children are able to handle foster children coming and going
194 Her/his children want to have a foster brother or sister
202* Her/his children are worried about getting enough attention when foster children move in
199* S/he spanks their children

Kinship Care (KC-W) (Females)

204 S/he can be a foster parent to this child, as well as a relative
206* S/he would keep information from the agency to protect the birth parent(s)
205 S/he can protect this child from birth parent(s), if needed
207 S/he is ashamed of their family member who might be an unfit parent
209* S/he believes there is too much contact with the birth parent(s) for the placement to work
208* S/he is worried about being sued by the birth parent(s)

Kinship Care (KC-W) (Males)

204 S/he can be a foster parent to this child, as well as a relative
206* S/he would keep information from the agency to protect the birth parent(s)
209* S/he believes there is too much contact with the birth parent(s) for the placement to work
205 S/he can protect this child from birth parent(s), if needed
207 S/he is ashamed of their family member who may be an unfit parent
208* S/he is worried about being sued by the birth parent(s)

APPENDIX D
General Potential (GP-W) – Alternate Form Items (females and males)

General Potential Form A (Females)

127 S/he is easy to talk to
158* S/he is not prepared to begin fostering
10 S/he is able to handle being a substitute parent
57 S/he has time and energy to work with “The System” to get services for a foster child
58* S/he believes that threatening a foster child with having to leave their home might be the only way to get them to obey
25 S/he is good at solving problems, even when they don’t know the cause
1 S/he can foster a child who has been neglected
140 S/he is able to teach foster children to get along with other children
46 S/he will be very involved in raising a foster child
96 S/he has enough flexibility in their life to deal with a foster child’s needs
148 S/he is able to help a child who is trying to be loyal to foster and birth parent(s)
67 S/he is able to give affection to a child who might return to live with birth parent(s)
105* S/he has a hard time showing affection
169 S/he can focus discipline on behaviors causing the most difficulty for the child and others
177 S/he can care for a foster child who acts unappreciative
172 S/he will look forward to adopting new traditions a child might bring to the family
107 S/he will be able to work just fine with a worker of a different ethnic group than their own
175* S/he might be unwilling to accept training, agency support, or agency advice
173 S/he doesn’t have too many family difficulties
153 S/he can foster a child who has lots of bad habits
166 S/he has a lot of energy
34 S/he can foster a child whose problems don’t get better
112 S/he can afford some out-of-pocket expenses to care for a foster child
138 S/he understands that it’s very important for a foster child to stay in touch with birth family
90* S/he doesn’t want too much contact with the worker
101 S/he likes teaching children how to do new things
85 S/he plans to attend classes on how to care for children with special problems or needs
123 S/he can care respectfully for a child with a different ethnic, racial, or cultural background
31 S/he can help a foster child continue a relationship with birth parent(s)
8 Others believe s/he is good with people
36 S/he has time to take foster children to counseling
146 S/he can promote a child’s spirituality
176 S/he can deal with uncertainty about when a foster child might be removed from the family’s care
137* S/he can’t be a good foster parent if not satisfied with the worker
163 S/he will be comfortable setting rules and guidelines for a child
33 S/he can be a good foster parent to a young teen who is sexually active
7* S/he doesn’t have anyone to talk to about parenting worries
89 S/he will support the judge’s decisions about a foster child’s life, even if they don’t agree

80 S/he plans to get advice from other foster parents
21 S/he thinks it's good for children to speak their minds
94 S/he can be a good foster parent to a child who is gay or lesbian
4 S/he believes that good behavior should be rewarded
180* S/he might allow the birth parent(s) unapproved access to the foster child
122 S/he can foster a child with a really bad temper
71 S/he will be able to adjust to frequent changes in workers
64 S/he thinks it's important for a child to keep a journal or memory book
131* S/he can't foster if a worker doesn't return phone calls within 2-3 days
79* S/he doesn't like to change plans once starting to do something
147 S/he is able to foster a child who isn't affectionate with the foster parent
78 S/he knows that you can use rewards to help change almost any child's bad behavior
92 S/he believes that children need regular mealtimes
73 S/he believes that children need a regular bedtime
9 S/he enjoys reading
129* S/he believes that most of foster children will adjust to a new home within a month or so
86* Her/his strong attachment to a foster child might make it hard to foster well
119* S/he can't foster if not respected by a worker
55* S/he can't foster a child who masturbates
50* S/he won't be able to foster well unless included by the agency in planning a foster child's future

General Potential Form A (Males)

127 S/he is easy to talk to
158* S/he is not prepared to begin fostering
25 S/he is good at solving problems, even when they don't know the cause
172 S/he will look forward to adopting new traditions a child might bring to the family
96 S/he has enough flexibility in their life to deal with a foster child's needs
46 S/he will be very involved in raising a foster child
123 S/he can care respectfully for a child with a different ethnic, racial, or cultural background
138 S/he understands that it's very important for a foster child to stay in touch with birth family
101 S/he likes teaching children how to do new things
140 S/he is able to teach foster children to get along with other children
107 S/he will be able to work just fine with a worker of a different ethnic group than their own
58* S/he believes that threatening a foster child with having to leave their home might be the only way to get them to obey
1 S/he can foster a child who has been neglected
169 S/he can focus discipline on behaviors causing the most difficulty for the child and others
67 S/he is able to give affection to a child who might return to live with birth parent(s)
112 S/he can afford some out-of-pocket expenses to care for a foster child
57 S/he has time and energy to work with "The System" to get services for a foster child
148 S/he is able to help a child who is trying to be loyal to foster and birth parent(s)
10 S/he is able to handle being a substitute parent
177 S/he can care for a foster child who acts unappreciative
90* S/he doesn't want too much contact with the worker
105* S/he has a hard time showing affection
175* S/he might be unwilling to accept training, agency support, or agency advice
153 S/he can foster a child who has lots of bad habits
85 S/he plans to attend classes on how to care for children with special problems or needs
173 S/he doesn't have too many family difficulties
166 S/he has a lot of energy
34 S/he can foster a child whose problems don't get better
176 S/he can deal with uncertainty about when a foster child might be removed from the family's care
4 S/he believes that good behavior should be rewarded
146 S/he can promote a child's spirituality
137* S/he can't be a good foster parent if not satisfied with the worker
163 S/he will be comfortable setting rules and guidelines for a child
21 S/he thinks it's good for children to speak their minds
33 S/he can be a good foster parent to a young teen who is sexually active
89 S/he will support the judge's decisions about a foster child's life, even if they don't agree
31 S/he can help a foster child continue a relationship with birth parent(s)
80 S/he plans to get advice from other foster parents

64 S/he thinks it's important for a child to keep a journal or memory book
36 S/he has time to take foster children to counseling
94 S/he can be a good foster parent to a child who is gay or lesbian
8 Others believe s/he is good with people
122 S/he can foster a child with a really bad temper
131* S/he can't foster if a worker doesn't return phone calls within 2-3 days
79* S/he doesn't like to change plans once starting to do something
71 S/he will be able to adjust to frequent changes in workers
7* S/he doesn't have anyone to talk to about parenting worries
78 S/he knows that you can use rewards to help change almost any child's bad behavior
180* S/he might allow the birth parent(s) unapproved access to the foster child
73 S/he believes that children need a regular bedtime
147 S/he is able to foster a child who isn't affectionate with the foster parent
55* S/he can't foster a child who masturbates
9 S/he enjoys reading
92 S/he believes that children need regular mealtimes
86* Her/his strong attachment to a foster child might make it hard to foster well
129* S/he believes that most of foster children will adjust to a new home within a month or so
119* S/he can't foster if not respected by a worker
50* S/he won't be able to foster well unless included by the agency in planning a foster child's future

General Potential Form B (Females)

165 S/he is motivated by what is best for the foster child
167 S/he can provided discipline in a respectful way
72 S/he won't put down a foster child's birth parents
91 S/he can help a child handle feelings related to visits with the birth parent(s)
141 There is a lot of love in their home
161 S/he will be an active team member in permanency planning
171 S/he will work to avoid placement disruption
61 S/he will be good at getting services a foster child might need
43 S/he will ease a child's fears about going back home to live with birth parents
41 S/he can teach foster children to get along with adults
23 S/he will help a child get ready for living with another foster family, if needed
19 S/he is willing to change in order to meet a foster child's needs
16 S/he can provide emotional support to a child who has been sexually abused
106 S/he is very committed to being a foster parent
170 S/he seems somewhat rigid when coping with stress
27* S/he won't be able to handle being blamed for a foster child's problems
100 S/he is respectful to people with whom s/he is upset
38* She needs things to go their way most of the time
159 S/he handles loss appropriately
179* S/he lacks objectivity toward the birth parent(s)
60 S/he has family or friends to care for a foster child(ren) if the foster parent is sick
17 S/he can foster a child who lies about everything
14 S/he knows how to work respectfully with birth parents of a different race than their own
143 S/he understands that visits with birth family might be a good idea, even if a foster child is upset afterwards
11 S/he can handle a foster child going home if they believe the child will be well cared for
24* S/he doesn't think they need to go through any more agency training
136* S/he doesn't know a lot about the age when children begin to do certain things like use a toilet alone and do their homework by themselves
142* S/he will need a lot of agency support to foster well
2 S/he has time to help a child with schoolwork
66 S/he is able to parent effectively without much information about the child's previous life
47* S/he won't be able to handle it if a foster child accuses the foster parent of sexual abuse
77 S/he has enough time to take a foster child to lots of doctor appointments, if needed
82 S/he is willing to go to cultural activities with a foster child of a different racial or ethnic background
181* S/he might allow birth parent(s) to endanger the welfare of the foster child
157 S/he will teach foster children to live on their own when they grow up
118 S/he is able to foster a child who isn't attached to the foster parent
29 S/he can live with it if the agency overrules one of their decisions
54 S/he can foster a child who is always sad and unhappy
144* S/he can't foster a child who has a really low IQ

40 S/he is used to dealing with lots of people to solve problems
139 S/he can foster a young child who cries all the time
37 S/he will set rules and guidelines for a foster child
28* S/he won't be able to handle it if a foster child they love has to leave their home
56 When a foster child first comes to live with them, they will place the child's needs about most other family needs
97* S/he believes that almost all of foster children's behavior problems can be solved through strict discipline
104 She will foster a child long-term if adoption is not possible
152* Her/his desire to adopt a foster child might interfere with visits with birth family
69 S/he plans to foster for a long time
133 S/he can foster a child who is mean or cruel to a lot of people
178* S/he is more likely to adhere to the wishes of the birth parent(s) than to the agency's plan
121* S/he can't foster a child who has been physically abused
75* S/he can't foster a child who doesn't try at all in school
128 S/he wants children to be independent
74* It'll be hard for her/him to care for a child whose religious beliefs differ from their own
88* S/he is worried about handling several demanding roles at one time
53 Everyone in their household has chores and responsibilities
49* S/he won't be able to handle it if a child goes home and the family hasn't changed
20* S/he is worried about being able to work well with a foster child's teachers

General Potential Form B (Males)

165 S/he is motivated by what is best for the foster child
171 S/he will work to avoid placement disruption
61 S/he will be good at getting services a foster child might need
141 There is a lot of love in their home
167 S/he can provide discipline in a respectful way
106 S/he is very committed to being a foster parent
72 S/he won't put down a foster child's birth parents
91 S/he can help a child handle feelings related to visits with the birth parent(s)
16 S/he can provide emotional support to a child who has been sexually abused
43 S/he will ease a child's fears about going back home to live with birth parents
23 S/he will help a child get ready for living with another foster family, if needed
41 S/he can teach foster children to get along with adults
19 S/he is willing to change in order to meet a foster child's needs
170 S/he seems somewhat rigid when coping with stress
161 S/he will be an active team member in permanency planning
159 S/he handles loss appropriately
143 S/he understands that visits with birth family might be a good idea, even if a foster child is upset afterwards
82 S/he is willing to go to cultural activities with a foster child of a different racial or ethnic background
100 S/he is respectful to people with whom s/he is upset
38* She needs things to go their way most of the time
17 S/he can foster a child who lies about everything
14 S/he knows how to work respectfully with birth parents of a different race than their own
157 S/he will teach foster children to live on their own when they grow up
27* S/he won't be able to handle being blamed for a foster child's problems
47* S/he won't be able to handle it if a foster child accuses the foster parent of sexual abuse
24* S/he doesn't think they need to go through any more agency training
179* S/he lacks objectivity toward the birth parent(s)
29 S/he can live with it if the agency overrules one of their decisions
60 S/he has family or friends to care for a foster child(ren) if the foster parent is sick
136* S/he doesn't know a lot about the age when children begin to do certain things like use a toilet alone and do their homework by themselves
66 S/he is able to parent effectively without much information about the child's previous life
139 S/he can foster a young child who cries all the time
104 She will foster a child long-term if adoption is not possible
97* S/he believes that almost all of foster children's behavior problems can be solved through strict discipline
2 S/he has time to help a child with schoolwork
77 S/he has enough time to take a foster child to lots of doctor appointments, if needed
142* S/he will need a lot of agency support to foster well
118 S/he is able to foster a child who isn't attached to the foster parent
40 S/he is used to dealing with lots of people to solve problems

37 S/he will set rules and guidelines for a foster child
181* S/he might allow birth parent(s) to endanger the welfare of the foster child
69 S/he plans to foster for a long time
11 S/he can handle a foster child going home if they believe the child will be well cared for
152* Her/his desire to adopt a foster child might interfere with visits with birth family
56 When a foster child first comes to live with them, they will place the child's needs about most other family needs
54 S/he can foster a child who is always sad and unhappy
133 S/he can foster a child who is mean or cruel to a lot of people
144* S/he can't foster a child who has a really low IQ
74* It'll be hard for her/him to care for a child whose religious beliefs differ from their own
28* S/he won't be able to handle it if a foster child they love has to leave their home
75* S/he can't foster a child who doesn't try at all in school
121* S/he can't foster a child who has been physically abused
178* S/he is more likely to adhere to the wishes of the birth parent(s) than to the agency's plan
88* S/he is worried about handling several demanding roles at one time
128 S/he wants children to be independent
53 Everyone in their household has chores and responsibilities
49* S/he won't be able to handle it if a child goes home and the family hasn't changed
20* S/he is worried about being able to work well with a foster child's teachers

General Potential Form C (Females)

42 S/he will help a foster child feel good about him/herself
126 S/he can handle the extra stresses of fostering
111 The foster family will change what's needed to care for a foster child
124* S/he might be mean to a foster child when stressed out
84 S/he is able to help a foster child prepare for where they're going to live next
174 S/he will get the support needed to handle problems that might come up with a foster child
6 S/he will be able to adjust if fostering isn't what they expected
168 S/he is consistent with children
59 S/he can easily live with differences in other people
76 S/he is committed to keeping a foster child for as long as the child needs
162 S/he will support reunification with birth parent(s), if applicable
130* S/he believes that when a foster child refuses to tell what's bothering them there is no point in trying to help them
62 S/he will support foster children's friendships
132* The way s/he feels about the birth parent(s) might get in the way of visits with birth family
26* S/he will have a hard time caring for a child who does not appreciate the care
164* S/he seems to have a hard time fitting new people into the family
110 S/he can foster a child who says mean and hurtful things to them
44 S/he is willing to ask for help when needed
81* S/he is impatient
103 S/he will ask for advice about fostering a child of a different race or ethnicity
116 S/he doesn't overreact to problems
102 S/he is able to think of a couple of things to do to help a foster child feel comfortable when they first come to the foster home
22 S/he will work hard to help a foster child do the best they can in school
125* S/he believes that some children need to be spanked to get them to behave
35 The progress a child makes (even if it's slow) will keep him/her going as a foster parent
108 S/he will let a foster child keep gifts and pictures from birth family
12 It's ok with her/him that the agency doesn't allow spanking
83 S/he will encourage a foster child to do after-school activities
114 S/he can change their schedule on short notice
120 S/he understands that it can be confusing for a foster child to love both birth and foster family
87 S/he is able to foster a child who rejects the foster parent
39 S/he has friends who can help when they are having trouble parenting
65 S/he will ask for advice about fostering a child of a different social class
5 S/he likes trying to figure out why children do things
135 S/he is able to work with the state medical care system
70* S/he can't handle being told by the foster care system how to be a parent
48* S/he doesn't have the information needed to begin fostering
155* S/he would rather foster a child who doesn't have contact with birth parent(s)
154 S/he is ready to care for a foster child who might not be as smart as the rest of the family

95* S/he will give up fostering if a child's problems don't get better
149 S/he can foster a child who uses bad language, such as dirty words for body parts and sex
15 Her/his life is organized
113 S/he will consistently stick to limits set for children
109 S/he will make household rules clear to foster children
156 S/he can foster a child who steals
63 S/he believes that foster children should be encouraged to continue schooling after high school
32 Her/his household has regular routines and times to do things during the week
117* S/he is not comfortable talking about sex with children
134* S/he can't foster a child who wets the bed every night
30* S/he can't be a good foster parent if a worker is too busy to provide help when needed
150 S/he can foster a child who doesn't respect people's privacy
93 S/he can foster a child who is physically handicapped
52* S/he won't let a foster child visit birth family if past visits haven't gone well
99 Her/his neighbors will accept a foster child living in their home
115* Her/his relatives are concerned about the applicant's fostering
145* S/he expects a foster child to share their values, especially after some time has passed
18* S/he can't foster a child who argues with everything they say
45* S/he will need to know several weeks in advance when a child will be removed from their care

General Potential Form C (Males)

111 The foster family will change what's needed to care for a foster child
84 S/he is able to help a foster child prepare for where they're going to live next
174 S/he will get the support needed to handle problems that might come up with a foster child
42 S/he will help a foster child feel good about him/herself
110 S/he can foster a child who says mean and hurtful things to them
168 S/he is consistent with children
22 S/he will work hard to help a foster child do the best they can in school
126 S/he can handle the extra stresses of fostering
124* S/he might be mean to a foster child when stressed out
59 S/he can easily live with differences in other people
76 S/he is committed to keeping a foster child for as long as the child needs
162 S/he will support reunification with birth parent(s), if applicable
164* S/he seems to have a hard time fitting new people into the family
103 S/he will ask for advice about fostering a child of a different race or ethnicity
130* S/he believes that when a foster child refuses to tell what's bothering them there is no point in trying to help them
132* The way s/he feels about the birth parent(s) might get in the way of visits with birth family
83 S/he will encourage a foster child to do after-school activities
102 S/he is able to think of a couple of things to do to help a foster child feel comfortable when they first come to the foster home
6 S/he will be able to adjust if fostering isn't what they expected
81* S/he is impatient
116 S/he doesn't overreact to problems
62 S/he will support foster children's friendships
44 S/he is willing to ask for help when needed
26* S/he will have a hard time caring for a child who does not appreciate the care
125* S/he believes that some children need to be spanked to get them to behave
87 S/he is able to foster a child who rejects the foster parent
120 S/he understands that it can be confusing for a foster child to love both birth and foster family
109 S/he will make household rules clear to foster children
95* S/he will give up fostering if a child's problems don't get better
108 S/he will let a foster child keep gifts and pictures from birth family
156 S/he can foster a child who steals
65 S/he will ask for advice about fostering a child of a different social class
155* S/he would rather foster a child who doesn't have contact with birth parent(s)
70* S/he can't handle being told by the foster care system how to be a parent
114 S/he can change their schedule on short notice
35 The progress a child makes (even if it's slow) will keep him/her going as a foster parent
48* S/he doesn't have the information needed to begin fostering
39 S/he has friends who can help when they are having trouble parenting
154 S/he is ready to care for a foster child who might not be as smart as the rest of the family

149 S/he can foster a child who uses bad language, such as dirty words for body parts and sex
12 It's ok with her/him that the agency doesn't allow spanking
135 S/he is able to work with the state medical care system
5 S/he likes trying to figure out why children do things
113 S/he will consistently stick to limits set for children
150 S/he can foster a child who doesn't respect people's privacy
15 Her/his life is organized
63 S/he believes that foster children should be encouraged to continue schooling after high school
134* S/he can't foster a child who wets the bed every night
32 Her/his household has regular routines and times to do things during the week
93 S/he can foster a child who is physically handicapped
30* S/he can't be a good foster parent if a worker is too busy to provide help when needed
99 Her/his neighbors will accept a foster child living in their home
117* S/he is not comfortable talking about sex with children
52* S/he won't let a foster child visit birth family if past visits haven't gone well
145* S/he expects a foster child to share their values, especially after some time has passed
115* Her/his relatives are concerned about the applicant's fostering
18* S/he can't foster a child who argues with everything they say
45* S/he will need to know several weeks in advance when a child will be removed from their care

Vita

Gary S. Cuddeback graduated from Furman University in Greenville, South Carolina in 1991 with a Bachelor's degree in Psychology. He received a Master's degree in Social Work from the University of South Florida in Tampa, Florida in 1997 and received a Master's degree in Public Health with a concentration in maternal and child health from the University of South Florida in 1998. Gary is currently pursing his doctorate in social work with a minor in statistics at the University of Tennessee in Knoxville, TN. He is currently employed as a research associate at the Cecil G. Sheps Center for Health Services Research at the University of North Carolina at Chapel Hill.