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Characteristics of Foster Parents Willing to Care for Sexual Minority Youth

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To the Graduate Council:

I am submitting herewith a dissertation written by Justin Douglas Bucchio entitled "Characteristics of Foster Parents Willing to Care for Sexual Minority Youth." 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.

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Characteristics of Foster Parents Willing to Care for Sexual Minority Youth

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Degree

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Justin Douglas Bucchio

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DEDICATION

I would like to dedicate this dissertation to those who have never given up on me. You know who you are. To my family, thank you for showing me the power of loyalty and the unwavering ability to forgive. I love you. To my Lao family. Without your generosity and belief in me I would never have made it this far. Koy huck jao! To my friends, my second family. Without your continued support, love, and meaningful distractions who knows where I'd be. To Rocco, who always made me smile when I was close to breaking down. You're the best dog in the world! And last, but not least, to the love of my life. While we have been through it all and it sometimes seems impossible, I will always love you- always. Your support over the course of this doctoral process couldn't be matched and the love you have provided has inspired me to never give up on myself. Thank you schnookems!

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To my brother Jason, I miss you and wish you could be here to experience this immense accomplishment. I know, however, that you are very proud of your little brother. I love you. To my younger sisters, Jessica and Faith, for always making me laugh and keeping me on my toes. Mary, thanks for always centering me and keeping your little brother optimistic. To my parents, thank you for adopting me and providing me with opportunities for a better life.

Lastly, I would like to acknowledge the youth discussed in this dissertation. Throughout this process I have been reminded many times of how lucky I was to be given a second chance at life. I want these youth, and all youth in foster care, to realize that anything is possible, look at me! Find yourself, love yourself, and better yourself. "We're not victims of our past; we're creators of our future" – Buddhist quote.

ABSTRACT

Sexual minority foster youth living in out-of-home care are in need of enhanced services to promote successful development. Scholars have focused on providing insight into the lives of these youth as well as effective treatment approaches. None have focused on the willingness of the providers of their care. This nationwide non-probability cross-sectional study assessed foster mothers' ($N = 304$) willingness to care for sexual minority youth, using secondary data analysis.

Willingness was assessed using the Willingness to Foster Scale (WFS), which identifies four levels of willingness ranging from not willing at all to willing without any extra help or support. The level of willingness was assessed across multiple variables that identified specific characteristics of the participants. Resource theory is used to provide a conceptual framework suggesting that those with greater resources are more likely to help those in need. From this perspective, this study refers to resources in terms of the characteristics identified by the included foster mothers.

It was hypothesized that foster mothers with greater resources would be more willing to care for sexual minorities. It was also hypothesized that participants who are more actively involved with religious activities would be less willing to care for sexual minorities.

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CHAPTER I: INTRODUCTION AND LITERATURE REVIEW

With nearly half a million American youth in foster care needing attention, care, and placements, a major challenge for years has been establishing enough providers and placements to effectively serve them (Adoption and Foster Care Analysis and Reporting System Report [AFCARS, 2011]; Cox, Beuhler & Orme, 2002). There are added challenges finding providers willing to care for children with specialized needs. This issue is particularly prevalent for sexual minority youth in need of out-of-home care. Literature regarding the characteristics of foster parents willing to take in sexual minority youth is non-existent. Identifying suitable placements for this group should be a critical issue receiving more attention.

In order to effectively meet the needs of sexual minority foster youth, information about foster parents willing to accept these children must be explored to facilitate appropriate placements. Currently when these youth are identified, the search for adequate placement is extremely difficult and the availability of fitting places is especially limited. Knowing typical characteristics of foster parents willing to care for these youth would make targeting prospective placements easier and likely more successful. Most importantly, having this understanding would benefit these youth. Identifying willingness characteristics could likely decrease placement disruptions while increasing the esteem, stability, and overall developmental well being of sexual minority youth in out-of-home care.

Literature Review Strategy

A critical literature review was conducted to identify what is known about sexual minority foster youth and willingness of foster parents. Additionally, developmental

issues of this population and general components of foster care, particularly special needs placements, were reviewed. In order to systematically identify the most applicable literature, select databases were used based upon appropriateness. These databases included: Social Sciences Abstracts, Social Work Abstracts, PsychINFO, ERIC, Web of Science, PubMed, Social Science Research Network, Google Scholar, and OVID.

Since the available literature concerning this specific topic is virtually non-existent, it was important to investigate studies generally related to provide a comprehensive and detailed account of what *is* known. Studies associated with different aspects of sexual minority foster youth as well as willingness characteristics of foster parents that were identified were immediately included in the literature search based upon availability. Additionally, studies that related to different components important to this issue were thoroughly searched and assessed. In order to detect these relevant and inclusive studies, specific tactics were used.

With each of the identified databases the following words were used in different combinations to sieve through the results: gay; LGBT; sexual minority; youth; adolescents; adolescence; teenagers; teens; foster care; out-of-home care; residential care; development; abnormal; successful; unsuccessful; willingness; foster parent(s); provider; parent; care; raise; caregiver. These words were also used in multiple sequences to hone in on the most appropriate studies. To be included, studies relating to foster youth/adolescents, foster parents, and or foster care were initially considered. Studies unrelated to foster care or these specific people within the system were immediately

excluded. Based upon this initial consideration, studies directly linked to the following were used:

- sexual minority foster youth

- the identity development of foster youth and sexual minority foster youth

- successful and or unsuccessful foster care placements

- willingness of foster parents to care for hard to place youth

- foster parents caring for and or experienced in caring for hard to place youth

The following sections are built upon the identified, pertinent literature.

Review of the Literature

Who are sexual minorities? Various terms are used to identify non-heterosexually oriented individuals. From homosexual, which strictly describes individuals attracted to members of the same sex, to various acronyms such as LGBT (lesbian, gay, bisexual, transgender), multiple attempts have been made to appropriately and respectfully identify non-heterosexuals. So, which term is best to use?

Politically, "sexual minority" has become an acceptable term similar to the use of ethnic or racial minority (Rivers, 2000; Goodenow, Szalacha, & Westheimer, 2006; Elze, 2007; Walls, Kane, & Wisneski, 2010). Much of the current literature uses sexual minority since it is not pejorative or implicit of preference, pathology, or an alternative lifestyle (Young & Meyer, 2005). Statistically, this term is inclusive of all who do not fit the heterosexual majority. There are numerous variations of sexual identity and in order to be considerate, sexual minority is the best term to capture all of these. Additionally, in alignment with the National Association of Social Workers' (NASW) Code of Ethics

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values and principles such as: respect, cultural competence and social diversity, and discrimination, this term adequately adheres to these specifications (NASW, 2008).

In this study, "sexual minority" will be used while referring to those who do not self-identify as being heterosexual. Sexual minority, for the purposes of this study, will strictly include those who are lesbian, gay, bisexual, or transgendered (LGBT). While there are other forms of non-heterosexism, this paper will focus on the LGBT populations since most of the literature only includes these orientations. Furthermore, it should be noted that the available literature concerning the transgender population is extremely limited and the literature on sexual minorities has typically been geared toward those who identify as LGB.

Foster Care

Overview of foster care in the United States. Foster care in the United States is intended to provide youth who cannot remain in their homes of origin a safe and stable developmental environment (Morrison Dore & Mullin, 2006). The Adoption and Safe Families Act of 1997 describes foster care as a short-term service intended to facilitate the reunification of children with their families when appropriate. In cases where reunification is not possible, expedited adoptions and/or independent living services are expected (United States Department of Health and Human Services Administration of Children and Families [DHHS], 2011).

The foster care system provides treatment services designed to alleviate the problems children experience in foster care (Maluccio, Pine, & Tracy, 2002). These services and their availability are dependent upon the placement's location. Individual

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states have discretion concerning provision of services, such as money disbursement; but federal legislation must be followed by all. Legislative initiatives such as The Adoption and Safe Families Act of 1997 have increased the urgency to provide permanent care for foster children (Pecora, Kessler, Williams, Downs, English, White, & O'Brien, 2010). In some instances, children are placed based upon availability without considering the child's individual needs (Mallon, 1998).

Foster parents. Foster parents are defined as people who care for children that are not in their legal custody and who have demonstrated the ability to nurture and provide safety during the children's stay in their homes (National Foster Parent Association [NFPA], 2011) Across states, the process of becoming a foster parent varies; however, standardized requirements exist. These requirements include the following: background checks; training; proof of familial stability; home inspections; interviews; references; and meeting the minimum age requirement of 21. Some states require foster parents to become licensed, while others only require approval of the home for the intake of children. Individuals as well as couples who are employed and have stable housing are eligible to become foster parents. Foster care providers are able to select certain characteristics, such as age and gender, of the children coming into their care. Some of the common support services that foster parents receive include respite care, monthly payments, crisis support services, Medicaid coverage for the child, and training opportunities. Most foster care placements have similar ways of functioning, however there are differences in service delivery based upon the specific type of placement.

Placements. In 2010, more than 400,000 youth were in foster care. Nearly half (48%) of these youth were living in non-relative family placements (DHHS, 2011). Providers who are trained, licensed and/or certified foster parents operate these placements. Some providers undergo training for what is known as treatment foster care, whereby they can care for youth with special behavioral or health care needs. Another type of placement focusing on family is kinship care. During the initial stages following a child's removal from the birth family's home, kinship care is given priority in attempting to maintain birth-family relations. In 2010, 26% of all youth in out-of-home care were living with kin (Geen, 2004; DHHS, 2011).

The child welfare system also uses types of placement that do not revolve around a familial treatment approach. Those types include residential care, Another Planned Permanent Living Arrangement (APPLA), and Long-Term Foster Care (LTFC). Residential care is often designated for those needing specialized services that cannot be provided within a family-type placement. These placements include group homes and other treatment-type facilities for youth with serious mental health issues requiring advanced methods of safety assurance. Often times residential, as well as APPLA and LTFC, placements are designated for youth who do not have a goal of family reunification or an alternative permanency placement.

Various factors are considered when determining which placement would be best for a foster child. Caseworkers consider the child's needs and skills, the abilities of available foster parents to serve the child, and the child's likelihood of a permanent placement within a foster family. While these factors are taken into account, the primary

focus is permanency (DHHS, 2011). Permanency and stability are key factors in the decision-making process and are often indicative of a successful placement (Casey Family Programs, 2012).

Successful Foster Care Placements

What is a successful foster care placement? To consider a foster care placement successful, a variety of components are considered. These facets encompass care that provides the attainment of children's needs (psychological, emotional, health, social, physical) in a familial environment that is safe and supportive (Buehler, Rhodes, Orme, and Cuddeback, 2006). Permanency within the child-welfare system usually refers to returning the foster child home as soon as possible or to finding an alternative placement to provide stable and continuous care (DHHS, 2011). Buehler et al. (2006) explain how stability in placements are often correlated with placement success, and furthermore express how within successful placements foster families are able to handle the challenges associated with care and providing services without psychologically damaging members of the family or related relationships.

Competency domains. According to Buehler, et al. (2006) to increase the likelihood of successful placement, specific competencies should be expected in providing foster care services. Based on principles identified by the Child Welfare League of America (CWLA) in 1995, the National Commission on Family Foster Care (NCFFC) in 1991, and the Casey Family Programs (CFP) in 1997 the competency domains are described below:

The potential to foster successfully starts with developing and supporting competency in 12 domains: providing a safe and secure environment, providing a nurturing environment, promoting educational attainment and success, meeting physical and mental healthcare needs, promoting social and emotional development, supporting diversity and children's cultural needs, supporting permanency planning, managing ambiguity and loss for the foster child and family, growing as a foster parent, managing the demands of fostering on personal and familial well-being, supporting relationships between children and their families, and working as a team member. (Buehler et al., 2006, p. 523)

Aligning with other proponents of stability in foster care placements, these competencies clearly depict the importance of stability and permanency planning in facilitating successful placements.

Benefits of stable placements. Pecora, Kessler, Downs, English, White, and Heeringa (2007), explain how placement stability can do each of the following in order to maximize the potential of a successful placement:

1. Minimize child pain and trauma

2. Lessen child attachment, behavior and mental health disorders

3. Decrease school changes and increase academic achievement

4. Maximize continuity in services, decrease foster parent stress, and lower program costs

5. Increase the likelihood that a child will establish an enduring positive relationship with a caring adult (pp. 3-5).

Factors Related to Successful and Unsuccessful Placements

  Foster Parents' Perspectives. Prior to the early 2000's, minimal research existed regarding "the personal, parental, and familial strengths, skills, and possible deficiencies that foster parents and families bring to the fostering experience" (Buehler, Cox, & Cuddeback, 2003, p. 62). In 2003, Buehler et al. investigated 22 caregivers' views of successful family fostering. Prior to being stratified by race and marital status, participants were randomly selected from a list of foster parents that participated in a separate study. Eight of the participants were European-American wed fathers. The majority of participants ($n = 14$) were mothers; 2 were African-American and 12 European American. In this study conducted in the Southeastern United States, the median number of children fostered was 3. Participants were asked 11 questions regarding their views on what constitutes successful fostering. Multiple researchers reviewed, coded, and placed the responses into one of four groups: rewards, stressors, familial factors associated with successful fostering, and familial factors associated with unsuccessful fostering. For the purposes of this paper, only the findings associated with the familial factors and successful fostering group will be presented.

  The most common response was associated with having a deep concern and love for children (86.4%). Many of the participants ($n = 18$) stated that being tolerant and open to the foster children's differences influenced the placement's success. Half-of the participants ($n = 11$) believed that being organized, able to help children with emotionally related issues, and having fewer responsibilities outside of fostering were connected to successful fostering outcomes. Having the support of a religious organization and strong

faith-based values was a common response ($n = 18$) in this study; such support was also found to be influential in a separate study focusing on kinship placements (Coakley, Cuddeback, Buehler, & Cox, 2007).

Buehler et al. (2003) provided insight into what foster parents perceived as important factors associated with successful fostering. This new approach to the concept of successful placements broadened the scope of research to include familial and interpersonal approaches (Buehler et al., 2003). Similar studies followed.

Brown (2008) identified traits of successful foster care placements based upon responses from a group of licensed foster parents. The following traits were identified: information about the child coming into care; the care provider's skills, knowledge and abilities; accessibility to services; knowledge of the foster care system and the agency; respite and self-care methods; and community involvement (Brown, 2008). These descriptors were identified using concept mapping that the 63 foster parent participants generated. These foster parents were associated with a nonprofit organization serving foster families and learned of the study through a newspaper ad. Phone numbers of those interested were randomized prior to data collection. Each participant was asked two open-ended questions; however, the responses to only one question are included in this study: "What is needed for a successful placement?" More than half ($n = 43$) of these participants were females dwelling in urban settings and averaging 8 years of foster care experience ($SD = 7.5$) with a mean number of 18.1 foster children ($SD = 4.9$). The researchers gathered 221 responses and grouped them based on redundancy. Twenty participants were interested in grouping responses and creating the concept map, which

was constructed individually prior to being compiled into a single map. The researcher and his assistants identified 8 finalized statements, which were mostly consistent with the available literature concerning successful placement outcomes based on foster parents' perspectives. However, the following newfound needs were identified: consistency and clarity of foster parents' with children as well as within the associated agency and foster care system. Also emerging from the results was an identified need for a support-type group consisting of other foster parents and children (Brown, 2008).

Many of this study's findings were reflective of the foster care literature. Participants in both this study as well as Cole's (2005) believed that a desire to make a difference in the community increases the likelihood of a successful placement. Brown and Calder (2000) and Sinclair and Wilson (2003) discovered the degree of foster parents' focus toward the child's needs as well as self-care practices as being influential in placement success (Brown, Moraes, & Mayhew, 2005). The need for continuous support from the foster agency and system throughout the entire fostering process has been identified in multiple studies (Coakley et al., 2007; Brown & Bednar, 2006; Chamberlain & Smith, 2005). Another factor that the foster parents in Brown's sample identified as important in the success of a foster care placement involves financial resources and support. This is consistent with other studies that look at foster family placement success, but not necessarily foster parent success (Orme, Buehler, Rhodes, Cox, McSturdy, & Cuddeback, 2006; Gibbs, 2005; Rhodes, et al., 2003). As in other studies, financial means, independent of aid from agencies, were discovered to influence

whether or not a foster family would consider continuing to foster. This financial factor

has been found to impact placement stability (Brown, 2008).

Buehler et. al. (2003) also explored what foster parents (*N* = 22) perceived to be

reasons for unsuccessful placements. Many of the participants (31.8%) stated that

fostering for the "wrong reasons," including not being child-focused, was a major

contributor to placement disruptions. Five of these foster families (22.7%) expressed their

concerns about having too many responsibilities outside of fostering, which could

enhance the likelihood of unsuccessful placement. Not having enough support was a

concern that 18.3% of these participants noted. Just over 13.5% of these families believed

that the following contributed to a placement's failure: worrying excessively about the

effects on birth children, having attachment issues when a child leaves, practicing or

believing in unlawful punishment practices, being unable to handle the child's emotional

issues, and being inflexible.

Child characteristics. In addition to foster parents' perceptions, foster children's

individual characteristics have been influential in determining if a placement will be

successful. Sinclair and Wilson's (2003) cross-sectional sample of social workers and

foster caregivers identified the characteristics of 472 foster children. Two questionnaires

were used, one for foster children and the other for caregivers and social workers. The

children provided open-ended responses concerning "what is important in foster care."

Caregivers and social workers were asked to identify reasons associated with successful

placements. Three characteristics of foster children influencing placement outcomes were

identified: motivation (desire to stay/leave placement); pro-social score (5 questions rated

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by foster care providers concerning a child's sociability with others in the placement);

and difficulty (Sinclair & Wilson, 2003). Additionally, foster parents' parental traits were

also assessed in an attempt to predict a successful placement. Parental scores were

created by identifying specific traits, which the child's social worker rated.

Results were found using backwards-logistic regression, causing scores to become

statistically significant through variable reduction techniques (Sinclair & Wilson, 2003).

Successful placement was partially predicted by a low difficulty score ($p < .001$) and the

child's motivation to stay in a placement ($p < .001$). A high pro-social score was found to

be a significant predictor ($p < .019$) when tested alone; but when combined with foster

parent commitment, it was not found to be a significant predictor of an increased

likelihood of placement success. However, with this combination a significantly

decreased likelihood of placement disruption ($p = .042$) was found.

Oosterman et al. (2007) conducted a meta-analysis of 26 studies covering 45

years and involving 20,650 children in foster families. These researchers investigated

unsuccessful foster placements' possible causes, including behavior, experience in

residential care and previous placements, kinship care, and quality of care. When testing

for the relationship between age and placement breakdown, studies (n=15) revealed a

significant, yet small effect size. For children placed in foster care settings at older ages

(n= 13,564) unsuccessful placements were experienced at a higher rate than those placed

at younger ages (Oosterman et al., 2007).

Concerning placement history, the findings suggested that children who were first

placed in a residential institution (n=1397) were at greater risk for unsuccessful

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placements with foster parents (Oosterman et al., 2007). The longer a child is in the foster care system, the more likely the child is to have problems with the placement, and the quicker these problems tend to occur. Findings showed that behavioral problems correlate with disruption in services.

Resources, lack of interest and retention. Successful foster care placements have been linked to specific resources available to foster parents and children (Oosterman, Schuengel, Slot, Bullens, & Doreleijers, 2007; Kalland & Sinkkonen, 2001). Support systems outside the foster home and specialized foster parent training have been linked to an increased likelihood of successful placement (Kalland & Sinkkonen, 2001). Having professional support such as therapy increases the likelihood of placement success (Kalland & Sinkkonen, 2001).

Kalland and Sinkkonen (2001) sampled 234 family foster care placements to determine reasons associated with placement breakdowns. This retrospective study questioned social workers based upon placements during 1993 and 1997. More than half (53%) of the children were boys, and the majority (76%) came from parents who abused alcohol. The average length of stay in a placement prior to breakdown was 27 months with 85% of these children experiencing multiple placements.

Significant correlations were found between supports and placement success. The following supports were identified: foster families having their own resources, foster family training, and professional assistance for the child. Each of these correlations was statistically significant using t-tests and the differences between mean values. Pearson's Correlation was used to analyze correlations. Foster parents having their own resources

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was found to positively correlate with placement permanency (r= .7) (p <. 000); the same was true with foster family training (r= .4) (p <.000). Additionally, this study found that professional support for the foster child was positively correlated with placement success (r= .2) (p <. 007) (Kalland & Sinkkonen, 2001).

A critical issue of major concern to the child welfare system is the low retention rate of foster care providers (Fees et al., 1998; Rhodes, Orme, Buehler, 2001). Exacerbating this problem is the fact that fewer people now consider becoming foster parents than in the past (Fees et al., 1998; Barth, 2001; Orme et al., 2004). Financial reasons have been suggested as contributors to this lack of willingness. When families are struggling during a financial crisis, most require two incomes to survive. Since the system's payments are low and in most cases do not provide a net gain for foster parents, the number of interested applicants continues to dwindle (Barth, 2001; Chipungu & Bent-Goodley, 2004). Additionally, no retirement plan or social security benefit package is available for foster parents (Barth, 2001; Chipungu & Bent-Goodley, 2004; Dozier & Lindhiem, 2006). These realities threaten recruitment attempts. Furthermore, children today have greater social, emotional, behavioral, and physical complexities than during the past. Therefore, in addition to the stressors associated with subsidizing cost differentials and childrearing, foster parents are expected to handle such demanding complexities (Martin, 2000).

Strengths and Limitations: Assessing the Literature on Influential Factors in Successful and Unsuccessful Placements

Foster parents' perspectives. Studies concerning the perspectives of foster parents have contributed to the body of knowledge regarding placement success. Since they are the frontline workers involved in the daily caretaking of foster children, considering their perceptions is logical. However, the findings of these studies need to be considered with the limitations inherent in exploratory research involving personal responses to open-ended questions. While important, these perceptions cannot be considered definite reasons for *all* successful placement outcomes. Factors that some *think* may lead to success may not actually be influential when tested. For example, Buehler et al. (2003) provide the perspectives of only 22 participants. This overwhelmingly European American sample ($n = 22$) cannot be considered representative of all foster parents. Also, being a cross sectional sample, the responses are not representative of foster parents at different stages of their career and are factors that they believe to be successful for them (not all) care providers. While the study utilized a probability sampling method, the use of stratification could have been used more wisely in terms of selecting participants more representative of race in the foster parent population.

While the Brown (2008) sample could be considered a better representation of all foster care providers since its size ($N = 63$) was nearly triple that of the Buehler et al. (2003) study and the mean number of children fostered was six times the size indicating more practical experience, these responses, too, are the views of these individuals and having a sample size of only 63 is still very small. With close investigation it is revealed that these contacts were randomized after being collected. The participants in this study indicated that they were interested in taking part in the study. This purposive method not

only limits generalizability, but it also indicates that there could have been selection bias considering the fact these foster parents were more willing to participate which could have many implications in itself, such as having more time to participate and being more active in the fostering process. Also, this group was composed of primarily urban dwelling licensed foster parents identified through a private agency. These factors indicate that these foster parents likely have more resources than most and live in a certain geographical environment, skewing their representation of all parents.

Child characteristics. Sinclair and Wilson's (2003) findings suggest foster children's social/behavioral characteristics influence a placement's success based upon these behaviors' effects on the caregivers (Sinclair & Wilson, 2003). While this finding is an important discovery regarding successful attributes in foster placements, the limitations need to be considered. First, the design of this study was cross-sectional limiting the ability to differentiate experiences and distinct stages in the fostering process. This design also limits what is known about the children's responses since some of the children with more unfavorable traits could have been in care longer than those with "desirable" traits. In addition, the use of backwards-logistic regression limits the finding's credibility since this process eliminated variables until a significant finding was produced. This "grab bag" approach to research does not help in testing theory. Finally, it must be considered how response bias was likely present in this study. The responses generated from the social work and foster parent participants could have been influenced to enhance favorable responses. Individuals are likely to skew their responses when asked

about their perceptions, especially when asked about work-related and performance issues.

Oosterman et al. (2007) provides a comprehensive analysis of study that stretched the course of 45 years. Within these four and a half decades many changes concerning the quality of care, parental expectations and services provided to foster youth occurred. The fact that studies were included from so long ago could really influence the reliability of findings. The number of participants ($N = 20,650$) was a definite strength of the analysis, however specific demographic characteristics (i.e., age, race, geographic location) that could have been insightful were not provided. Aside from these limitations, this analysis provides a great deal of information regarding the characteristics of foster children that can inhibit successful placement, which has the potential to shape a more thorough process during placement.

Resources. The implications of having an increased awareness of the resources related to successful placements could play an important role in future placement methods. While Kalland and Sinkkonen (2001) provided insightful information with their study, many limitations were present. First, this study used a retrospective approach. Social workers were asked to identify and provide information regarding cases they had years prior to this study. It is likely that a child welfare social worker, known for having caseloads that exceed limits, would forget components of a case that s/he had nearly ten years ago. In addition, the foster youth involved in this study were overwhelmingly (76%) placed in out-of-home care for reasons related to parental alcohol abuse, indicating potential selection bias. The implications of behavioral and developmental detriments

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related to alcohol abuse cannot be seen as legitimately representative of all reasons youth get displaced.

Foster Parents' Willingness to Foster Children with Special Needs

Little is known about the characteristics of foster parents willing to care for all types of children since only a few studies have examined explicit willingness to care for children with different needs (Cox, Cherry, & Orme, 2011; Cox, Orme, & Rhodes, 2003; Cox, Orme, & Rhodes, 2002). While the first study to investigate willingness to foster was done more than two decades ago, only a few have surfaced since (Downs, 1989). These studies have primarily examined the characteristics of foster parents willing to care for children with emotional/behavioral problems, physical disabilities, diseases from birth, or other types of ailments, and/or children who are teenagers (Cox, Orme, & Rhodes, 2003; Cox, Orme, & Rhodes, 2002). The targeted information was often related to gaining and retaining competent foster parents, identifying foster families that are more likely to care for youth with special needs, and linking special needs children to foster families already identified as willing to accept these types of children (Cox, Orme, & Rhodes, 2002). A disheartening discovery found in the early nineties points to a trend that many foster parents' willingness to care for hard to place children seems to decline with time and experience (DHHS, 1993).

Assessing Foster Parents' Willingness to Care for Hard-to-Place Youth

Downs (1989) conducted a secondary data analysis concerning willingness of foster parents to care for disabled children (mentally retarded; physically disabled). When asked whether they would accept mentally retarded children, 39% of foster parents

indicated that they would foster them. These foster parents typically were found to have more experience fostering, were less educated, and made less money than those not willing. While assessing willingness to foster physically disabled children, 47% of these foster parents reported they would probably foster these children. These foster parents were more likely to be married, younger, have greater experience fostering, have higher levels of education, and be full-time stay at home parents than those not willing.

Similar to Downs' (1989) study, Kriener and Kazmerzak (1994) assessed foster parents to discover what types of children were most desirable. The Iowan sample ($N = 1,013$) expressed that most (59%) foster parents would foster a child under the age of six and a little more than half (55%) indicated they would care for adolescents (teens). Interestingly this study's respondents were less willing to care for children with disabilities (26%) than those in the Downs study. These guiding studies provided a foundation of knowledge concerning willingness and foster parents. One study took investigation into this area to a whole new level while exploring foster parents' willingness on a much larger scale.

In a national study, the National Survey of Current and Former Foster Parents (NSC & FFP), foster care agencies identified a lack of willingness of foster parents to care for hard to place children such as those with special needs and teenagers (DHHS, 1993). This multistage stratified sampling design used purposive sampling to collect data on foster families located in 9 different states. States were stratified based upon the amount of payment they received for fostering. Individual counties were stratified based upon unemployment rates and their classification as being urban or rural. Foster parents

were stratified based upon their experience as well as whether they were still fostering at the time of the study. This 1991 study was conducted to collect information regarding foster parent recruitment and preservation. The total sample ($N = 1,313$) was composed of current or former licensed or otherwise approved foster parents and responses were considered generalizable based upon the design, sampling method and stratification techniques.

This study found that when information is provided to potential foster parents about a child's problems their acceptance is often contingent upon the problem's severity and the types of problems. Seven problems were identified: disabled or seriously ill; teens; HIV infected; sexually abused; emotionally and or behaviorally troubled; infants with alcohol related disorder; and infants exposed to drugs. While the majority (57%) refused to foster only one or two of these problems, 2.5% refused all seven. The most rejected problems were HIV infected children (74%), teens (44%), and children with alcohol related disorders (i.e., Fetal Alcohol Syndrome).

This study was unable to establish whether some foster parents who were willing to accept some problems were more likely to accept other problems (i.e., foster parents found to be more willing to care for teens were also found to be more willing to care for those sexually abused). Homes without children were found to be more likely to refuse acceptance based upon the problem than those who had at least one child. In addition, this study found that those living in urban settings (54.2%) were more willing to foster teens than those in suburban (45.6 %) and rural settings (27.8%). Finally, those in urban

areas were found to be less willing to foster behaviorally and or emotionally challenged youth.

Using the Data from the NSC & FFP

While the NSC & FFP was a major study concerning foster parents and willingness, much of the data went unused until Cox et al., (2002) took a keen interest in findings related to family foster care. Since data related to willingness to foster was only collected from non-kinship foster parent participants, these families were only included in the follow-up study. Of the current foster family respondents ($n = 1048$), 876 families were included in this study. The remaining 172 current foster families provided either kinship placements or "other" type placements excluding them from the current foster family sample.

Findings indicated those foster parents more willing to care for children with a variety of needs had more experience fostering and had worked with both "normal" and special needs children in comparison to their less experienced counterparts (Cox, et al., 2002). Willingness factors predicted the number of children placed in a foster family's home. For example, those more willing to accept children with a wider range of specialized needs had more children than those less willing. Surprisingly, foster parents licensed to care for more children and more willing to care for children with special needs had more beds available during the time of this study. This finding could imply that the child welfare system underutilizes parents that are more willing to care for special needs children. An interesting discovery concerning foster parents more willing to care for children with physical disabilities or severe ailments is that they were more than ten

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times more likely to care for these types of youth than those who were not willing (Cox, et al., 2002). Furthermore, foster parents more willing to care for children with various types of complex problems were more likely to have children placed in their homes within fourteen months of pre-service training.

Strengths and Limitations. From the NSC & FFP findings, important data were collected regarding foster parents nationwide. Being a national sample and given its design, the data were representative of all foster parents (licensed or otherwise approved) in 1991. While these attributes enhance findings, the study's limitations need to be considered.

Limitations in the NSC & FFP study are related to a lack of identifying specific characteristics associated with willingness or refusal to foster children based upon their problems. Also, the data is over twenty years old. It did not focus on important demographics such as age, educational level, or income, but rather concentrated on factors associated with an *unwillingness* to foster. While it was representative of all foster parents, only frequency data were reported regarding willingness factors. This limited findings since controlling for other variables such as demographics could not be done. Had regression analyses been tested on each type of problem, this study could have provided direct insight into specific characteristics of foster parents related to a willingness to foster. This would have likely contributed to better recruitment efforts of foster parents willing to care for different types of problematic children. Finally, data came from foster parents' responses. Since the questions included willingness factors as well as different aspects of experience, it is possible that some participants felt the need

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to respond in a way that was thought to be favorable. This consideration would skew findings and would not be truly representative of all foster parents' willingness.

Summary. The above studies' findings have a great deal of implications associated with willingness to care for sexual minority foster youth. The tactics used could be replicated with sexual minority foster youth as a focus. Such a study could increase recruitment efforts and match youth with families already identified as willing. Additionally, this type of study could enhance pre-service training procedures and shift policies.

Willingness to Foster Emotionally and Behaviorally Challenged Children

In 2003, Cox et al., came up with the idea of assessing foster parents' willingness to foster a variety of children during pre-service training. This three-year study assessed applicants chosen for foster parent training in a southeastern state. The sample ($N = 142$) were trained by the state and asked various questions soliciting responses regarding their willingness to foster children with emotional and or behavioral issues as well as the influence resources has on this willingness. Nine problems were identified and used to assess willingness based upon severity of problem.

Results of Cox et al., (2003) were initially broken in to three components during processing. First, researchers looked at the characteristics of the sample before assessing willingness. After this, willingness and placement were investigated. Findings showed that foster families more willing to care for children with various types of complex problems were more likely than those less willing to have children placed in their homes within fourteen months of pre-service training. The less desirable children that were least

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likely to be placed with a willing foster parent were those that were known to start fires, be sexually active or have destructive behaviors. The most desired "problems" of these respondents were: bed wetting (59%), complete withdrawal (37%), and behavior issues in school (45%).

In terms of resources and willingness, Cox et al., (2003) assessed across eleven identified resources. Of these, having a strong religious affiliation, strong social support from family and friends, being a racial majority, and advanced education were the most commonly recognized resources. Multiple linear regression was used to assess resources and their relation with fostering willingness. The significant findings showed that those with more resources would be more likely to be willing to foster a child with behavioral and or emotional issues across models (sexually active, disobedient behavior, head-banging, bed wetting and behavior problems in school).

"There is no specific profile of 'willing to foster' families; rather, agencies should work with individual families to build on existing strengths" (Cox et al., 2003, p. 44). This study found an interesting concept from its results. Assessing resources and willingness factors should be implemented during the earlier stages of the foster parent process. During these initial stages, certain details about a family can be discovered and used to benefit placements in the future.

Strengths and limitations of Cox et al., 2003. The findings of Cox et al., (2003) provide great insight into what types of youth foster parents are most willing to accept based upon problems and was the first of its kind to utilize a theoretical perspective (i.e., resource theory). This longitudinal study sampled 142 foster parents from three separate

counties within a single state. The sample was diverse in terms of demographics. The sample size was too small to generalize to all foster parents from all states. This study did not include kinship foster parents or therapeutic placements. Inclusion of these types of placements should be included in order to detect any increase in willingness based upon these factors.

Identifying willingness came from responses during pre-service training, provided to future foster parents. During this time it is likely that foster parents could be naïve about their abilities and the severity of a foster child's problems. It would be important for future investigation to look at willingness factors of foster parents with various levels of experience. It would be interesting and beneficial to see how willingness changes over the course of a foster parents' career. Also, these families are more likely to have greater resources to complete training which could contribute to a greater willingness.

While this study provided the willingness to foster associated with 9 different problems, many other important problems need to be addressed such as suicidality and substance abuse. It also would have been beneficial for certain demographic characteristics to be assessed. For example, important information could be discovered if it were known what religious affiliation a foster family prescribed to. Future research in this area would benefit from a more thorough analysis of foster parent demographics.

With the lack of knowledge concerning what is known about successful placements and willingness of foster parents to care for difficult to place foster youth, there has been a need to further what is known about specific characteristics of foster parents that lead to positive outcomes. Cox, Cherry, and Orme (2011) conducted a cross-

sectional study seeking to gain insight into willingness to foster based upon a national

sample of recruited foster mothers (N = 297). The convenience sampled responses came

from 35 different states and were based upon extensive surveys and reviews including the

Willingness to Foster Scale-Emotional and Behavioral Problems(40) (WFS-EBP(40).

This new scale was created to measure participants' willingness to care for behaviorally

or emotionally challenged children based upon 40 items.

These 40 items were individually rated on a four-point scale:

1) would not be willing to foster this child under any circumstances; 2) might be

   willing to foster this child with a lot of help and support; 3) probably be

   willing to foster this child with a little extra help and support; 4) would be

   willing to foster this child without any extra help or support (Cox et al., 2011;

   p. 59)

Since the scale "is a new measure of a new construct and there is not enough information

to specify the underlying factor structure (cox et al., 2011; p. 60)" the researchers in this

study conducted exploratory factor analysis. This method allowed them to interpret the

factors of items and the scale was found to be a suitable analysis. Internal consistency

reliability of the scale was found to be great (Cronbach's α = .96) as were the tests of

validity.

To determine the characteristics that predict scale scores, the researchers tested

discriminant validity before looking at the differences between traditional and specialized

foster parents and assessing the scale scores to test for known-groups validity. Showing

construct validity the study provided provisional care as an indication of placement for

outcomes. According to findings, the scale effectively predicted the willingness and experience of fostering, how many children were in their care, and foster parent request for removal of a child.

This study found that mothers who were more willing to foster children with serious emotional or behavioral issues had longer careers as foster parents and had more children in their care than those less willing. Additionally, it found that children in the care of those particular foster mothers experienced less placement instability, considering those mothers made fewer requests to have children removed from their homes. Lastly, this study determined that foster mothers more willing to care for children with a variety of needs were more likely to be licensed as specialized foster care parents than those less willing. The scale positively related to prediction of number of children in the home and years of experience, but negatively related concerning removal requests according to scores.

Strengths and limitations of Cox et al., 2011. It is important to have a solid understanding of the types of foster parents who are willing to foster a variety of children for recruitment and retaining purposes, and furthermore for an increased likelihood of successful placement. Cox et al., (2011) provide a great deal of valuable information concerning willingness and foster parents with a credible scale to verify findings. This study included a national sample of foster mothers from both public and private agencies with varying degrees of fostering experience. With such a strong sample, it is likely representative of the foster mother population.

While seemingly strong, this study used a nonprobability sample for convenience factors. Also, data were collected cross-sectionally which impacts the ability to infer causality based upon experience and removal requests in this study. Also, there is no longitudinal evidence that supports the reliability and validity of the WFS-EBP. While this is understandable, considering this scale is new, future research should utilize this measure with related fostering outcomes to provide support for its credibility and use.

Summary. Similar studies would benefit sexual minority foster youth's placements. Utilizing a tool that is competent in effectively assessing willingness factors and placements could help with recruitment efforts, retaining current care providers, and appropriately meeting the needs of our nation's foster youth. With a valid measurement available, it seems ethically mandatory to conduct a study addressing these issues with sexual minority youth in order to assure their needs are being met. If it were known what types of characteristics correlate with foster parents' willingness to care for these youth, they would likely have much better experiences while in foster care. Such studies could also help decrease the instability that many of these sexual minority youth encounter (Mallon, 1998; Lambda Legal Defense and Education Fund [Lambda Legal], 2001; Woronoff, Estrada & Sommer, 2006; Wilber, Ryan & Marksamer, 2006).

Identity Development

Development and adolescent foster youth. A stable family unit that promotes consistency, nurturance, and safety is important in the healthy development of children. Children who are placed in the foster care system tend to come from backgrounds that are unpredictable, unsafe, and unstable, creating the need for out-of-home placement (Jones

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Harden, 2004). Associated risks of these experiences include the following: decreased academic achievement, poor physical health, decreased mental health, issues with personal and social relations, drug and alcohol abuse, suicidality, and criminality. These risks can contribute to a deprivation in development (Timberlake & Verdieck, 1987; Barth, 1990; Dubner & Motta, 1999; Zetlin & Weinberg, 2004; Jones Harden, 2004; Casey Family Programs, 2005; Racusin, Maerlender, Sengupta, Isquith, & Straus, 2005; Bruskas, 2008; Anderson, 2011). Furthermore, "Children who move through a series of families or are reared without close and continuing ties to a responsible adult have more than the usual problems in discovering who they are" (Maas & Engler, 1959, p. 356).

Adolescents in care are faced with particular challenges associated with identity development in addition to the typically experienced stressors faced during this stage of life (Jones Harden, 2004). Adolescence is a time when children transition into adulthood with the uneasy task of developing a sense of self (Erikson, 1963). For youth who have been prematurely separated from their parents, this task can become extremely challenging (Salahu-Din & Bollman, 1994; Kools, 1999).

In terms of identity development, youth in foster care struggle to achieve a solid sense of self (Salahu-Din & Bollman, 1994; Kools, 1997; Morrow, 2004). Experiencing instability in placements and uncertainty about the future is detrimental to these youth's developmental process (Morrow, 1999). Some studies have identified foster care placements as being developmentally detrimental to the youth residing within them (Kools, 1997).

Kools (1997) investigated the developmental issues associated with foster youth and self-identification. This purposive sample (*N* = 17) ranged in age from 15 to 19 (*mean* = 17.47 years) and was composed of 8 males and 9 females. This sample consisted of minorities with 11 African Americans, 2 Hispanics, 2 Asian/Pacific Islanders, and 2 multi-ethnic youth. Their length of time in care ranged from 2 to 11 years (mean = 5.7), and the average number of placements was 4. Participants were interviewed and observed in their placement location and were asked a variety of questions relating to their experiences in foster care. Once responses became redundant, patterns were identified, and questioning was discontinued (Kools, 1997).

Specific factors were identified that contributed to the diminished sense of self, hindering healthy identity development. The first factor Kools (1997) noted was the structure of the institutions in which foster youth reside. A staff's rigidness, depersonalization, and lack of care contributed to a decreased sense of self. While in these settings, youth must adapt to the staff's, their peers', and the community's negative stereotypes of them. Such adaptation was found to eventually influence these youth to think of themselves and behave based upon these external views, causing a stigmatized sense of self. According to Kools, "This negative conception of the self, in turn, has a destructive impact on other fundamental areas of human development: the ability to be satisfactorily affiliated with others and to function autonomously and productively in a social context" (1997, p. 268).

Identity development and self-esteem. To detect how an emphasis on self-esteem could enhance youth's self-identity, Salahu-Din and Bollman (1994) conducted a

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study assessing identity development and self-esteem among youth in foster care. They found that those who remain in contact with their birth families tend to have a greater sense of identity. In this study, 116 foster youth between the ages of 11 and 15 were randomly sampled from a midwestern state's social service agency. Females ($n = 57$) comprised 49% of the sample. A variety of ethnicities were prevalent: 20 African Americans (17%), 1 Asian, 67 Caucasians (57.8%), 16 Hispanics (13.8%), 10 Native Americans (8.6%), and 1 identified as other. Ethnical data was missing for 1 participant. To be eligible for this study, youth had to have resided in foster care for at least one year. Open-ended questions were used to assess self-views associated with participants' biological families.

Results revealed a significant relationship between having contact with biological family and having self-esteem in contrast to those who had little or no contact with their family of origin ($r = .27$, $p < .01$). Salahu-Din and Bollman (1994) described self-esteem as a necessary component woven into identity development. Additionally, they explain the importance of foster youth remaining in contact with their birth family as a necessary means of connectedness, enabling these youth to feel a sense of heritage stemming from cultural and/or familial roots and to have a better self-identity.

Summary. Appropriate identity development is an important component of successful outcomes for all youth, especially those in foster care (Salahu-Din & Bollman, 1994; Kools, 1997; Morrow, 2004). In order to better understand what components are necessary in the positive development of identity for foster youth, research is required.

Although the aforementioned studies provide insight into the detriments of identity development, limitations need to be addressed.

Limitations in the Foster Youth Identity Development Studies

  Identity development and foster youth. While Kools' (1997) findings validate the claim that foster youth have additional challenges associated with identity development when compared to their peers not in care, limitations in this study's sampling and method should be noted. First, the sample size cannot be considered representative of all foster youth since it is small ($N = 17$). Also, this sample consisted only of minorities, a factor which could further influence a stigmatized sense of self; yet ethnicity was not considered influential in the study's findings. Although a variety of assessment techniques were used, some could potentially have skewed participants' responses. For example, many of the interviews were held within the locations where participants were placed. Being interviewed face to face could have influenced responses; furthermore, the fact that peers were so close by, and in some instances likely to overhear, could have greatly affected how participants relayed their views of themselves. Furthermore, some of the information was gathered from weekly group discussions. This information should be considered highly contaminated by the views of the majority or the "cooler" participants. As noted in the study, youth are greatly influenced by peers and are especially sensitive about how others view them. Therefore, this form of data collection could have influenced findings.

  Identity development and self-esteem. This study's strengths include the randomized sample and a larger sample size $(N = 116)$; and the use of the Baltimore Self-

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Esteem Scale, which was found to be replicable at 93% when previously administered to a group of adolescents. Replication in other locations than the midwest would be beneficial in order to enhance the study's generalizability.

      Summary. The idea of enhanced self-awareness and positive identity development through continued connectedness with birth families is supported by Craig-Oldsen, Craig & Morton (2006). These authors state the need for "shared parenting" between foster parents and birth parents to better support the developing adolescent while also supporting foster families. This best practice has been recommended to better serve the identity development of sexual minorities, a subgroup of the foster youth population.

Identity Development and Sexual Minority Foster Youth

      Conceptually, scholars indicate that many sexual minority youth in out-of-home care face additional challenges during the developmental stage of adolescence in contrast to their heterosexual foster youth peers (Sullivan, 1994; Kreiss & Patterson, 1997; Mallon, Aledort, & Ferrera, 2002; Morrow, 2004; Wilber, Ryan, & Marksamer, 2006; Ragg, Patrick, & Ziefert, 2006). In addition to issues with identity development heterosexual foster youth struggle with discovering, understanding, and incorporating their sexuality into their developing self-identity while navigating through multiple systems that stigmatize them (Ragg, Patrick, & Ziefert, 2006; Ryan, 2003; Mallon, 2001). As a result, many of these youth fear the risks involved in disclosing their identity; so they remain closeted (Tharinger & Wells, 2000), causing them to feel isolated and misunderstood while internalizing anger (Omizo, Omizo, & Okamoto, 1998). Withholding such information from others prohibits the possibility of gaining a support

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system to be integrated into their identity development (Ragg, Patrick, & Ziefert, 2006). Furthermore, support is lacking from foster parents and residential workers (Mallon, 1997, 1998), and within the policies and procedures found in relevant agencies serving these youth (Maccio & Doueck, 2002). Finally, many sexual minority foster-parent applicants are turned down, diminishing the possibility for these youth to form potentially stable relationships with mentors who could assist during this challenging developmental process (Hicks, 2000; Brooks & Goldberg, 2001). Although most of the above literature is conceptual, there has been one study concerning positive identity development and sexual minority foster youth.

Ragg, Patrick, and Ziefert (2006) sought to discover competencies to be included in workers' training that could enhance the positive identity development of sexual minority youth in care. The sample consisted of 21 racially diverse sexual minority youth between the ages of 16 and 22. These youth were interviewed and asked multiple questions referring to their experiences with workers in out-of-home care. The questions sought to elicit information regarding the relationship between workers and youth and the identity development of each youth. From the responses, themes and subthemes were identified that indicated how interactions with workers either enhanced or impeded a youth's identity development.

Responses from the sampled youth indicated how the ability of workers to protect their clients' identity could have a direct impact on the identity development of these youths. Many of the youth expressed concerns with the worker including their identity in their file or in open court. Those who experienced such disclosure were less empowered

to be open about their identity. According to Ragg, Patrick, and Ziefert, "Such lack of empowerment sets up situations where others operate from preconceived notions of the youth's identity, which creates a lack of connection between the youth's internal identity and the identity controlling many interactions in their life" (2006, p. 252). In contrast, workers who protected the youth's identity helped facilitate the coming out process and empowered the youth's identity development.

Another theme identified in this study refers to the reactions of workers while discussing sexual identity with these youth. These reactions are reflections of society's stigma toward homosexuality in general. Many youth explained how workers' responses made them feel different and hated (Ragg, Patrick, & Ziefert, 2006; Eliason & Schope, 2007). According to Ragg, Patrick, and Ziefert, "As youths attempt to integrate their sexual identity with other aspects of their identity, a subtheme of self-hate or being unlovable can emerge" (2006, p. 253). Similar to the workers' reactions, the foster parents' reactions to a youth's coming out can create barriers in the relationship that affect support levels while also causing the youth to feel further stigmatized. Therefore, "A primary task in identity development for GLBT [gay, lesbian, bisexual, transgendered] adolescents is that of adjusting to a socially stigmatized role" (Morrow, 2004, p. 91).

Finally, in this study all of the youth identified rejection's powerful impact on development. These youth experienced rejection by others who were often supportive prior to their coming out. According to Ragg, Patrick, and Ziefert, "Such interactions

exerted powerful influences on the youth's identity as they had to integrate negative experiences in their developing identity" (2006, p. 259).

Summary. Ragg, Patrick, and Ziefert (2006)'s exploratory study revealed the perceptions and experiences of only a few youth ($N = 21$). The information gained could be useful to promote the need for a replication study with a much larger sample of sexual minority foster youth. Although the number of participants is small and the qualitative nature of the study could contribute to its limitations, a major strength of this study is the fact that the experiences of sexual minority foster youth, in terms of identity development, is being presented. It is clear that more insight and valid information is needed to meet the needs of these youth.

Conclusion. The challenges in identity development that many sexual minority youth in out-of-home care face greatly affect their sense of self and self-worth. Such increased challenges can take their toll on these youth, who lack support from family or other outside systems. Many risk factors have been identified concerning sexual minority youth during adolescence. They include the following: suicidality (Savin-Williams, 2001; McDaniel, Purcell, & D'Augelli, 2001; Russel, 2003; D'Augelli, & Grossman, 2006, Hatzenbuehler, 2011), prostitution (Savin-Williams, 1994), health and mental health problems (Almeida, Johnson, Corliss, Molnar, & Azrael, 2009; Kreiss, & Patterson, 1997; Ryan, Huebner, Diaz, & Sanchez, 2009; D'Augelli, & Grossman, 2006), substance abuse (Savin-Williams, 1994; Ryan, 2003; D'Augelli, & Grossman, 2006), and homelessness (D'Augelli, & Grossman, 2006; Wilber, Ryan, & Marksamer, 2006). For

all adolescents, the transition period of identity development can be difficult; but for sexual minority youth in foster care, it can be harmful and even life threatening.

Sexual Minority Youth in Foster Care

Prevalence. Contrary to the belief that sexual minority youth do not exist in foster care (Mallon, 1998), non-heterosexually oriented youth *are* living in out-of-home care. However, estimates on the number of such youth vary; furthermore, many of the estimates are from unreliable sources. In fact, prior to a Bureau of Justice Statistics study published in 2010, percentages of sexual minority youth in out-of home care were not based on formal investigation and were, therefore, skewed (Mallon, 1998; Lambda Legal Defense and Education Fund [Lambda Legal], 2001). The estimates of sexual minorities among all youth in care ranged from 5 to 10 % (Lambda Legal, 2001) to as high as 20 to 60% (Woronoff, Estrada & Sommer, 2006). The discrepancies in these estimates cannot be explained for reasons related to the unaccountability of them. People's opinions of how many sexual minority youth are in out-of-home care have been used as factual percentages for years; however these estimates cannot be seen as legitimate without proper investigation.

The difficulty in calculating the number of sexual minority youth in out-of- home care is related to those who hide their sexual orientation, societal influences which create difficulty with being "out," and workers' failure to recognize the presence of these youth. Because of these factors, many professionals agree that all reported rates are disproportionate to the actual prevalence (Woronoff, Estrada & Sommer, 2006; Wilber, Ryan & Marksamer, 2006; Mallon, 2008). Although determining how many sexual

minority youth are in out-of-home care settings is challenging, researchers have come a bit closer by assessing youth in out-of-home care settings regarding their self-identified sexual orientation.

The 2010 Bureau of Justice Statistics study related to sexual minority youth in out-of-home care found that 12.09% of all respondents self-identified as non-heterosexual. This study involved 26,550 adjudicated youth living in juvenile facilities in all 50 states between 2008 and 2009 through a multistage, stratified sample design. One of two possible randomly assigned questionnaires was given electronically in an isolated room where an individual interviewer was present with each participant. To increase privacy and the reliability of responses, the interviewer was positioned in a way so as not to see the computer or threaten the security of the youths' responses. The two questionnaires targeted two issues, one being sexual victimization and the other drug/alcohol abuse. Findings showed that sexual minority youth were more likely than their heterosexual counterparts to experience sexual victimization while in these placements. Sexual minorities were identified through a series of questions that assessed sexual orientation based on attraction to members of the same-sex or to members of both sexes (bisexual). While potentially more accurate than previous estimates, this study was probably unable to identify all sexual minorities from the sample based upon the participants' lack of self-disclosure and the desire to remain closeted as a means of protection from social stigma. Additionally, these youth could, like many youth in general, have had difficulty identifying with a specific sexual orientation (U.S. Department of Justice, 2010).

Summary. Sexual minority youth living in out-of-home care placements is not a new phenomenon. Heightening awareness, Steinhorn (1979) portrayed the hardships of being a sexual minority youth in out-of-home care and was the first to publicly advocate for modified treatment approaches and competent staff to effectively serve this population. Professionals are continuing Steinhorn's efforts. Much literature (Steinhorn, 1979; Mallon, 1992; Sullivan, 1994; Sullivan, 1996; Mallon, 1997a; Mallon, 1997b; Mallon, 1998; Mallon, 1999a; Sullivan, Sommer, & Moff, 2001; Mallon 2002; Freundlich, & Avery, 2004; Gilliam, Jr., 2004; Berberet, 2006; Estrada, & Marksamer, 2006; Wilber, Ryan, & Marksamer, 2006; Mallon & Woronoff, 2006; Woronoff, Estrada, & Sommer, 2006; Elze, & McHaelen, 2009) has been published targeting better treatment strategies, including practice guidelines and competency measures for professionals working with sexual minority youth in out-of-home care.. Furthermore, organizations such as The Child Welfare League of America (CWLA), the National Association of Social Workers (NASW), and Lambda Legal have identified best practice principles for serving sexual minority youth in out-of- home care (CWLA, 2006; Lambda Legal, 2001, 2006; NASW, 2009). These organizations have also attempted to expand on Steinhorn's ideas by identifying risk factors affecting many of these youth's development while also emphasizing the lack of attention paid to this group's needs. Additionally, these organizations have provided specific practice approaches for decreasing abuse, neglect, and placement instability (CWLA, 2006; Lambda Legal, 2006).

Available documents and training materials primarily serve as advocacy tools intended to increase awareness of this often hidden population. According to Mallon

(1999a), changes are needed not only in practices, but also within child welfare policies. More community involvement is also needed with special attention to preventative services and to providing these youth empowerment (Wilber et al., 2006; Mallon & Woronoff, 2006; Elze & McHaelen, 2009). A critical first step in this process is collectively recognizing that sexual minority youth actually exist in the child welfare system (Mallon, 1992; Mallon & Woronoff, 2006). As noted by Mallon and Woronoff (2006), "The welfare of LGBT children, youth, and families cannot be adequately enhanced as long as the larger society, heterocentrically oriented and heterosexually controlled, ignores their existence" (p. 118). The child welfare system's lack of suitable information regarding sexual minority youth and families is a barrier to implementing appropriate services for this oppressed population (Mallon & Woronoff, 2006).

While progress has been made concerning the visibility of sexual minority youth in care, a major void exists in the research regarding this group's experiences. To date, only two studies are available. One study was conducted over ten years ago, while another was just recently published. The initial study by Mallon (1998) has been used referentially for over a decade and continues to provide insight into the experiences, including the difficulties, of sexual minority youth in care. Following up on some of the issues identified in Mallon's study, the more recent study provides a more current perspective on the issues continuing to plague sexual minority foster youth.

The Mallon Study

The majority of literature concerning sexual minority youth's experiences in out-of-home care is dependent upon one study's discoveries. Mallon's (1998) exploratory,

qualitative study provided descriptive data that set the stage for what is known about this group and continues to be the main research source regarding the perspectives and experiences of sexual minority youth in out-of-home care.

Mallon sampled two groups: sexual minority youth living in out-of-home care and professionals working with these youth. He used purposive and snowball sampling to select 54 youth participants and convenience sampling to select 78 professional participants. In New York, advertisements were placed in child welfare agencies and support agencies identified as places sexual minorities often visited as well as in youth newspapers. In Los Angeles and Toronto, Mallon identified agencies known to serve this population and visited group homes and other similar programs. Participants in these locations also were asked to recommend other youth who might be interested in participating. Confidentiality was guaranteed to all participants.

Information was collected by interviewing youth and by observing their residences over a 4-year span. The collected information pertained to eight domains: family relations, friendships, reason for out-of-home placement, details about placement at time of interview, experiences with other youth in out-of-home care settings, experiences with staff, ideas for change within these settings, and each youth's first realization of being "different."

The youth sample consisted of 54 sexual minority youth (70% male $n = 38$; 30% female $n = 16$) between the ages of 17 and 21 that resided in Los Angeles ($n = 16$), New York ($n = 27$), or Toronto ($n = 11$). Openly identifying themselves as being non-heterosexual, these youth came from multiple ethnicities (African American $n = 22$,

Hispanic *n* = 12, Caucasian *n* = 15, Indo-Caribbean *n* = 2, Afro-Caribbean *n* = 2,

Aborigine Canadian *n* = 1) and all experienced out-of-home care. Many were still in high

school during the time of the interview (*n* = 22), followed Protestant religious practices (*n*

= 31), were from the United States (*n* = 43), and had resided in urban settings for nearly

all of their lives (*n* = 47). Eighty-seven percent (*n* = 47) of the participants were living in

group homes during the interviewing process while 7 % (*n* = 4) lived on the streets; half

of the participants indicated they had spent time living on the streets at some point during

their placement in out-of-home care. Eighty-nine percent reported multiple placements

ranging from 2-38 out-of-home settings (*mean* = 5.3). Youth participants received small

stipends for participating in the study.

　　While assessing professionals, Mallon (1998) used open-ended questions to

collect information relevant to providing these youth services. Nine major areas were

identified:

- Identification and understanding of sexual minority youth

- Applicable resources

- Population's specific needs

- Common thoughts about this group from multiple professions within the child
  welfare system

- Heterosexual professionals' thoughts and consciousness of this population

- Implications of racial, religious and cultural perspectives

- Training (or lack thereof)

- Recognition of best placement practices

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- Ideas for change.

The majority of staff participants, 58 of the 59 child welfare agencies providing out-of- home care in New York, agreed to be interviewed. Professionals working in agencies exclusively serving sexual minority youth were also interviewed in both New York and Los Angeles. Other professionals and agencies in California that served these youth were, as Mallon pointed out, more cautiously involved. In Toronto, an agency known to serve these youth since the 1970's added to the pool of professional participants. Most interviews with the professionals were conducted face-to-face, although some ($n = 12$) were conducted by phone.

Data was collected through tape recordings, notes, and documents before being transcribed and assessed for patterns. Trends in the professionals' responses were identified and categorized into nine primary groups. Information from the youth participants produced noticeable patterns of injustice including violence, neglect, and oppression.

Results of the Mallon Study

Negative experiences in out-of-home care. Forty-nine of the 54 youth participants recalled negative experiences while in care. Some felt pressured into disclosing their sexuality, and many reported that when their sexual orientation was disclosed, they experienced shifts in their treatment (Mallon, 1998). Furthermore, Mallory noted, "Gay or lesbian adolescents are frequently denied admission into a program, or they are 'got rid of' once their homosexual orientation is discovered" (1998, p. 88). In states, such as California and New York, with laws against discrimination due to sexual orientation,

professionals often stated they could not accept a sexual minority youth because of safety issues (Mallon, 1998). As a result, many youth felt the need to keep their sexual orientation secret from staff, both in placement settings and within foster care agencies (Mallon, 1998; Sullivan, 1996). Furthermore, to remain protected from the stigma sexual minorities often face and to increase chances of acceptance and safety, many felt the need to remain "closeted". Of the youth in Mallon's study, 78 percent stated that openly identifying themselves as a sexual minority was unsafe; 98 percent of the workers agreed. Additionally, the youth felt as though discussing their sexuality was taboo, an impression often facilitated by unknowledgeable and misguided staff. Noting that many child welfare professionals uphold stereotypes concerning homosexuality, Mallon stated, "Lacking accurate information and a well-developed base of knowledge about homosexuality, many staff members believed the standard misinformation, including the usual myths and stereotypes, that was used to describe gay and lesbian orientation" (1998, p. 72).In fact, many workers sought out stereotypical behaviors that perpetuated false concepts about homosexuality (Mallon, 1998).

Both professional and youth participants identified safety concerns about placements and worker interactions. From the onset of the placement process, many youth experienced workers' discrimination, directly resulting from disclosure or assumption of sexual orientation. While this finding regarding workers is troublesome, results also revealed that other youth in care posed even greater safety risks for sexual minority youth (Mallon, 1998).

Peer treatment. The influence of peers on developing youth is important to consider. During developmental stages, young people face pressure to conform to societal standards of normality. Such pressure can be quite unsettling for those who do not fit such expectations (Ashford, LeCroy & Lortie, 2006). For a developing youth who is not heterosexual, life can be challenging in the face of peers' harassment and hostility (Mallon, 1998; Morrow, 2004). In Mallon's study (1998), many of the youth in care faced an additional challenge of feeling they could not turn to staff or family for support in the midst of overwhelming conflict. Many participants learned to keep abusive experiences to themselves because when they reported such experiences, they were often blamed. In fact, at some point, more than half of the participants chose life on the streets because of the unbearable abuse they experienced (Mallon, 1998).

Forms of abuse. Harassment, abuse, and incompetence are prevalent within out-of-home care settings. Some of the youth reported that foster parents harassed them to talk and behave according to societal gender expectancies (Mallon, 1998). Such "guidance" can become so invasive that a child may seek removal, hoping to find a more welcoming and accepting atmosphere (Mallon, 1998).

Verbal abuse was the most recognized form of maltreatment the youth experienced in this study. Such abuse from staff, counselors, and peers occurred so frequently that many youth became accustomed to it and failed to report it. Mallon noted the injurious effects of such abuse: "Continual verbal harassment erodes one's sense of self-worth, self-esteem, and internal sense of fit. Constant badgering, name-calling, and snide remarks are injurious to one's mental health" (1998, p. 95).

Fifty-two percent of the participants in Mallon's study experienced physical abuse for reasons directly related to their sexual orientation. Many felt as though physical abuse was the deciding factor in fleeing from a placement. The abuse came not only from peers in these programs, but also from staff members. Professionals validated these accusations from first-hand experience or through word of mouth. A restraint on a sexual minority youth sometimes turned into an intentional physical altercation. In some situations, staff would allow peers to physically and/or sexually abuse these youth. In all-female facilities male counselors raped lesbian girls, thinking they would cure them of their sexual minority status. In reaction to many of these experiences, professionals in this study stated that the system *does* mistreat sexual minority youth in care (Mallon, 1998). Therefore, Mallon's study not only provided enormous insight into the realities of sexual minority youth living in out-of-home care settings but also illustrated the need for increased services to be provided to these youth.

Limitations of the Mallon study. Aside from the fact that this study is now over a decade old, there are other limitations that must be addressed. The number of participants in both participant groups was too small to consider representative of all sexual minority foster youth and the associated professionals. Also, the cities in which the participants came from are very large and commonly depicted as diverse and tolerant. This factor influences how representative these responses are of youth who reside in alternative locations. The exploratory nature of the study could influence its credibility, however this pioneer study required such a method to gain information not previously identified.

Current Experiences of Sexual Minority Foster Youth: The Second Study

What are sexual minorities' experiences living in out-of-home care today? Unlike many past public depictions of sexual minorities as deviants or social outcasts, current images often reflect a more accurate and positive representation, providing many youth comfort and understanding regarding sexuality (Wilber, Ryan, & Marksamer, 2006). However, has the evolution of acceptable and proper awareness among the sexual minority population in general changed the experiences of sexual minority youth in care?

While the Mallon study presented the common experiences of sexual minority youth in out-of-home care settings, the current depictions of these youth's experiences differ somewhat from those over a decade ago. Gallegos, White, Ryan, O'Brein, Pecora, and Thomas (2011) conducted a study formulated from a subset of the Casey Field Office Mental Health Study (CFOMH) targeting the more current experiences of sexual minority youth in foster care. In the 2006 CFOMH study, 188 foster youth between the ages of 14 and 17 were interviewed. Questions concerning sexual orientation and the foster care environment associated with sexual minority youth were used. Due to the small sample size ($n = 10$) of sexual minorities in this group, this study's results are exploratory, descriptive, and not generalizable (Gallegos et al., 2011).

Perceptions of sexual minority youth in care. Concerning openness about their sexuality, the sexual minorities in this study stated they felt the need to hide their sexuality at some point for safety and acceptance. Of the 10 youth interviewed, 4 indicated that their social workers knew of their orientation. While 8 felt their social workers would be supportive of their sexual minority status and were knowledgeable of applicable services, 4 of these youth felt their social workers were not supportive during

their "coming out" period. Three of the sexual minorities' foster families received services that enhanced their knowledge of and abilities to work with these youth. Contrary to the trend identified in the Mallon study, few of the sexual minority youth in this study identified experiences of discrimination, and none reported experiences of physical abuse due to their orientation. Almost all ($n = 9$) of the sexual minorities stated they were comfortable with their sexual minority status and did not feel they needed specialized services or treatment because of it (Gallegos et al., 2011).

Perceptions of all youth in care. When asked about their perceptions of sexual minority peers in care, 66% of the 188 participants felt comfortable with these peers while 46% felt comfortable if they were placed with these youth. Half of the sample felt the associated social workers were supportive of sexual minorities in care. Concerning discrimination and treatment of sexual minorities in these placements, 78% reported witnessing or hearing these youth being verbally harassed and 42% stated that they witnessed or heard of these youth being victims of violence. Twenty percent of these youth stated they had witnessed or heard these youth being rejected by a foster family because of their orientation (Gallegos et al., 2011).

Strengths and limitations. While the 10 youth who identified as being non-heterosexual in this study appeared to be functioning well in out-of-home placements, certain information is important to consider. The Casey Family Foster Care Program fostered the youth sampled in this study. This agency's practices of care could be assumed to have been above average since this program is deeply embedded in the research and practice of advanced fostering approaches (Casey Foster Programs, 2011).

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All employees of Casey are required to receive training specifically involving information about practices with the sexual minority population (Gallegos et al., 2011). Therefore, those in this study could be experiencing care that is not representative of the majority of sexual minorities in foster care. Additionally, the experiences of 10 foster youth cannot be considered representative of all sexual minority foster youth nationwide.

Summary. In addition to the standard necessities, such as shelter, food, and safety, that all foster caregivers are expected to provide, some youngsters who enter the child welfare system have additional needs that not all foster care providers can understand and handle. Youth with special needs include those identified as being sexual minorities. These youth are considered hard to place for reasons associated with their safety, age at placement, and developmental well-being, as well as with providers' lack of willingness to care for them (Kreiss & Patterson, 1997; Mallon, 1998; Clements & Rosenwald, 2007). Just as a child with physical disabilities requires more than a typically developing child in terms of care and health-related attention, sexual minority need more than their heterosexual peers in terms of care and understanding.

A serious matter in the child welfare system is the lack of safety and concern for sexual minority youth. Of the approximately 423, 773 children in out-of-home care, 12.09% have been identified as being non-heterosexual; yet their needs continue to go unmet (U. S. Department of Justice, 2010; Department of Health and Human Services [DHHS], 2010). For example, professionals have not ensured that these youth are placed in settings most conducive to their needs. Thus, attempts at permanency continue to fail. Once a child's sexual orientation is discovered, it is not uncommon for some foster

parents to have the child removed from their home (Mallon, 1998; Mallon, 2001a; Clements & Rosenwald, 2007).

Studies have clearly demonstrated how these youth desperately need foster homes or other placements where their needs will be met and their safety ensured (Wilber, Ryan & Marksamer, 2006; Lambda Legal Defense and Education Fund [Lambda Legal], 2006; Elze & McHaelen, 2009). Researchers have examined negligence, and abuse within the very placements designated to care for these children. While this maltreatment continues, characteristics of foster parents willing to care for these youth have not been investigated.

Foster Parents' Perspectives on Sexual Minority Foster Youth

It is clear that further investigation surrounding the methods of care provided to these youth needs to be done. As noted earlier, the majority (48%) of foster youth reside in non-relative foster family homes (DHHS, 2011). While this factor is publicly known, only a single study has combined issues associated with sexual minority foster youth and the perceptions of those providing their care.

Clements and Rosenwald (2007) investigated perspectives associated with foster parents and lesbian, gay, and bisexual youth in the foster care system. Four focus groups composed of 25 licensed foster parents were held to gather descriptive data about some of the perspectives foster parents hold regarding different groups of children in their care. The primarily African-American female sample ranged in age from 24 to 60, had 6 months to 10 years experience fostering, and completed high school as their highest level of education. This study was exploratory and qualitative in nature considering the limited research and the issue's sensitivity.

Findings from Clements and Rosenwald (2007) included a common misconception about the meaning of sexual minority, as well as strong negative beliefs about this group, mirroring stereotypical depictions prevalent within society. Many participants believed that these youth could be changed, that being a sexual minority was a sin and against their religiosity, and that these youth must have been sexually abused; furthermore, they feared that these youth would harm their own children. The majority of participants who had foster-parented sexual minority youth requested they be removed once discovering their sexual orientation. Additionally, differences existed in beliefs and perceptions associated with a child being lesbian or bisexual in comparison to being gay. Several participants stated they would be more likely to care for lesbian or bisexual youth than for gay youth because of personal beliefs associated with those youth being confused and having a history of being sexually abused.

Strengths and limitations. While this study provided needed insight into the perceptions of foster parents concerning sexual minority youth, several limitations of the study must be taken into account. While the sample was quite diverse in terms of age and fostering experience, it was small ($N = 25$) and non-representative of all foster parents concerning race and educational level. In addition, the ways in which data were collected could have influenced responses. These participants were openly discussing this topic in a group environment and it is possible that the views of some could have influenced responses in order to adhere to the norms of the group. This consideration's likelihood is increased with this study since the topic itself is sensitive in nature and often times taboo. This study's findings are indicative of how imperative it is that appropriate information

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concerning sexual minority youth be included in pre-service foster training. While the focus is an important beginning, more studies that are generalizable need to be used in order to move forward in our understanding of such issues.

Conclusion. Social workers hold a key role in the child welfare system. It is vital that as a profession we advocate for the advancement of services provided to all children in care. Within this effort, social workers hold an ethical responsibility to provide a voice to those oppressed within the foster children population. One group in particular is sexual minorities. To date, there are no studies on willingness to foster sexual minority foster youth.

In order to promote specialized care requirements for sexual minorities in foster care, it is imperative for us to gain an understanding of providers who are willing and able to provide safety, nurturance, stability, and the positive developmental necessities required for optimal success. Studies need to be conducted that establish the kind of providers most likely to meet these needs. Without this establishment, a large amount of our nation's children will continue to endure extreme volatility without an equal chance to lead normal healthy lives. Now is the time to identify effective measures to prevent the continuation of maltreatment and the inappropriate upbringing of sexual minority youth in care.

CHAPTER II: THE PROBLEM

Many foster children have special needs that present challenges for foster parents and families (Lightfoot, Hill, & LaLiberte, in press; Oswald, Heil, & Goldbeck, 2010; Schneiderman, Leslie, Arnold-Clark, McDaniel, & Xie, 2011; Slayter & Springer, 2011).

Numerous children have emotional or behavioral problems, while others have learning disabilities, Attention Deficit Hyperactive Disorder, physical handicaps, speech problems, or other disabilities. A considerable number of children have special medical conditions such as HIV/AIDS, allergies or asthma, diabetes, epilepsy, weight problems or problems resulting from *in utero* exposure to alcohol or drugs.

Sexual minority youth have a unique set of special needs and present a unique set of challenges for foster parents and families (Woronoff, Estrada, & Sommer, 2006). However, very little is known about sexual minority youth in foster care (Wilber, Ryan, & Marksamer, 2006), and virtually nothing is known about the characteristics of parents willing to provide the special care needed by these vulnerable and often invisible youth. This lack of knowledge makes it difficult to match sexual minority foster youth with foster parents willing to provide the care they need.

In order to ensure the placement, care, stability, and well-being of sexual minority foster youth, it is important to match them with parents willing to provide the special care they need. Matching might reduce placement disruptions, a common problem for foster children, families, and agencies, and a particular problem for children with special needs (Aarons, et al., 2010; Havlicek, 2011). Also, since most children in care who are adopted are adopted by their foster parents, matching might increase the number of adoptions, an important consideration given the large number of foster children waiting to be adopted (DeVooght, Malm, Vandivere, & McCoy-Roth, 2011; Hanna & McRoy, 2011). Finally, matching might increase the length of time and number of children parents are willing to foster, important outcomes because of the chronic shortage of foster families and the

myriad of difficulties involved in recruiting and retaining them, especially families willing to foster children with special needs (Cox, Orme, & Rhodes, 2002, 2003; Gibbs & Wildfire, 2007; Marcenko, Brennan, & Lyons, 2009; Rhodes, Orme, Cox, & Buehler, 2003; U. S. Department of Health and Human Services [DHHS], 2002).

Purpose of this Study

The primary purpose of this study is to examine the extent to which parents are willing to foster sexual minority youth. In addition, the characteristics of foster parents willing to undertake this challenge will be assessed. Ultimately, this study seeks to find an effective approach to identify better foster care placements for sexual minority youth while also potentially identifying effective linkage approaches.

Theoretical Framework

Resource Theory. Deriving from social exchange theory, the belief that social interactions consist of exchanges between people seeking to maximize gains while minimizing costs (Cropanzano & Mitchell, 2005), resource theory provides information concerning the interactions of people while considering the influence of resources on these interactions (Cook & Rice, 2006). In terms of familial interactions, resources are anything that one member can provide to another that is intended to provide assistance (Hesse-Biber & Williamson, 1984). In 1974, Foa and Foa, identified six separate groups to classify resources: money, love, information, status, service, and goods. Proponents of resource theory believe that those with greater resources are more likely to share with others in need.

In terms of foster parents and willingness to foster, resource theory could be utilized to assess the extent to which having a greater amount of resources could be linked to an increased willingness to provide care. More specifically, this theory could be utilized to test the willingness of foster parents to care for sexual minorities. Having an understanding of the resources that are linked to an increased likelihood to foster this group could greatly improve the ways in which sexual minorities are placed.

For the purposes of this study the following resources will be investigated and assessed for possible correlations with willingness to foster sexual minority youth: income; education; foster parenting experience; religious involvement; and race. Each of these characteristics were found significant in previous research regarding successful foster care placements and willingness to foster children with specialized needs.

Income, education, and experience. Income has the potential to play a key factor in the willingness of foster parents to care for sexual minorities. Having a higher income could allow services to be provided that could not be attained by those with less financial resources (i.e., specialized therapeutic services). Education is a resource in terms of the increased likelihood of having a broader range of knowledge in different areas that could assist in providing care to this group. Additionally, education could be a predictor of job status and monetary attainment. Fostering experience could prove to be a huge resource in terms of practicality and having the ability to better handle a variety of circumstances and potentially difficult situations.

Religious involvement and race. Religious involvement could serve both as a resource and a barrier in terms of willingness to care for sexual minorities. Although

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theoretically religion could be considered a resource, whether this is the case with sexual

minority youth is yet to be determined. Belonging to a religious community often affords

members a sense of support both spiritually and socially. However, the fact that some

religions condone same-sex relations could be influential on one's willingness to foster.

The final resource that will be included in this study is race. This facet could be a

predictor of a foster family's willingness based upon the fact that white people tend to

have greater access to a variety of societal resources than do minorities (Anderson &

Collins, 1998). In this regard, being white is seen as a resource.

Research Questions. Using the resources listed above, specific questions were asked

to guide the statistical analyses concerning willingness to foster. More specifically, this

study examined the willingness of foster parents to care for sexual minority foster youth,

based upon these specified characteristics and resources.

1. Are specific resources correlated with a greater willingness to foster sexual
   minorities?
2. Are specific resources correlated with a decreased willingness to foster sexual
   minorities?

Research hypotheses. The following hypotheses were formulated from the research

questions above and were primarily conceived through resource theory. Family resources

represent the independent variables and the dependent variable is level of willingness.

From these the following hypotheses were formulated.

H1. Foster mothers with greater levels the following resources will be

more willing to care for sexual minority youth: higher income; higher

level of education; more experience foster parenting; being white.

H2. Foster families with greater religious involvement will be less willing

to care for sexual minorities.

Higher Education

More Experience

Racial Majorities

Higher Income

Greater

Religious

Involvement

Willingness   **Willingness**
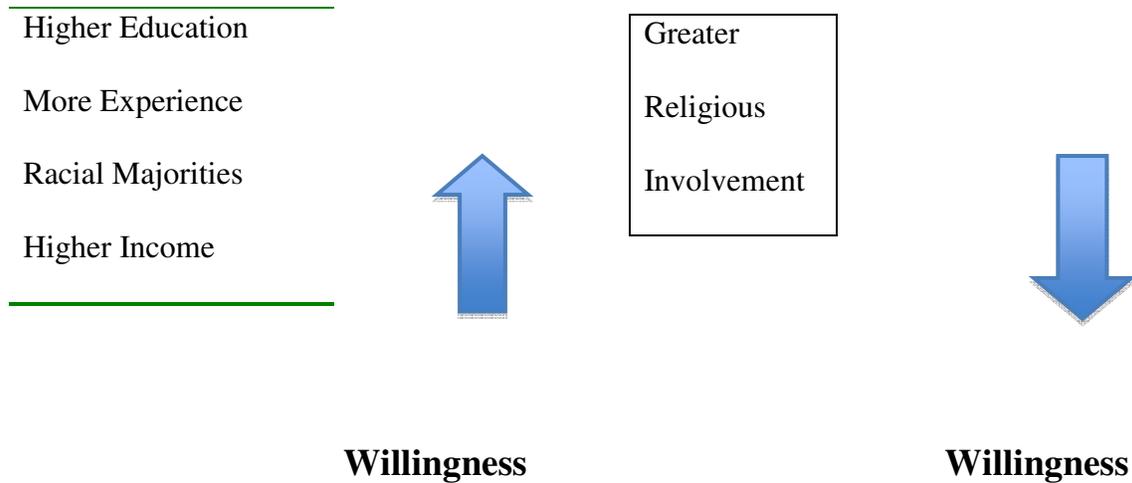
FIGURE 1. Model of Causal Relationships Among Variables

CHAPTER III: METHODS

Sample and Design

This study utilized a convenience sample of foster mothers (N = 304) that was

part of a past project regarding foster parents and family characteristics and examined

their responses through a secondary data analysis (Coakley & Orme, 2006). One question

specifically asked about foster mothers' willingness to foster sexual minority children.

Analyzing the cross-sectional design used in the larger study assisted in identifying what

types of foster mother characteristics are correlated with a greater willingness to foster these hard to place youth.

This nonprobablility sample derived from 35 different states nationwide and was identified through a list of foster parent associations online. The included respondents were licensed, kinship, non-kinship, approved, and or certified to serve as foster parents. The Institutional Review Board at The University of Tennessee approved all methods to be used based upon the requisites of studying human subjects. The focus on foster mothers in this study revolves around the fact that these are typically the heads of single-parent households, usually the primary caregiver to children, and they typically initiate the foster parent process.

Data Collection

Data were collected in the larger study from the two questionnaires that were sent to the foster mother participants over the course of nearly one year (October 2002-September 2003) (Coakley & Orme, 2006). Recruitment packets and endorsements were sent to the identified foster parent associations and distributed to potential candidates through newspaper ads, website postings, and flyers. Interested foster mothers contacted the researchers through a toll free number or via email. Responses came from two questionnaires and those participating received a gift certificate upon completion for their inclusion.

Questions seeking to gain information about: participant's age, employment, educational level, race, religious involvement, marital status, and income were utilized to gain insight regarding these foster mothers. Additionally, the participants provided

responses concerning the number of children fostered and overall parental experience. These data were used and analyzed in this study to detect the characteristics found to be more indicative of a willingness to foster sexual minorities.

Data Analysis

At first, univariate analyses were conducted to identify the frequencies, means and percentages of responses. Next, bivariate analyses were conducted to determine the extent to which the variables correlated. Correlations found to be significant between the independent and dependent variables were then used to determine the predictability and association between variables. In order to determine the extent to which the independent variables in this study were related to the dependent variables of willingness to foster sexual minorities, Spearman's Rho correlation coefficient was used since these dependent variables are rank ordered and not normally distributed (Gauthier, 2001; Agresti, 2002). Since the assumptions of Pearson's Product-Moment Correlation could not be met with the variables used in this study (i.e., variables measured at the interval or ratio levels of measurement; normally distributed variables) it was determined that Spearman's Rho was the most appropriate non-parametric test that measures the strength and association between variables (Laerd Statistics, 2012).

Measurement

The resources included in this study: income, race, educational level, religious involvement, and experience foster parenting came directly from the characteristics identified in the larger study. These individual resources represent the independent

variables and willingness to foster sexual minorities is the dependent variable. The

independent variables were operationalized as follows:

1. Foster parenting experience is a ratio level variable operationalized in number of years

providing care

2. Education is an interval variable operationalized in years of education

* It should be pointed out here that level of education was depicted as an interval level of

measurement based upon the fact that the reported measures formed a normal distribution

and since the categories available were primarily equally incremented.

3. Race was dummy coded with white as the reference category and all others grouped as

the comparison category

4. Religious involvement, as an ordinal level variable, was operationalized based upon

the occurrence of typical church or other similar religious organization attendance.

*The following responses were available for participants to choose from: 1) never; 2)

once a year or less; 3) a few times a year; 4) a few times a month; 5) once a week; or 6)

more than once a week.

5. Income, in this study, is an interval level variable and was operationalized in amount of

earned yearly income.

In terms of the dependent variable of willingness to foster sexual minorities, data

in the original study were collected using the Willingness to Foster Scale (WFS) (Cox,

2004). This scale has 70 items with responses ranging from a score of 1 to 4. This scale

was composed based upon associated literature focusing on different components of

foster care (foster parent practices, applicants and training strategies, research conducted

in the arena prior to this larger study, and assessment procedures of fostering agencies).

The scale underwent in-depth review by foster care professionals and foster parents in

order to maximize its applicability prior to implementation. The four different willingness

possibilities were coded:

1) would not be willing to foster under any circumstances

2) might be willing to foster with a lot of help and support

3) probably be willing to foster with a little extra help and support

4) would be willing to foster without any extra help or support.

Since these responses were rank ordered, Ordinal Logistic Regression was used to

determine the predictability of willingness based upon foster parents' characteristics.

Only one of the 70 items on this scale relate to fostering sexual minority youth.

Therefore, this one four point likert scale item represents the dependent variable.

CHAPTER IV: RESULTS

Results are presented in the following sections: (1) sample characteristics as

described by univariate analysis with frequencies, percentages and means; (2) bivariate

correlations used to assess the relationships between the independent variables

(resources) and the ordinal dependent variables using Spearman's Rho correlational

analysis; and (3) Ordinal Logistic Regression analysis used only with the variables found

to be significant.

Sample Characteristics

A total of 304 foster mothers nationwide completed the Willingness to Foster

Scale (WFS) surveyed in this study. Missing data were reported for income ($n = 2$) and

willingness to foster sexual minority youth ($n = 6$). Univariate analyses were run to gain a

better understanding about these independent variables and sample demographics (See

table 1). The measures of central tendency found the average (e.g., mean) level of

experience was 7 years, ranging from 0 to 34 years. The mode of experience was 3 years.

Participants reported a minimum income of less than \$2,500 ($n = 1$) and a maximum of

\$100,000 or greater ($n = 19$). The mean as well as the mode of income was between

\$50,000 and \$52,499. Level of education ranged from a minimum of 5th or 6th grade

completion ($n = 1$) to the maximum level of education reported with the attainment of a

professional degree ($n = 3$). Results indicated that the average (e.g., mean) as well as the

median of church attendance among participants was 4, indicating a few times per month.

The most reported attendance rate (e.g., mode) was 6, indicating that most participants

attended church more than once a week. The final characteristic assessed in this sample

was race, which was operationalized with the use of a dichotomous level of

measurement. Participants were asked if they were white and the available choices for

response were simply " yes or no". According to findings, 87% ($n = 265$) of this sample

reported that they were white.

Table 1. Sample Characteristics ($N = 304$)

Variable	Mean (sd)	Range
Age	44 (10)	25 – 70
Income	\$50,000- \$52,499 (9.7)	< \$2,499 - > \$100,000
Experience Fostering	7 (7.2)	0 - 34

Church Attendance	Few times a month (1.8)	Never – More than once a week
Education	Associate degree (1.5)	No school – Doctorate Degree
% White	87%	

*Note: Missing data were reported for income ($n = 2$).

A frequency analysis was run to determine the extent to which this sample was willing to foster sexual minority youth (homosexual youth as termed in study). According to findings, 40.8% of the sample stated that they would not be willing to foster a sexual minority youth under any circumstances. Twenty percent (19.7) indicated that they might be willing to foster these youth if they had a lot of help and support, while 12.5% indicated that they might be willing if they had some help and support. In terms of those willing to foster sexual minorities without any help or support, 25% of participants indicated that they would be willing to take on this task.

Table 2. Willingness to Foster Sexual Minorities ($n = 298$)

Level of Willingness	Percent	Number of Participants
Would not be willing to foster under any circumstances	40.8%	124
Might be willing to foster with a lot of help and support	19.7%	60

Might be willing to foster with a little extra help and support	12.5%	38
Would be willing to foster without any extra help or support	25%	76

*Note: Missing data were reported for willingness to foster sexual minorities ($n = 6$).

Bivariate Correlations

While assessing the relationships between the independent and the dependent variables in this study, two of the five predictor variables (independent variables) were found to be significantly correlated to the outcome variables (willingness to foster), please refer to table 3. Level of education was found to be statistically and positively correlated to willingness to foster sexual minorities ($p < .001$). Experience as a foster parent was also statistically and positively associated with willingness to foster ($p < .005$). Table 4 presents findings of these significant predictor variables as correlated with the outcome variables.

Table 3. Correlations Between Significant Independent and Dependent Variables

Variable	Willingness to Foster Sexual Minorities	
Education	Correlation	.195
	Significance	.001

Experience (years fostered)	Correlation	.133
	Significance	.022

*Note: Missing data were reported for willingness to foster sexual minorities (*n* =6).

Ordinal Logistic Regression Among Significant Variables

To determine the predictability that a foster parent would be willing to foster a sexual minority youth, ordinal regression was conducted among the variables found to be significantly correlated. Findings showed that level of education and experience fostering were significant predictors in determining the likelihood that foster parents would be willing to foster sexual minorities. According to the data, foster parents with increased levels of education were more likely than their less educated counter parts to be willing to foster these youth (*p* = .005). For a one unit increase in education, it is expected that there would be a .24 increase in willingness to foster sexual minorities. In terms of fostering experience, those with more years fostering were more likely than their less experienced counterparts to be willing to foster sexual minorities (p =.001). For a one-unit increase in experience, it is expected that there would be a .04 increase in willingness to foster sexual minorities.

Table 4. Ordinal Logistic Regression Predicting Willingness to Foster Sexual Minorities

__Variable__	__Beta__	__S.E.__	__Wald__	__Significance__
Experience	.043	.015	8.022	.005
Education	.240	.073	10.847	.001

CHAPTER V: DISCUSSION

The purpose of this study was to assess the extent to which foster parents would be willing to care for sexual minority youth based upon specific resources (characteristics). This was measured using the Willingness to Foster Scale (WFS) that represented the dependent variables across the following independent variables: income, level of education, race, experience as a foster parent, and religious involvement. A nonprobability cross-sectional sample of 304 foster mother participants completed the study's assessment. Secondary data analysis was conducted to compose and analyze an SPSS data set.

The study focused on the following questions: Are specific resources correlated with a greater willingness to foster sexual minorities? Are specific resources correlated with a decreased willingness to foster sexual minorities? The following hypotheses were derived from these questions:

I.   Foster mothers with greater levels of the following resources will be more willing to foster sexual minority foster youth: income, level of education, experience fostering, and being white.

II.   Foster mothers who are more actively engaged in religious affiliated activities will have a decreased willingness to foster sexual minorites.

These hypotheses were tested using bivariate correlations and ordinal linear regression.

Conclusions

This section will summarize and discuss the findings of each research hypothesis. Next, an interpretation of the results will be provided. Additionally, this section will identify implications for future research and practice.

Greater resources and an increased willingness to foster sexual minorities. The hypothesis that foster mothers with greater levels of resources (income, education, experience fostering, and being white) was support by two of the five resources. Based upon the data, foster mothers with higher levels of education and those with more experience fostering increases the willingness to foster sexual minorities. Each of the other resources did not prove to be statistically significant in terms of willingness to foster sexual minorities.

It is appealing to speculate about the reasons why these significant predictors of willingness were found. First, it is possible that foster parents who have more experience fostering have been exposed to youth who have identified as being a sexual minority. Likely, this exposure could influence their willingness to care for these youth in the increased direction. In addition, foster mothers with increased levels of experience have likely gone through more trainings and certification procedures that, in some areas of the country, could have provided them with the knowledge, preparation, and skills to foster sexual minorities.

In terms of the finding that foster mothers with an increased level of education are more willing to foster sexual minorities, it could be somewhat harder to predict the conditions influential in this increased willingness. However, it has been recognized in

the literature that there is a potential link in increased acceptance of sexual minorities among those in higher college grade levels when compared to their underclass counterparts (Lambert, Ventura, Hall, & Cluse-Tolar, 2006). This could be indicative of the increased willingness among foster mothers with higher levels of education.

Greater involvement with religious activities and decreased willingness to foster sexual minorities. The second hypothesis that foster mothers with greater religious involvement would be less willing to foster sexual minorities was not found to be significant. Reasons for this could be associated with the way the item was presented to participants, without any classification of which religious sect they identify with. Without this consideration, the extent to which more traditional religious belief systems that are not affirming of sexual minorities differ in willingness to foster when compared to those who practice more modern and or accepting approaches is left to be determined.

Implications for research. This study has the potential to shape a newer approach to how researchers interested in sexual minority foster youth study the most effective and beneficial types of placements in out-of-home care. Furthermore, this study depicts the need for further research to be conducted, linking competent and affirmative foster parents with sexual minorities. It is imperative to discover newer approaches to successful placement outcomes in order to reduce the unfortunate and even tragic experiences many sexual minority foster youth face.

The significant findings among foster mothers with increased levels of education and fostering experience, in relation to willingness to foster sexual minorities, presents the importance of investigation into other various foster parent characteristics that could

also be influential predictors of willingness. With only a few studies available, it is easily apparent why so much remains unknown. While the issue of sexual minorities in foster care and the associated detriments is well documented, there is a dire need for further empirically based knowledge to be gained. Research in the future should be geared toward placement recruitment efforts, the retention of competent foster parents, permanency efforts, and studies that are more longitudinal, representative, generalizable, and quantitative in nature. This study suggests that there are likely other important causal correlations between different types of foster parents and sexual minorities. Having a better understanding of these types of parents could aide in the efforts listed above.

Implications for practice. Social work, as a profession, has been at the forefront of child welfare since its inception. From advocacy to working the front lines, social workers have had a steadfast position in this arena. While the concerns that cause the need for professional involvement have not changed (e.g., neglect, abuse), the needs of different groups of youth in care have. Research such as this study could provide professionals in the field with valuable resources to find, retain, and work with foster parents who are willing to care for sexual minorities.

The NASW Code of Ethics clearly expresses the importance and expectation that social workers will treat all clients with dignity and respect, no matter what the differences may be, including sexual minorities (NASW, 2008). With the strong background social workers hold in the child welfare system, and the expectation to affirmatively serve sexual minorities, it only seems logical that this profession stays

abreast and contributes to the emerging knowledge base associated with serving these youth.

Discovering other potential sources of willing and able foster parents who have been identified to serve sexual minorities could truly advance social work practice in the child welfare sector. It is commonly recognized that social workers working for state fostering agencies face demanding job duties and workloads. Having an understanding of where to best place a sexual minority youth could drastically reduce the amount of placements many of these youth experience while also increasing successful outcomes. As a major source of support, social workers must have the skills and abilities to effectively serve sexual minority foster youth.

Limitations. Inherent in all research are limitations. This study has many limitations that must be considered prior to generalizing its findings. As a secondary data analysis, this study's findings are dependent upon data, measurements, and methods used for a separate study. While both this study and the original study looked into components of willingness, the ways in which items were presented could be considered contributors to the inability to reject the null hypotheses of the resources with insignificant findings. For example, the actual item that asked about the foster mother's willingness to care for a sexual minority used the word "homosexual" instead of a term that is more inclusive of all who do not fit the heterosexual majority. As evident in the Clement and Rosenwald study, foster parents seem to be more willing to care for lesbian females or bisexual youth when asked to select the most desirable orientations of the sexual minority groups, in comparison to gay males (2007). From this point of view; the term homosexual could

have skewed the participants' views of the different individual sexual minority groups, influencing them to be less willing.

This study did not assess the respondents' sexual orientation. This factor could have had a great impact on how to interpret findings and to further assess foster parent characteristics. In terms of the religious independent variable, the way this item was presented didn't assess religiosity itself, providing a distinction between types of religions that agree or disagree with same-sex relations in general. Simply asking how often one attends church does not sufficiently delineate the differences inherent in diverse religions and philosophies toward sexual minorities.

Another limitation in this study is the lack of representativeness of participants to the actual fostering population. First, the sample was made up of women only. While it is recognized that women are more prominent in the fostering field, it should be considered how foster fathers view caring for sexual minorities. In addition, this sample was 87% white clearly indicating a lack of diversity. Racial and cultural implications could provide a great deal of insight concerning willingness to foster sexual minorities considering the varying ideologies and acceptance rates among diverse groups.

The sampling design could be considered a limitation of this study. Being cross-sectional in nature implies that information was taken at one moment in time without follow-up or longitudinal assessing. In addition, the nonprobability sampling method used for convenience purposes decreases the study's validity. In terms of measurement, there is no longitudinal evidence that supports the Willingness to Foster Scale. This

impacts the validity and reliability of this measurement scale and needs replication prior to drawing any conclusions of its effectiveness to measure willingness to foster.

Strengths. Despite the use of a newer scale that lacks longitudinal evidence of its efficacy, this scale underwent extensive review based upon the existing literature prior to its implementation. This scale has the potential to help with future research regarding willingness and foster parents. A major strength of this study is the fact that it is the first of its kind to assess foster parent willingness in specific relation to sexual minorities. Contributing to the limited body of empirical knowledge associated with sexual minority foster youth, this study could potentially reframe how foster care workers and professionals determine placement options for sexual minority foster youth. Furthermore, this study provides statistically significant predictors of willingness to foster sexual minorities that could be used in the process of identifying potential foster parents. Additionally, the model used for statistical analysis was determined to fit appropriately and the assumption of parallel lines was not violated.

Conclusion

Despite its limitations, the current study is one of the few known to have assessed the link between foster parents and sexual minorities. Furthermore, this study is the first of its kind to use various characteristics of foster parents to identify plausible relationships with willingness to foster sexual minority foster youth. Having an understanding of different characteristics that can be linked with an increased willingness to foster sexual minorities has great potential to increase the success of placements. Having a greater awareness could help to determine who to target in recruitment

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strategies. There continues to be much to discover in terms of best practices with sexual minority foster youth. However, research, such as the current study, have evolved within the very recent past that provide the insight and knowledge needed to enhance the care of sexual minority foster youth.

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APPENDICES

Appendix A

Statistics' Output

          I.   **Frequencies**

Statistics

Education

N	Valid	304
	Missing	0
Mean		10.55
Std. Error of Mean		.089
Median		10.00
Mode		10
Std. Deviation		1.549
Variance		2.401
Skewness		-.655
Std. Error of Skewness		.140
Kurtosis		2.648
Std. Error of Kurtosis		.279
Range		11
Minimum		3
Maximum		14

Education

Mean = 10.55
Std. Dev. = 1.549
N = 304
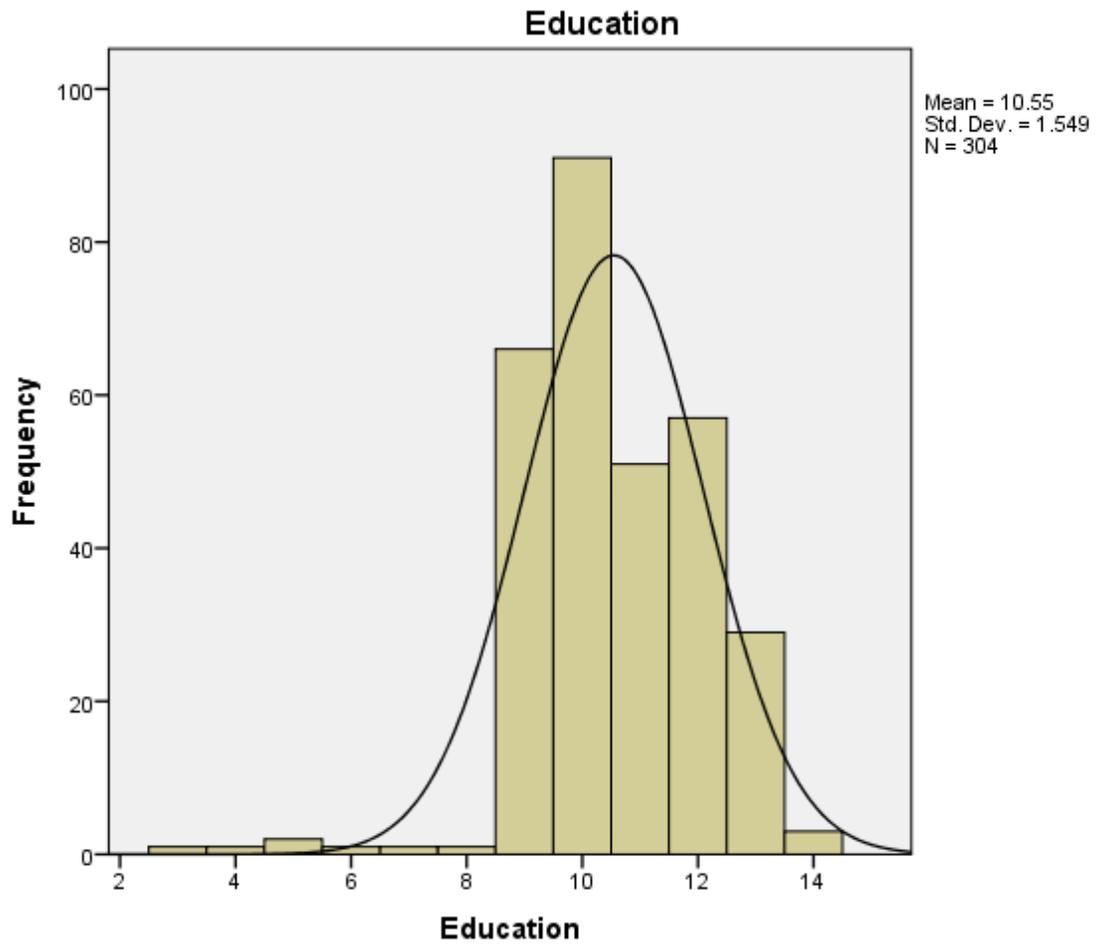
Race – White

Statistics

Race - White

N	Valid	304
	Missing	0
Mean		.87
Std. Error of Mean		.019
Median		1.00
Mode		1
Std. Deviation		.335
Variance		.112
Skewness		-2.234
Std. Error of Skewness		.140
Kurtosis		3.011
Std. Error of Kurtosis		.279
Range		1
Minimum		0
Maximum		1

Race - White

Mean = .87
Std. Dev. = .335
N = 304
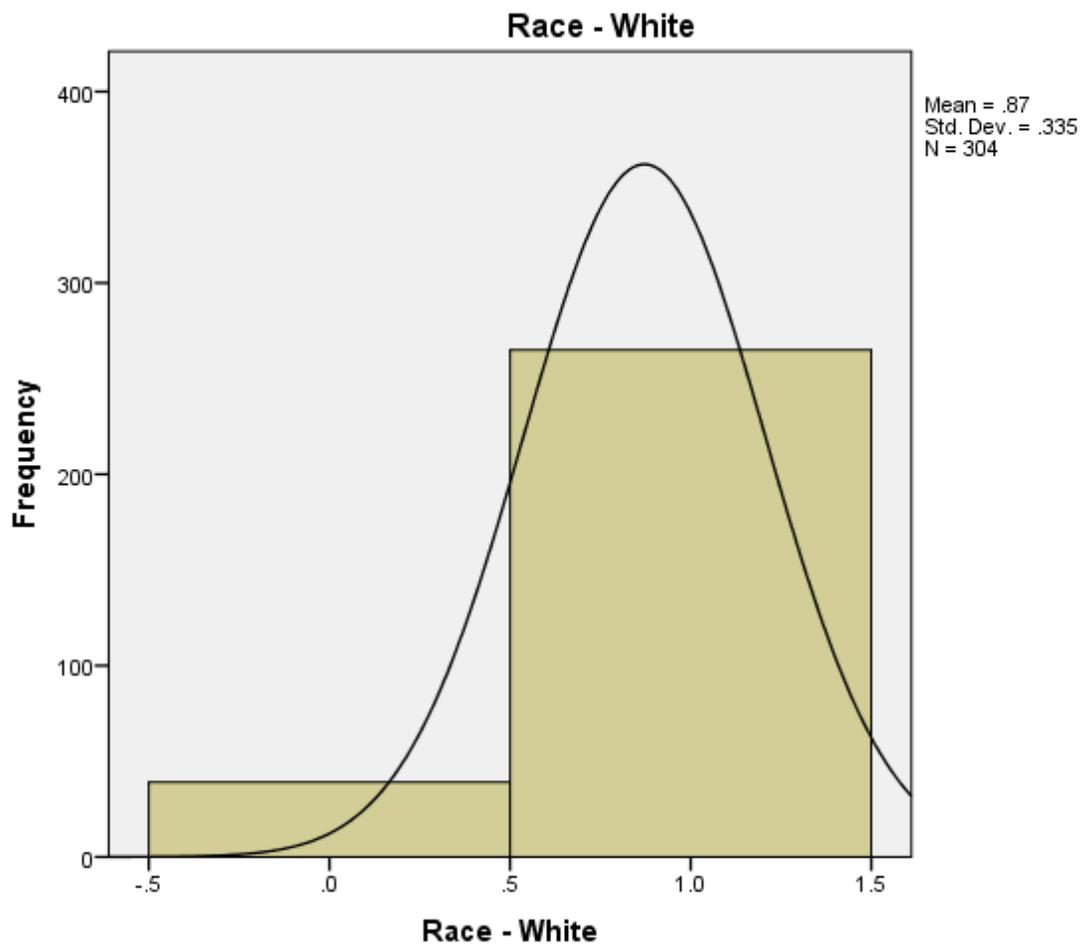
Income

Statistics

Income

N	Valid	302
	Missing	2
Mean		21.21
Std. Error of Mean		.560
Median		20.50
Mode		21
Std. Deviation		9.731
Variance		94.699
Skewness		.408
Std. Error of Skewness		.140
Kurtosis		-.613
Std. Error of Kurtosis		.280
Range		40
Minimum		1
Maximum		41

Income

Mean = 21.21
Std. Dev. = 9.731
N = 302
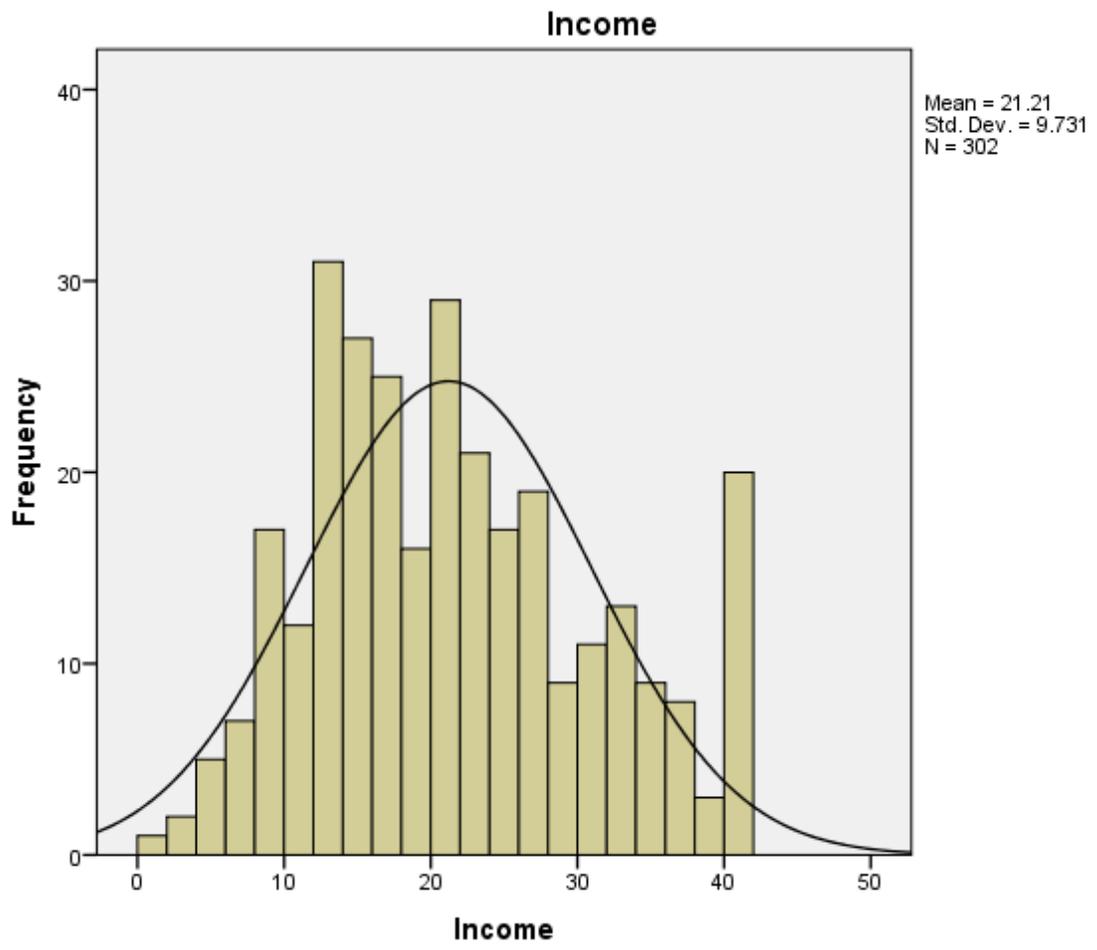
Church Attendance

Statistics

Church attendance

N	Valid	304
	Missing	0
Mean		3.89
Std. Error of Mean		.102
Median		4.00
Mode		6
Std. Deviation		1.771
Variance		3.136
Skewness		-.289
Std. Error of Skewness		.140
Kurtosis		-1.315
Std. Error of Kurtosis		.279
Range		5
Minimum		1
Maximum		6

Church attendance

Mean = 3.89
Std. Dev. = 1.771
N = 304
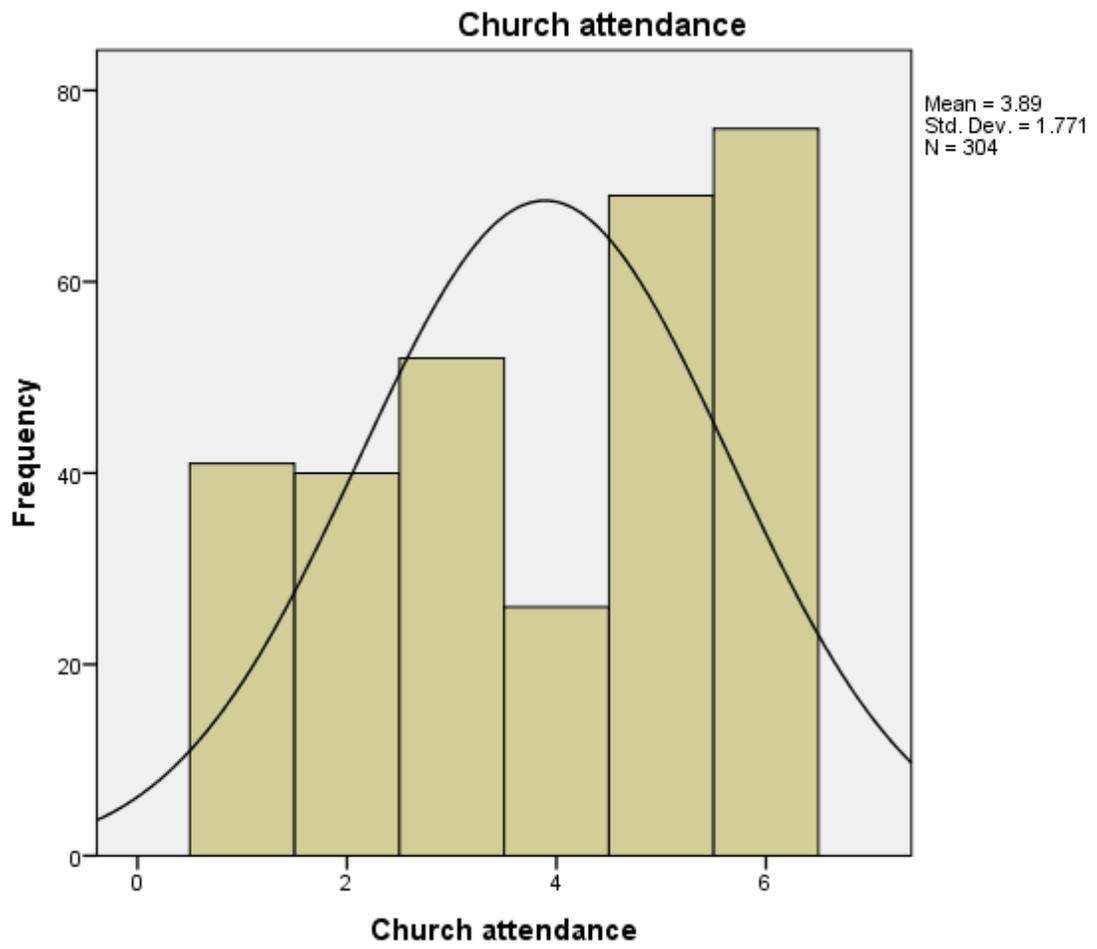
Years Fostered

Statistics

Years fostered

N	Valid	304
	Missing	0
Mean		7.26
Std. Error of Mean		.414
Median		5.00
Mode		3
Std. Deviation		7.214
Variance		52.041
Skewness		1.492
Std. Error of Skewness		.140
Kurtosis		1.623
Std. Error of Kurtosis		.279
Range		34
Minimum		0
Maximum		34

Years fostered

Mean = 7.26
Std. Dev. = 7.214
N = 304
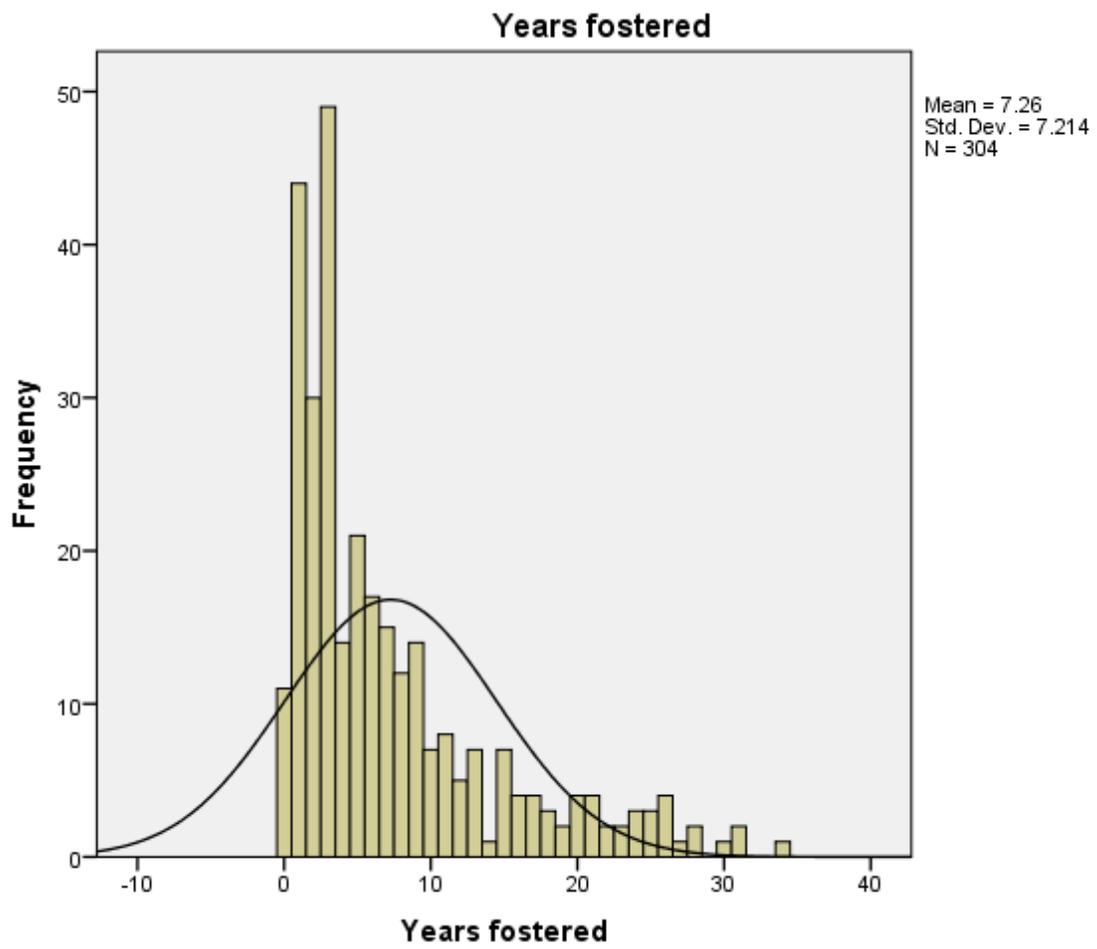
Child who is Homosexual

Statistics

Child who is homosexual

N	Valid	298
	Missing	6
Mean		2.22
Std. Error of Mean		.071
Median		2.00
Mode		1
Std. Deviation		1.233
Variance		1.520
Skewness		.396
Std. Error of Skewness		.141
Kurtosis		-1.468
Std. Error of Kurtosis		.281
Range		3

Child who is homosexual

Mean = 2.22
Std. Dev. = 1.233
N = 298
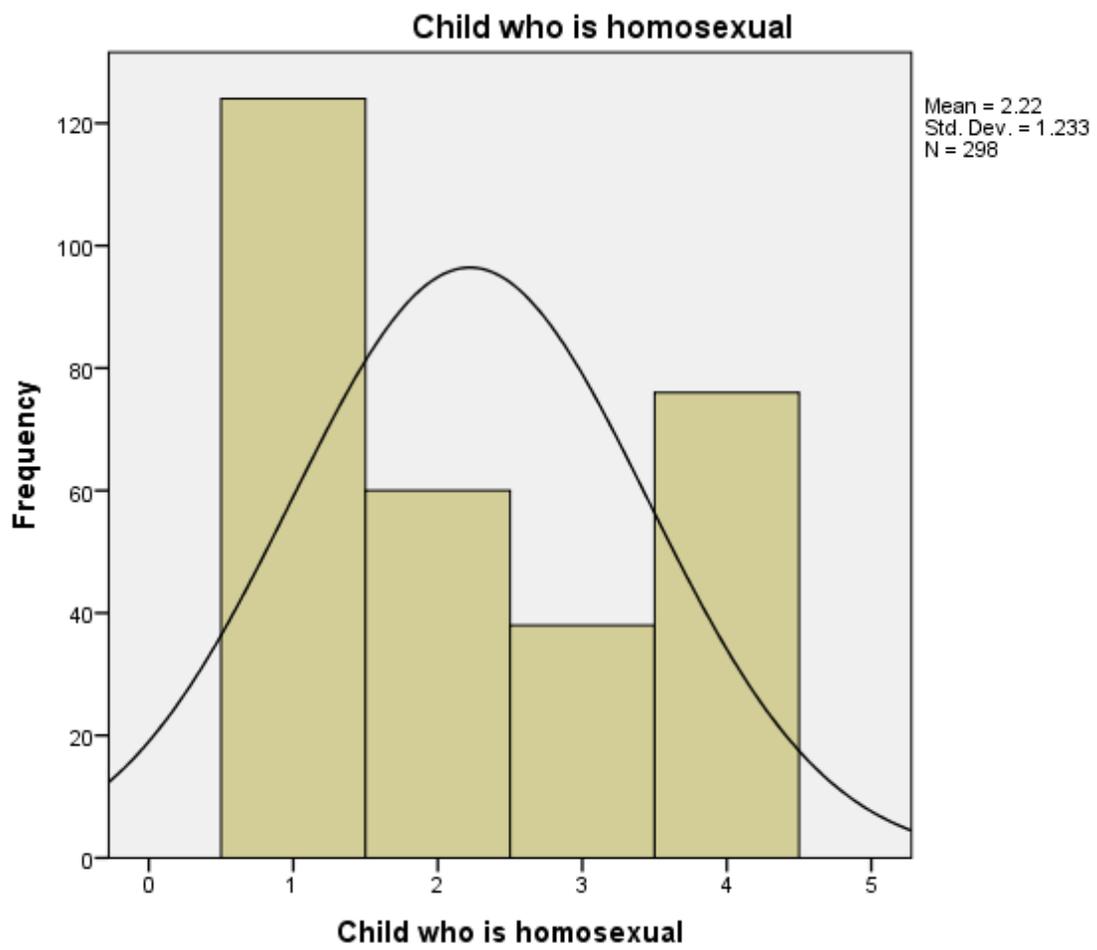
II.   Nonparametric Correlations

Correlations

			Education	Race - White	Income	Church attendance	Years fostered	Child who is homosexual
Spearman's rho	Education	Correlation Coefficient	1.000	-.036	.297**	-.038	.021	.195**
		Sig. (2-tailed)	.	.526	.000	.507	.710	.001
		N	304	304	302	304	304	298
	Race - White	Correlation Coefficient	-.036	1.000	.095	-.080	-.101	-.054
		Sig. (2-tailed)	.526	.	.099	.162	.080	.350
		N	304	304	302	304	304	298
	Income	Correlation Coefficient	.297**	.095	1.000	-.051	.060	.027
		Sig. (2-tailed)	.000	.099	.	.380	.302	.638
		N	302	302	302	302	302	296
	Church attendance	Correlation Coefficient	-.038	-.080	-.051	1.000	.075	-.097
		Sig. (2-tailed)	.507	.162	.380	.	.192	.095
		N	304	304	302	304	304	298
	Years fostered	Correlation Coefficient	.021	-.101	.060	.075	1.000	.133*
		Sig. (2-tailed)	.710	.080	.302	.192	.	.022
		N	304	304	302	304	304	298
	Child who is homosexual	Correlation Coefficient	.195**	-.054	.027	-.097	.133*	1.000
		Sig. (2-tailed)	.001	.350	.638	.095	.022	.
		N	298	298	296	298	298	298

**. Correlation is significant at the 0.01 level (2-tailed).

*. Correlation is significant at the 0.05 level (2-tailed).

III.   PLUM - Ordinal Regression

Case Processing Summary

		N	Marginal Percentage
Child who is homosexual	Would not be willing to foster under any circumstances	124	41.6%
	Might be willing to foster with a lot of help and support	60	20.1%
	Probably be willing to foster with a little extra help and s	38	12.8%
	Would be willing to foster without any extra help or support	76	25.5%
Valid		298	100.0%
Missing		6	
Total		304	

Model Fitting Information

Model	-2 Log Likelihood	Chi-Square	df	Sig.
Intercept Only	486.411			
Final	467.713	18.698	2	.000

Link function: Logit.

Parameter Estimates

		Estimate	Std. Error	Wald	df	Sig.	95% Confidence Interval	
							Lower Bound	Upper Bound
Threshold	[wfz8 = 1]	2.494	.794	9.869	1	.002	.938	4.050
	[wfz8 = 2]	3.350	.804	17.349	1	.000	1.774	4.927
	[wfz8 = 3]	3.966	.813	23.803	1	.000	2.373	5.560
Location	educ	.240	.073	10.847	1	.001	.097	.383
	fostexp	.043	.015	8.022	1	.005	.013	.072

Link function: Logit.

Test of Parallel Lines[a]

Model	-2 Log Likelihood	Chi-Square	df	Sig.
Null Hypothesis	467.713			
General	465.304	2.409	4	.661

The null hypothesis states that the location parameters (slope coefficients) are the same across response categories.

a. Link function: Logit.

Appendix B

Willingness to Foster Scale

*The scale listed below is a sample of the actual Willingness to Foster Scale (WFS). The true scale can be found online at the provided link. This scale, its contents and all aspects of its purpose are copyrighted and should not be used or replicated without the expressed consent of Casey Family Programs and or its author, Mary Ellen Cox.
Found at:
http://www.fosterfamilyassessments.org/documents/Willingness%20to%20Foster%20Scale.pdf

Willingness to Foster Scale

Many foster children have special needs. As you think about what kinds of children would be a good match for your family, it will help to think about what kinds of special needs you can handle. Below is a list of special needs that foster children might have. Please use the scale provided to indicate what kinds of special needs you are willing to deal with in a foster child.

1=Would not be willing to foster under any circumstances
2=Might be willing to foster with
a lot of help and support
3=Probably be willing to foster with a little extra help and
support
4=Would be willing to foster without any extra help or support

SCORE (1-4)

1. Child or infant who is medically fragile (medically complex)

2. Child with HIV/AIDS

3. Child with a learning disability

4. Child with mental handicaps

5. Child with physical handicaps

6. Child who has been sexually abused

7. Child with allergies or asthma

8. Child with speech problems

9. Child with diabetes

10. Child with epilepsy

11. Infant who has been exposed to alcohol or drugs in vitro

12. Child who has been physically abused

13. Child who is pregnant

14. Child who has an eating disorder (anorexia, bulimia, binge eating)

15. Child who is extremely overweight (obese)

16. Child with attention deficit hyperactive disorder (ADHD)

17. Child who has problems forming attachments

18. Child with Down's syndrome

19. Child who is terminally ill

Other things also can affect how well a child will fit into your family. Using the scale provided, please indicate your willingness to foster the following types of foster children.

1. Infant (under 1 year old)

2. Girl (1-5 years old)

3. Boy (1-5 years old)

4. Girl (6-12 years old)

5. Boy (6-12 years old)

6. Girl (13-18 years old)

7. Boy (13-18 years old)

8. Child who is homosexual

9. Child of a different race

10. Child of a different religion

11. Child of a different culture

VITA

Justin Bucchio was born and raised in Lowell, Massachusetts. He relocated to Tennessee to pursue a higher education. This journey began with undergraduate work in social work at Middle Tennessee State University and continued with his graduate studies at the University of Tennessee. As a licensed master social worker (LMSW), Justin worked with children on the Autism Spectrum in psychiatric residential treatment centers and through private in-home consultation.

Justin's interest in research and practice associated with foster youth stems from his own experience in out-of-home care. After being blessed with adoption by his paternally biological aunt and uncle, Justin's quest for knowledge surfaced. Justin believes there are answers for all youth in care and is excited to proceed into the next chapter of his life.