ABSTRACT

Title of Document: FOSTERING CHILDREN: THE IMPACT OF

CAREGIVERS' ATTITUDES ABOUT

PARENTING AND FOSTER CARE ON THE

HOME ENVIRONMENT.

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Development

This study examines the parenting of foster caregivers, the quality of the home environment and the caregivers' attitudes regarding child rearing and foster parenting. Previous research on typical families has shown that positive parenting attitudes help to create a context that is developmentally appropriate. This study employed secondary data analysis to examine parenting among 39 non-kinship and 36 kinship foster caregivers. The constructs addressed were parental attitudes of warmth, attachment, and motivation, as well as the overall home environment, and the cognitive stimulation and emotional support aspects of the home environment. The findings showed that the type of caregiver was the most significant predictor of the home environment. Parental warmth also contributed to the total HOME score and cognitive stimulation, and marginally influenced emotional support. The findings from this study have important implications for child welfare practice as it relates to training, support, and intervention with foster caregivers.

FOSTERING CHILDREN: THE IMPACT OF CAREGIVERS' ATTITUDES ABOUT PARENTING AND FOSTER CARE ON THE HOME ENVIRONMENT.

By

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Chapter 1

Introduction

The foster care system has provided a haven for children who are subjected to maltreatment. Currently, there are over 500,000 children in the foster care system (US Department of Health and Human Services [USDHHS], Administration for Children and Families, 2006). Given that so many children are in the foster care system, it is important to examine the caregiving environments that they experience. Additionally, because the well-being of foster children is a legislative mandate, it is crucial to explore the parenting practices and attitudes in this population (see Jones Harden, 2004).

The literature on low-risk families suggests a link between parenting attitudes and practices, including the creation of the home environment (Bradley, 2006). This study is designed to fill the gap in the literature on the parenting processes among foster caregivers by exploring the parenting attitudes, practices, and the home environment of kinship and non-kinship foster parents. A secondary data analysis will be conducted using data from a larger study that examined the functioning of preschool foster children.

Theoretical framework

The most fitting theoretical framework to understand the role of the home environment is Bronfenbrenner's bioecological theory. It stresses the importance of considering the context in order to understand human development. Developmental

processes are dependent on available resources that should be stable and consistent over time (Bronfenbrenner, 2005). The basis of the theory is a set of systems that are nested within each other. The first system, the microsystem, is the most significant since it involves the child and his or her immediate environment.

Within the microsystem, the family is the most important setting since it is the primary setting in which a child matures. The child interacts with the parents, siblings, and other individuals involved in his or her care. The personalities, attitudes, and behaviors of these people are important aspects of the relations between the person and the environment. In addition, there are three distinctive traits of the individual that affect the person-environment interactions: dispositions that set and maintain processes; bioecological resources of ability, experience, knowledge, and skill; and demand characteristics that invite or discourage interactions (Bronfenbrenner, 1979).

The microsystem can be considered the most important context to a child. Safe and supportive environments help sustain positive developmental outcomes for a child. Specific to foster care settings, it is important that the child welfare system facilitate the provision of safe and supportive environments for foster children (Jones Harden, 2004). Such contexts promote foster children's safety and enhance their developmental outcomes (Jones Harden, 2004).

Background on U.S. Foster Care

Policy and Epidemiology

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Although originally a part of the Social Security Act of 1935, foster care did not become a federal program until 1961 (Allen & Bissell, 2004). The program was established to provide care for children who could not remain with their families (Allen & Bissell, 2004). Foster care policy has undergone significant changes over the past few decades to improve the care that foster children receive. Two main modifications include defining the timing of reunification of children and parents and including family relatives as permanent placement options (Allen & Bissell, 2004).

Currently, over 60% of children who are in foster care are there due to neglect (i.e., failure to provide or failure to supervise; USDHHS, National Survey of Child and Adolescent Well-Being [NSCAW], 2005). The majority of the children are Caucasian (41%) and African-American (32%). There are more males (52%) than females (48%) in foster care (USDHHS, 2006). Seventy percent of these children live in either relative or non-relative foster family homes (USDHHS, 2006). Slightly more than 50% are to be reunited with parent(s) or caregiver(s), and another 20% will be adopted (USDHHS, 2006).

Foster parent characteristics

National data provide a profile of the current population of foster caregivers. Most foster caregivers are aged 40 or older, while only 24% are under the age of 35 (USDHHS, 2005). The ethnic breakdown of foster caregivers is as follows: 42% African-American; 36% Caucasian; and 15% Hispanic. Forty-five percent are single and 53% are married (USDHHS, 2005). Over half (56%) have a high school diploma or less and only 14% have a bachelor's degree or higher. Approximately one third (31%) of foster caregivers have an income level at or above \$50,000 and a little over

half (59%) have incomes ranging from \$15,000 to slightly under \$50,000. The household composition consists of two adults and three children on average (USDHHS, 2005).

Parenting, Family Structure and Processes in Typical Families

Parenting Attitudes

There is an abundance of research on parenting and its effects on child development. Based on the seminal work of Baumrind (1967) on parenting styles, there are four styles of parenting: indulgent, uninvolved, authoritarian, and authoritative. These styles encompass two dimensions: responsiveness (warmth) and demandingness (behavioral control). Indulgent parents give their children more warmth, exert less behavioral control, and avoid confrontation (Baumrind, 1991). Uninvolved parents are very low in both responsiveness and demandingness with their children, showing very little warmth and no behavioral control (Baumrind, 1991). Authoritarian parents are highly demanding and less responsive with their children, raising them in a well-ordered and structured environment with clearly stated rules (Baumrind, 1991). Authoritative parents are demanding and responsive with their children, acting assertive and supportive without intrusion or restriction (Baumrind, 1991).

Authoritative parenting is a combination of acceptance/warmth, behavioral supervision, and psychological autonomy granting (Steinberg, Lamborn, Dornbusch, & Darling, 1992; Pettit, Bates, & Dodge, 1997). An authoritative parent directs and engages in activities with his or her child that maintains and enhances all aspects of

development: physical, social, and cognitive. Further, authoritative parenting has distinct behavioral manifestations (Steinberg et al., 1992). The parent uses proactive teaching, is responsive and interested in the child's activities, and uses calm discussion when discipline is required (Pettit et al., 1997). Parents, who have regular encounters with family and friends and involvement in community organizations, serve as models of social interactions for the child. Children who experience this type of parenting have better school performance and engagement (Steinberg et al., 1992).

On the other hand, some research has documented that authoritarian parenting can be beneficial to a child's development. While authoritative parents are low in psychological control, authoritarian parents expect their children to accept their decisions without question (Baumrind, 1991). This type of parenting may benefit a child living in a high risk community environment. For example, a study of gang involvement found that higher levels of control along with parental warmth were related to lower levels of gang involvement and delinquency, especially for African-American children (Walker-Barnes & Mason, 2001).

Research has investigated parenting differences in different ethnic groups and, in particular, African-American parents. Most ethnic groups use the same techniques to teach socialization (e.g., modeling and reinforcement) as Caucasian parents: however, these techniques are based in the cultural values and behaviors of the ethnic group (Julian, McKenry, & McKelvey, 1994). This racial socialization has been found to lead to better socioemotional and academic outcomes for African-American children when the socialization is founded in pride and self-esteem rather than mistrust (Caughy, O'Campo, Randolph, & Nickerson, 2002). Additionally, African-

American parents have been found to have high parental warmth and high behavioral control Dunifon & Kowaleski-Jones, 2002). For example, Pittman and Chase-Lansdale (1999) found no significant differences in authoritative and authoritarian parenting styles on adolescent outcomes in African-American adolescents. It is possible that other factors contribute to the parenting styles of African-American parents.

On the other end of the parenting spectrum is the parent who endangers the child. This parent engages in behavior that is maladaptive for the child. These behaviors range from family conflict and violence to child maltreatment and abuse (Ayoub, 2006). Children who experience these parental behaviors view the world fundamentally differently from children who have not experienced them (Ayoub, 2006). A child with this type of parent could develop externalizing or internalizing behavior problems, have poor social skills, and delayed cognitive development that affects his or her school performance. These are the children who comprise the foster care population in the United States.

Overall, it is evident that parental warmth and responsivity are very beneficial to the positive development for any child. A caregiver's warmth and support helps to promote children's development, even under stressful conditions (Masten & Coatsworth, 1998). Warmth and responsivity encourage positive development in different ethnic groups (Walker-Barnes & Mason, 2001) and in different non-stress and stress-producing environments (Magnus, Cowen, Wyman, Fagen, & Work, 1999). Thus, the experience of parental warmth may be protective for foster children, who have typically experienced many stressors in their home environments.

Home environment

Optimal parenting is a term used by Bradley (2006) to define a facilitative home environment. This context contains interactions and surroundings that are conducive to a positive developmental trajectory for a child. Variability in these experiences lead to different developmental pathways (Bradley, Corwyn, Burchinal, McAdoo, & Coll, 2001). A child's experience in the home environment is impacted by the type of ecological niche in which he or she lives (Bradley et al., 2001).

There are six basic duties that parents perform: sustenance and safety, stimulation, support, structure, surveillance, and social integration (Bradley, 2006). Sustenance and safety require that the parent(s) provide food and shelter for the child. In addition, precautions are taken to prevent accidents to the child. Parents need to provide stimulation for the child that cultivates cognitive and social development. This is accomplished by doing such things as providing books, reading to the child, and having toys that are developmentally appropriate. Parental support encourages emotion regulation and positive developmental outcomes (Bradley, 2006). Surveillance refers to the parental monitoring of the child's whereabouts and activities. Parents nurture social integration by close ties with friends and family. Involvement in the community, church, and other organizations allows parents to provide examples of social integration, by modeling how to interact with many different types of people.

Family structure

Currently, more children live in diverse family structures than ever before.

Two-parent families, single parent families, remarriages, and cohabitation each

provide a different developmental environment for a child (Dunifon & Kowaleski-Jones, 2002; Carlson & Corcoran, 2001). It has been suggested that an optimal family configuration for a child's positive development is that of living with both biological parents. They are more involved with their children and report more cooperative parenting relationships with each other (Bronstein, Clauson, Stoll, & Abrams, 1993). These households usually have greater financial resources (Thomas & Sawhill, 2005). This family structure generally leads the child to have favorable social, psychological and academic adjustment (Bronstein et al., 2003).

Clearly, two-parent homes characterized by conflict, violence, and other dysfunctions lead to poorer outcomes for children (Katz & Woodin, 2002). Children living in single parent families, with remarried parents, or in situations of cohabitation also have more compromised developmental outcomes (Carlson & Corcoran, 2001)). They have higher levels of behavioral problems and lower cognitive test scores (Carlson & Corcoran, 2001). Parents in these family structures have been found to be less involved with their children (Carlson & Corcoran, 2001). However, other research has suggested there is variability in how other family structures affect children.

For example, children living in single parent households may experience less conflict than those in two-parent households. According to the 2001 U.S. Census Bureau, almost 51% of African-American children lived in single parent households. Research on these single parents has found that single African-American mothers who are engaged in supportive and nurturing parenting have children who have good

social skills, greater school readiness, and fewer behavior problems (Jackson, Brooks-Gunn, Huang, & Glassman, 2000; McGroder, 2000).

Relationship between parenting styles, family structure, and the home environment

Children living in higher quality environments have higher levels of competence and lower levels of behavior problems (Bradley et al., 2001). A favorable developmental environment for a child is a home with parents who are responsive, supportive, and stimulating. The contributors to the creation of such environments include individual parent characteristics, as well as their attitudes toward parenting. Additionally, other factors play a role in the creation of the home environment.

Older mothers who are married and have high levels of education provide stronger home environments for their children (Menaghan & Parcel, 1991). Higher levels of education afford the opportunity to obtain employment that is more skilled and has higher wages. The home environment may be more developmentally appropriate within families who have higher income levels (Menaghan & Parcel, 1991).

Socioeconomic status (SES) and being a single parent can lead to family adversity (e.g., Carlson & Corcoran, 2001: Pettit et al., 1997; Bronstein et al., 1993), and may affect the caregiving environment that children experience. Risk factors (e.g., very little education, high mother-child ratio in the home, and stressful life events) can impair the quality of the home environment. In a study of young children, poverty and a high number of risks were associated with less maternal warmth and a less stimulating home environment (Brooks-Gunn, Klebanov, & Liaw,

1995). When there is an extremely high level of these risk factors, parenting becomes impaired to the point that the child or children are removed from the home environment by the child welfare agency and placed in foster care (Pinderhughes, Jones Harden, & Guyer, 2007).

Parenting, family structure, and processes in foster care families

Parenting in foster care

Although limited, the parenting literature in foster care creates a very diverse picture of foster caregivers. Orme and colleagues (2004) documented that foster parent applicants had high levels of social support and used alternatives to corporal punishment. Only moderate functioning was found in parent-child role clarity, empathy for children, appropriate developmental expectations, and general family functioning (Orme, Buehler, McSurdy, Rhodes, Cox, & Patterson, 2004). Other studies have examined a variety of foster parental characteristics, such as attachment, temperament, attitudes, and perceptions. Dozier and colleagues (2001) found that approximately half of foster caregivers who had secure attachments as children are able to develop a secure attachment with a foster child. Relationships between caregivers and foster children were positive in both kinship and non-kinship homes. Foster caregivers also have been rated high on support for foster children's health needs, educational development, and extracurricular activities (Berrick, 1997).

To a limited extent, literature on foster caregivers has focused on parenting attitudes (Orme et al., 2004; Jones Harden et al., in press). Among the attitude constructs found to be salient among foster caregivers are attachment/commitment to

the foster child, motivation, perspective-taking, and developmental expectations. Jones Harden and colleagues (in press; 2004) have documented that differences in parenting attitudes between kinship and non-kinship caregivers were based on demographic differences between the two groups (e.g., marital status, income, education). Specifically, kinship caregivers reported being less warm, being more overprotective, and having more conflict and anger only when they were older and single (Jones Harden et al., 2004). Fewer resources and lack of child welfare agency support could leave kinship caregivers at a disadvantage (Coakley, Cuddeback, Buehler, & Cox, 2007).

Home environment

The literature is limited and mixed on the home environments experienced by children in foster care. In their review of foster family characteristics, Orme and Buehler (2001) note that studies varied in their results. The assessment of the physical home environment ranged from 99% of the homes being comfortable and safe in one study to a significant number having poor quality environments in another. The evaluation of the socioemotional climate across studies placed the number of foster families at-risk from none to 18%. Income is one variable that is associated with better quality living environments among foster caregivers (Simms & Horwitz, 1996).

Income plays a significant role in parenting behavior and the home environment they create (Berger, 2004). Compared to two-parent families, cohabiting couples invest little in the home environments they create (Berger, 2004). Lower income families, especially single parents, have fewer resources with which to

construct a healthy environment for children's development. In addition, Berger (2004) found that lower income families have a propensity to use harsh discipline practices, such as spanking. These findings are particularly relevant to kinship foster families, who have been documented to have fewer resources than non-kinship foster families.

Home environment was also examined in a study comparing parenting between biological and foster parents (Linares, Montalto, Rosbruch, & Li, 2006). The biological parents of the foster child were younger, more likely to be unmarried, and had higher levels of psychological distress (Linares, et al., 2006). However, both the biological parents and the foster parents were found to be similar in disciplines on all levels except one. Foster parents had higher clear expectations than the biological parents (Linares et al., 2006).

A burgeoning strand of research has examined the role of the type of foster caregiver with respect to the quality of the home environment. Data collected on the physical environment of the home showed that the general upkeep of the home was very good for both kinship and non-kinship caregivers (Berrick, 1997). However, kinship caregivers scored lower than non-kinship caregivers where safety was concerned. Specifically, kinship caregivers scored lower regarding home repairs (e.g., walls or electrical fixtures) and general safety precautions (e.g., having a fire extinguisher or first aid kit). The neighborhood conditions were slightly better for non-kinship caregivers when compared to kinship caregivers although there was not a significant difference (Berrick, 1997).

The NSCAW longitudinal study assessed the home environment in the One Year in Foster Care data analysis report. Scores were similar in both kinship and non-kinship home environments on all individual indicators (USDHHS, 2005). In the home environment subscales, kinship caregivers reported higher emotional responsiveness but were similar to non-kinship caregivers in cognitive stimulation and use of discipline. Age of the caregiver was found to be a salient predictor of the quality of the home environment. For children under the age of three and between the ages of six and ten, there was a more favorable social and emotional environment if the caregiver was between the ages of 35 and 44 (USDHHS, 2005).

Rationale and overview for current study

Although there is a limited but growing literature on parenting processes among foster families, no studies were found that assessed the relation between foster care home environment and the parenting attitudes of the foster caregivers. The home environment has been defined in studies as an assessment of supportive parenting (Pettit et. al., 1997), safety and emergency preparedness (Berrick, 1997), and has been examined in relation to family structure and behavioral outcomes (Carlson & Corcoran, 2001). As Bradley (2006) stated, parental provision of sustenance and safety, stimulation, support, structure, surveillance, and social integration constitute a high quality home environment. Clearly, the home environment is an important context for a child to thrive developmentally. It is important to examine these parenting processes among foster caregivers. If the attitudes of the caregiver are highly positive on both general childrearing and specific to their roles as foster

caregivers, the home environments provided to foster children should enhance the social, emotional, and cognitive aspects of their development.

The purpose of this study is to investigate the parenting of foster caregivers. Specifically, the study will employ secondary data analysis to examine the quality of the home environment and the caregivers' attitudes regarding child rearing and foster parenting. In addition, a major goal is to discern if there are differences between kinship and non-kinship foster care environments. Finally, this study aims to explore the contribution of caregiver characteristics and parenting attitudes to the quality of the home environment. With this in mind, the following hypotheses were proposed:

Hypothesis 1. Foster caregivers' positive attitudes about child rearing will be associated with a high quality home environment.

Hypothesis 2. Foster caregivers' positive attitudes about foster parenting will be associated with a high quality home environment.

Hypothesis 3. Kinship caregivers will have fewer resources, more compromised parenting attitudes, and provide lower quality home environments than non-kinship caregivers.

Hypothesis 4. Foster caregiver attitudes will contribute to the quality of the home environment beyond the influence of foster home type.

Chapter 2

Methodology

This study employed secondary data analysis, using data from a larger study investigating the cognitive and socioemotional functioning of preschool foster children. The study was conducted in a suburban county in the mid-Atlantic region. The county was comprised of a diverse population with a relatively high number of children in the foster care system.

Participants

Seventy-five foster caregivers agreed to participate in this study; the female caregiver was the main respondent. Each foster family had one foster child in the home. The average age of the foster child ranged from four to seven with a mean of 5.3 years (SD = .83). Fifty-two percent were boys and 48% were girls. The majority of the foster children were African-American (76%). Twenty-four percent had two children under the age of 18 in the home, 25% had three, 20% had four, and 31% had five or more children under 18. Over 52% had two adults in the household and 35% had only one. Household size varied from two up to eleven.

The majority (71%) of the foster caregivers were African-American. The mean age of the foster caregiver was 48.4 (SD =11.6) with an age range from 19 to 80. More than half (53%) of the participants had more than five years experience as a foster caregiver, 38% had less than five years, and 10% and less than one year experience. The level of education varied among the participants. Eight percent had less than a high school education, 30% graduated from high school, 42% had an

associate's degree or some college education, 11% earned a bachelor's degree, and 9% had a master's degree or higher. The employment status of the foster caregivers was reported as 31% not working and 69% working either full-time or part-time. Fifty-two percent of the participants were non-kinship caregivers and 48% were kinship caregivers. See Table 1 for a breakdown of demographic characteristics of the sample by caregiver type.

Sixty-one percent of the foster caregivers were not married. Thirty-nine percent of the foster caregivers were married and provided demographic information on the male foster caregiver. The majority (69%) of male caregivers were African-American. The mean age was 48.4 (SD = 11.09) with an age range from 29 to 70. The educational level of the male caregivers was reported as follows: 13% had less than a high school education, 31% graduated from high school, 31% had an associate's degree or some college education, 9% had earned a bachelor's degree, and 16% had earned a master's degree or higher. Thirteen percent of the male caregivers were not employed at the time of this study and 87% were employed either full-time or part-time. The yearly income for the participants was quite varied. The mean annual income was \$54, 618 with a range from no earnings to over \$160,000 a year.

This study is part of a larger study on the cognitive and socioemotional functioning of preschool foster children (Jones Harden et al., 2004). Two local child welfare agencies in a Mid-Atlantic region were contacted to participate in a study on the quality of foster family care. The child welfare agencies were located in a suburban county that had a diverse population characterized by a wide range of yearly

Table 1. Demographic differences of non-kinship and kinship foster caregivers

Table 1. Demographic diffe		
Characteristics	Non-kinship caregivers	Kinship caregivers
	(n = 39)	(n = 36)
	%	%
Marital status		
Married	51	25
Unmarried	49	75
Age		
<20	0	3
21 - 30	5	6
31 - 40	13	22
41 - 50	41	30
51 - 60	23	25
> 61	18	14
Race		
African American	62	81
Other	38	19
Years of education		
< High school	8	9
High school graduate	18	43
Associate degree	49	34
Bachelor degree	10	11
Advanced degree	15	3
Employment		
Part/full time	67	72
Unemployed	33	28
Yearly income		
<10,000	0	6
10,000 - 19,999	8	14
20,000 - 29,999	3	14
30,000 - 39,999	5	11
40,000 – 49,999	5	17
50,000 - 59,999	23	22
60,000 - 74,999	25	8
>75,000	31	8
Years as foster caregiver		
< 1 year	8	11
< five years	36	40
> 5 years	56	49
Number of children in home		
1 - 2	36	31
3 - 4	44	47
5 – 6	15	14
7 - 8	5	8

incomes, ethnicities, and ages. A letter from the program administrator was provided as written approval for the research staff to conduct the study.

Initially, the agency caseworkers informed the foster families of the study. A letter describing the project was then sent to each foster family by the research staff. Each family was later contacted by a staff member of the project to request their participation. Seventy-five families agreed to do so. The study employed census sampling and recruited exactly 75 participants who met study criteria.

Before any contact was made with the participating families, informed consent was received. In cases in which parental rights had been terminated, the child welfare agency responsible for the child gave informed consent. If the parental rights were not terminated, the biological parent of the foster child was contacted and the nature of the study was explained to them.

After the informed consent was received from the child welfare agency or the biological parent, the participating foster families were contacted. The research study was explained to foster caregivers and informed consent was received from each foster family. Each family received monetary compensation for their participation and each child received a developmentally appropriate gift.

There were two data collection sessions. The measures utilized in this study were part of the first session. A research staff member arranged to visit the foster family home. Observational data on the home environment were collected by the staff member, as well as maternal report data from several questionnaires. Specific to this study, each foster caregiver participating in the study was administered the

demographic questionnaire, the Parental Attitudes towards Child Rearing (PACR), and the Foster Parent Attitude Questionnaire (FPAQ).

Measures

Demographic questionnaire. Each participant completed a background questionnaire by self-report. The information collected included family background such as the total number of children and adults in the home and the age, gender, and ethnicity of the foster child. The caregivers provided information as to the type of caregiver, age, education, income, employment status, marital status, and the number of years as a foster parent.

Parental Attitudes towards Child Rearing (PACR; Easterbrooks & Goldberg, 1984). This instrument is a 65-item measure used for the assessment of parental attitudes and is completed by participants using self-report. It uses a six-point Likert scale and the responses range from "strongly disagree "to "strongly agree." The instrument has three subscales: warmth and sensitivity, conflict and anger, and strictness and overprotectiveness. Warmth and sensitivity are evaluated by such questions as "I express affection by hugging, kissing and holding my child" and "I encourage my child to be curious, to explore and question things." Conflict and anger are assessed by items such as "When I am angry with my child, I let him/her know it" and "I often feel angry with my child." Strictness and overprotective are shown in the following items: ""I do not allow my child to question my decisions" and "I try to keep my child away from children or families who have different ideas or values from our own." Internal reliability on the sub-scales ranged from .58 to .78 (Goldberg & Easterbrooks, 1984) and from .69 to .89 (Jones Harden et al., 2004)

using Cronbach's alpha. Because warmth is a construct that has been documented as salient in predicting parenting practices in typical and atypical families, this was the only subscale used in the current study.

Foster Parent Attitudes Questionnaire (FPAQ; Jones Harden, D'Amour, Vick, & Pandohie-Johnson, in press). This measure was developed for use in the current study and is designed in two different forms. The instrument for non-kinship foster caregivers consists of 27 questions. The instrument for kinship caregivers has 31 questions. The additional questions focus on the caregiver's attitude on fostering a relative's child. Responses are given on a 5-point Likert scale ranging from "strongly agree" to "strongly disagree." Participants complete the questionnaire using selfreport. The measure assesses six constructs: attachment, negative experience, developmental expectations, motivation, self-reliance, and perspective-taking. In addition, a seventh factor relating to biological parents was found to add to the explanatory variance (Jones Harden et al., in press). Attachment is assessed by items such as "My foster children are my own children" and "Raising my foster child in the most important thing in my life." Motivation is evaluated with items such as "I decided to take foster children to fill a space in my life." Developmental expectations are found in items such as "When foster children have to change placements, they are able to bond to their new parents easily." Negative experience is assessed with items such as "I do not get too attached to my foster children because they always have to leave." Self-reliance is shown in items such as "When I need help with my foster child, I find it on my own." Perspective-taking is evaluated with items such as "It is best for foster children if foster parents learn to let them go when they have to leave."

How caregivers perceived biological parents were shown in items such as "Visits with biological parents generally cause pain for foster children." Internal reliability using Cronbach's alpha was .83 and test-retest reliability was also .83 (Jones Harden et al., in press). Because the constructs of attachment and motivation were found to be the most robust, these were the only subscales used in the current study.

Early Childhood Home Observation for the Measurement of the Environment (EC-HOME; Caldwell & Bradley, 1984). Different versions of this measure have been created for different age groups and the EC-HOME focuses on children ages four and five. It contains 55 statements and data is collected by a member of the research staff during a home interview through observation and maternal report. The EC-HOME consists of eight subscales: learning stimulation, language stimulation, physical environment, responsivity, academic stimulation, modeling, variety in experience, and acceptance. Learning stimulation is based on items such as "Child has at least ten children's books." Language stimulation is assessed by items such as "Parent teaches child simple verbal manners (please, thank you, I'm sorry)." The physical environment is evaluated on items such as "Building appears safe and free of hazards." Responsivity is noted in such items as "Parent answers child's questions or requests." Academic stimulation is measured by items such as "Child is encouraged to learn numbers." Modeling is assessed by items such as "TV is used judiciously." Variety of experience is evaluated with such items as "Child has been taken to museum in the past year." Acceptance is show in such items as "Parent neither slaps nor spanks the child during visit." Two larger subscales, emotional support and cognitive stimulation, can be obtained from the smaller subscales (Menaghan &

Parcel, 1991). Internal consistency reliability has been found to greater than .80 using Cronbach's alpha and there is reasonable concurrent and predictive validity (see Bradley, 1993).

Chapter 3

Results

In this section, the results of the data analysis are presented. Two of the subscales of the Foster Parent Attitudes Questionnaire (FPAQ) and one subscale from the Parenting Attitudes on Child Rearing (PACR) were examined as predictors of the home environment. These subscales are Attachment and Motivation from the FPAQ and Warmth from the PACR. The dependent variables were the total Early Childhood Home Observation for the Measurement of the Environment (EC-HOME) score and the EC-HOME subscales of Emotional Support and Cognitive Stimulation. A significance level of .05 was used in all analyses.

Relation between demographic characteristics and key variables

T-tests were conducted on the demographics characteristics related to the female foster caregiver to examine differences between kinship and non-kinship foster caregivers (see Table 2). The seven characteristics included age, ethnicity, years of education, employment status, marital status, yearly income, and years as a foster caregiver. Significant differences between kinship and non-kinship foster caregivers were found on three of these characteristics. Non-kinship foster caregivers had higher yearly incomes (t = 4.14, p = .00) than kinship foster caregivers. Non-kinship foster caregivers were more likely to be married (t = 2.39, p = .019) and to have more education (t = 2.37, p = .02) than were kinship foster caregivers.

Table 2. T-tests comparing demographic characteristics and parenting of kinship and non-kinship caregivers

	Non-kinship (n = 3	_	_			
Demographic						
Characteristics	M	SD	M	SD	t	
Demographic Charac	rteristics					
Marital status	.51	.51	.25	.44	2.39*	
Age	49.41	11.22	47.39	12.08	.75	
Race	.62	.49	.81	.40	-1.82	
Years of education	14.38	2.60	13.11	1.91	2.37*	
Employment	.67	.48	.72	.45	52	
Yearly income	67001	30881	41203	21996	4.14*	
Years as caregiver	2.49	.64	2.37	.69	.75	
Parenting Variables						
Cognitive stimulation	24.61	3.58	21.22	5.95	3.01*	
Emotional support	14.01	1.56	12.67	3.46	2.20*	
Total HOME	39.99	3.90	36.64	4.73	3.34*	
Warmth	117.79	8.06	115.50	8.45	1.20	
Attachment	12.32	2.42	12.61	2.03	57	
Motivation	11.82	2.28	10.42	2.61	2.46*	

^{*} p < .05

Differences were also found between kinship and non-kinship caregivers on the key parenting variables Specifically, non-kinship caregivers provided better home environments, as evidenced by higher cognitive stimulation, emotional support, total HOME scores. Additionally, non-kinship care providers reported higher levels of foster parent motivation than kinship caregivers (see Table 2 for results of t-tests).

Bivariate correlations were used to examine the relationship between key variables (see Table 3). The first correlation looked at the relationship between warmth, attachment, and motivation and emotional support, cognitive stimulation,

and the total HOME score. Parental warmth was significantly associated with cognitive stimulation

(r = .27, p = .02). The total HOME score was significantly correlated with foster parent motivation (r = .34, p = .00) and parental warmth (r = .33, p = .00). No significant results were found for foster parent attachment.

Table 3. Correlations of Parenting Attitudes and Cognitive Stimulation, Emotional Support, and total HOME.

Parenting	Cognitive	Emotional	Total
Attitudes	Stimulation	Support	HOME
Attachment	.11	.06	.22
Motivation	.14	.07	.34**
Warmth	.27*	.22	.33**

^{*} p < .05. ** p < .01.

These same relationships were examined by caregiver type (see Table 4). Several significant results were found for non-kinship foster caregivers. Foster parent attachment was associated with cognitive stimulation (r = .44, p = .00) and the total HOME score (r = .39, p = .02). Foster parent motivation correlated with cognitive stimulation (r = .35, p = .03), emotional support (r = .38, p = .02), and the total HOME score (r = .45, p = .00). Parental warmth was associated with cognitive stimulation (r = .44, p = .00 and the total HOME score (r = .38, p = .02). No significant findings were found between these variables for kinship foster caregivers.

Table 4. Correlations of Parenting Attitudes and Cognitive Stimulation, Emotional Support, and total HOME by caregiver type.

Parenting	Cognitive	Emotional	Total
Attitudes	Stimulation	Support	HOME

	Non-kinship c	caregivers $(n = 39)$	
Attachment	.44**	.30	.39*
Motivation	.35*	.38*	.45**
Warmth	.44**	.17	.38*
	Kinship car	regivers $(n = 36)$	
Attachment	08	04	.13
Motivation	11	16	.11
Warmth	.13	.23	.23

^{*} p < .05. ** p < .01.

Table 5. Correlations of Demographic characteristics with Attachment, Motivation, Warmth, Cognitive Stimulation, Emotional Support, and total HOME.

Demographic Characteristics	Attach	Motivation	Warmth	Cognitive Stimulation	Emotion Support	Total HOME
Income	14	.18	.16	.26*	.03	.32**
Marital status	19	.32**	.04	11	.12	.02
Education	.06	.10	.25*	.34*	.12	.40**
Race	09	25*	18	06	00	28*

^{*} p < .05. ** p < .01.

Bivariate correlations were also conducted to examine the relation between demographic and key study variables separately for kinship and non-kinship foster caregivers (see Table 5). Yearly income correlated with the total HOME score for non-kinship foster caregivers but was associated with emotional support for kinship foster caregivers. Marital status correlated with motivation for non-kinship foster caregivers and with both cognitive stimulation and emotional support for kinship foster caregivers. The level of education was found to be associated with both cognitive stimulation and the total HOME score for non-kinship foster caregivers. Education correlated with warmth for kinship foster caregivers.

Table 6. Hierarchical regression analysis for parenting attitudes on total HOME.

Attitude	\mathbb{R}^2	ΔR^2	В	t	p
Caregiver type	.13(a)	.13	3.28	3.23	.00
Warmth	.21(b)	.08	.16	2.68	.01
Attachment	.25(c)	.04	.43	1.95	.06
Motivation	.27(d)	.02	.27	1.21	.23

⁽a) Predictors: Cg type (numeric)

Table 7. Hierarchical regression analysis for parenting attitudes on cognitive stimulation.

Attitude	R^2	ΔR^2	В	t	p
Caregiver type Warmth Attachment Motivation	.11(a)	.11	3.30	2.91	.01
	.16(b)	.05	.14	2.14	.04
	.17(c)	.01	.22	.88	.38
	.17(d)	.00	08	32	.75

⁽a) Predictors: Cg type (numeric)

Influences on the home environment

To examine the influence of warmth, attachment, and warmth on the home environment, three hierarchical regression analyses were performed. Given the differences found among the relations between variables by caregiver type, this variable was entered first in all regressions. Caregiver type was followed by warmth, attachment, and motivation. Three dependent variables were examined: the total HOME score, cognitive stimulation, and emotional support. For the HOME total score, two significant predictors were found (see Table 6). They were caregiver type

⁽b) Predictors: Cg type, PACR Warmth

⁽c) Predictors: Cg type, PACR Warmth, FPAQ Attachment

⁽d) Predictors: Cg type, PACR Warmth, FPAQ Attachment, FPAQ Motivation

⁽b) Predictors: Cg type, PACR Warmth

⁽c) Predictors: Cg type, PACR Warmth, FPAQ Attachment

⁽d) Predictors: Cg type, PACR Warmth, FPAQ Attachment, FPAQ Motivation

 $(R^2 = .13; p = .00)$ and warmth $(R^2 = .19; \Delta R^2 = .08; p = .01)$. A trend showed for attachment $(R^2 = .25; \Delta R^2 = .04; p = .06)$.

Hierarchical regression analyses were also conducted for the two subscales of the HOME. Caregiver type (R^2 = .11; p=.01) and warmth (R^2 = .16; Δ r² = .05; p=.04) significantly predicted the cognitive stimulation aspect of the home environment (see Table 7). Similarly, caregiver type (R^2 = .06; p=.03) was the only significant predictor of the emotional support aspect of the home environment (see Table 8). Warmth was marginally predictive of emotional support (R^2 = .10; p =.09).

Table 8. Hierarchical regression analysis for parenting attitudes on emotional support.

Attitude	R^2	ΔR^2	В	t	p
Caregiver type Warmth Attachment Motivation	.06(a) .10(b) .10(c) .10(d)	.06 .04 .00 .00	1.35 .06 .06 07	2.18 1.70 .41 48	.03 .09 .69

(a) Predictors: Cg type (numeric)

(b) Predictors: Cg type, PACR Warmth

(c) Predictors: Cg type, PACR Warmth, FPAQ Attachment

(d) Predictors: Cg type, PACR Warmth, FPAQ Attachment, FPAQ Motivation

Chapter 4

Discussion

The home environment is a vital context for the development of a child. Arguably, the family setting is the critical context which can promote or impede health child development (Bronfenbrenner, 1979). Similarly, the quality of the home environment is important for healthy child development. With this in mind, this study examined the family and home environments of children in foster care. Specifically, the study investigated the contribution of parental warmth, foster parent attachment, and foster parent motivation to the home environments provided by both kinship and non-kinship foster caregivers.

Parental warmth

The findings support the first hypothesis that the foster caregiver's positive attitude about child rearing would have a positive impact on the home environment for children in foster care. Parental warmth contributed to the presence of cognitive stimulation and a good home environment in general. Parental warmth has been found to be a major determinant of positive parenting (e.g., Pettit et al., 1997). It has been linked in multiple studies to optimal child outcomes (Steinberg et al., 1992). Further, parental warmth is a key aspect of authoritative parenting (Baumrind, 1991). This parenting style promotes cognitive skill development (Ayoub, 2006) and positive school adjustment (Pettit et al., 1997). The provision of stimulating interactions and learning materials in the home, the processes tapped in the cognitive stimulation component of the HOME scale, is also more likely with this approach to

parenting (Ayoub, 2006). Warmth on the part of foster caregivers can facilitate the adjustment of the foster child to his or her new surroundings. Additionally, it can enable the foster caregiver to be more tolerant of a child's behavior and more likely to use less harsh discipline (Doelling & Johnson, 1989).

Foster parent attachment and motivation

The findings were ambiguous regarding the second hypothesis that the foster caregiver's positive attitude about foster parenting would be associated with a high quality home environment for children in foster care. The foster parenting attitudes examined were attachment and motivation.

It was surprising to find that foster parent attachment was not associated with the overall quality of the home environment, although a small trend was found. Attachment is related to the parent-child relationship and is based on the emotional security that a child has towards his or her parent, which should be stable over time. In foster care, stability and security are in question. As a consequence, many foster children have disordered attachments (Jones Harden, 2004). Because a foster caregiver does not know what length of time a particular child will be living in the home, they may be reluctant to develop an attachment to a foster child (Coakley et al., 2006). Thus, attachment may not have the same meaning for positive parenting processes with foster parents as it does in more permanent families.

However, foster parent motivation did influence the general quality of the home environment, a finding consistent with the second hypothesis. Foster parent motivation has been implicated in the stability and quality of the foster home (Tyebjee, 2003). The assumption was that foster parent motivation would also

influence home environment quality. The motivation to become a foster parent centers on the benefits to the child (making a difference in the child's life and providing a positive family experience) and the adult (increasing family size and adding meaning to life) [see Tyebjee, 2003]. Helping abused and/or neglected children, as well as social concern in general and for the community, may facilitate emotional connections between foster children and both kinship and non-kinship caregivers (Cole, 2005). Additionally, kinship caregivers agree to become a foster caregiver to keep the child within the family domain and to prevent the child from entering the foster care system (Cole, 2005). Thus, motivated foster parents may be more committed to providing a high quality home experience for the children in their care.

Non-kinship and kinship caregivers

More non-kinship foster caregivers were married in comparison to kinship foster caregivers, the majority of whom were unmarried. Single parent families have demonstrated more compromised functioning on the overall home environment, as well as the cognitive stimulation and the emotional support subscales (Berger, 2004). This does not support previous research on single African-American mothers, who can have a supportive, nurturing parenting style (Jackson, Brooks-Gunn, Huang, & Glassman, 2000; McGroder, 2000).

Other demographic factors, such as income, also have a great impact on the home environment. Non-kinship foster caregivers had higher incomes than kinship foster caregivers. Since more non-kinship caregivers were married, it would be expected that they would have a higher household income than kinship foster

caregivers. In today's society, it is a norm for two spouses to be employed.

Additionally, education has an impact on income. Non-kinship foster caregivers had on average an educational level of associate's degree and higher. The highest level of education for kinship foster caregivers was an associate's degree. These demographic differences could be related to the diversity noted in the location of the study.

However, the participants in this study greatly differed from the foster caregivers who are participating in the NSCAW research project. In this study, there were more African-American foster caregivers (71%) than in the NSCAW study (52%) [USDHHS, 2005]. More foster caregivers in this study were unmarried (61%) and, in the NSCAW, the majority of foster caregivers were married (55% kinship and 73% non-kinship) [USDHHS, 2005].

Education is another area of difference. The NSCAW based education at the high school level (i.e., GED or higher) [USDHHS, 2005]. A higher proportion of non-kinship caregivers have a GED or higher and twice as many kinship foster caregivers had no degree (USDHHS, 2005). This makes it difficult to determine the approximate level of education that these foster caregivers did have. Over half of the participants in this study had yearly income over \$50,000 compared to 34% of the participants in the NSCAW study (USDHHS, 2005). These discrepancies in the demographic characteristics can be related to each type of study. This study was conducted in one particular geographic location whereas the NSCAW study is a longitudinal, nationwide research project.

There are other issues that have an impact on kinship foster caregivers. There is a lack of resources available to kinship foster caregivers that are possessed by non-

kinship foster caregivers. Although all foster parents receive training, preparation for placement, ongoing supervision by the appropriate child welfare agency, health and mental health services, and financial support (USDHHS, 2006), it may be that kinship caregivers require a more intensive set of services given their vulnerability. Additionally, kinship foster caregivers not only interact with the foster child and the child welfare agency but with family member or members for whom they took in the child (Coakley et al., 2007). These can all be perceived as stressors for kinship foster caregivers, which may affect their parenting attitudes and behaviors.

Findings from this study revealed that non-kinship foster caregivers had higher levels of cognitive stimulation, emotional support, and the quality of the total HOME environment, and of foster parent motivation than kinship caregivers. Thus, evidence from this study confirmed the third hypothesis that parenting attitudes and the quality of the home environment of kinship caregivers would be more compromised than those of non-kinship caregivers.

Similarly, different patterns of relationships were found for key variables between kinship and non-kinship foster caregivers. Although no relations between key variables were found for kinship foster parents, linkages for non-kinship parents were documented between home environment quality and parental warmth, foster parent attachment and foster parent motivation. This suggests that non-kinship foster parents with positive attitudes in these areas are more likely to provide high quality home environments for these children.

These findings are in contrast to the findings in the NSCAW research project.

For the home environment, kinship caregivers rated higher on emotional support than

non-kinship caregivers and were approximately the same as non-kinship caregivers on cognitive stimulation and the total HOME (USDHHS, 2005). The findings from this study on parenting attitudes cannot be considered in the context of the NSCAW study, as it did not include an explicit parenting attitudes measure.

The literature is replete with evidence that indicates that warm parenting is linked to a high quality home environment (e.g., Bradley et al., 2001). There is also emerging evidence that foster parent attachment and motivation are at least associated with positive parenting attitudes overall (Jones Harden et al., in press). The findings from this study extend this evidence to document the relation between these parenting attitudes and the provision of a high quality home environment, for non-kinship foster parents. It is important to note that the measure used to assess foster parent attitudes may be more appropriate for non-kinship foster parents than kinship parents.

Finally, the fourth hypothesis stated that foster caregiver attitudes will impact the home environment beyond the influence of foster home type on the home environment. This hypothesis was partially supported in that parental warmth contributed to higher quality home environments. This is consistent with multiple studies of typical and atypical families which underscore the positive value of parental warmth (e.g., Steinberg et al., 1992). However, the type of caregiver was a more robust predictor of the home environment than were warmth, attachment, and motivation. This finding suggests that variables relevant to the type of foster family (i.e., demographic variables) may have more influence on the quality of the home environment than their parenting attitudes. As such, evidence from this study is consistent with the work of Bradley et al. (2001), which underscores the linkage

between income and family structure (e.g., marital status) to the overall quality of the home environment.

Limitations and Research Directions

Overall, this study makes an important contribution to the limited literature on parenting processes among foster families. However, limitations to the study need to be taken into consideration. First, the sample size of the study was small. Future studies should recruit a larger sample that is more representative of kinship and non-kinship foster caregivers, and that would allow for more complex questions and data analytic approaches. Another limitation is that the participants were limited to a specific geographic region and the findings cannot be generalized to the general population.

A nationally representative study, such as the National Survey of Child and Adolescent Well-Being, can answer important policy questions and include families from a variety of geographic regions and family constellations.

In addition, information as to how long the foster child was in the foster care home was not available. Future research should consider obtaining this information. A further limitation is that some of the data was obtained through self-report methods. Future research should entail multiple methods and more refined assessments of the variables under study. It is particularly important to include more comprehensive and observational assessments of parenting practices among foster caregivers.

Conclusions

Research on the parenting processes of foster caregivers is limited. Further, given the increase in the number of kinship care providers, there is a need to examine

these processes in both non-kinship and kinship families. This study contributed to this literature by examining the parenting attitudes and home environments of kinship and non-kinship foster caregivers. The findings from this study suggest that parental warmth is an important contributor of the quality of the home environment, particularly among non-kinship foster caregivers.

In the current study, kinship caregivers had poorer parenting attitudes and home environments than non-kinship caregivers. Kinship foster caregivers may require more intensive services, training, and support than what are provided for non-kinship caregivers. However, non-kinship foster care providers who do not demonstrate positive attitudes toward parenting are also in need of support. Programs that promote positive parenting attitudes and assist with stress reduction would be beneficial for kinship foster caregivers as well as non-kinship foster caregivers. Ultimately, such interventions would benefit the vulnerable population of foster children, who arguably are the child population in most need of optimal home environments.

Appendix A

Biological Parent Consent Form

FOSTER FAMILIES AND CHILDREN PROJECT

BIOLOGICAL PARENT CONSENT FORM

Project Title:	Foster Families and Children Project
Principal Investigator:	Brenda P. Jones, Ph.D. Institute for Child Study 3304 Benjamin Building University of Maryland Gollege Park, MD 20742 301-405-2580

I state that I am over 18 years of age, in good physical health, and wish for my biological child to participate in a program of research being conducted by Dr. Brenda Jones at the Graduate School, University of Maryland College Park, Department of Human Development.

The purpose of this research is to assess the functioning of foster families and children. The procedures involve three sessions. The first session will be a home visit, and will include a foster parent interview, a videotaped observation of parent-child interaction, and several videotaped structured tasks. The second session will be a laboratory visit which will include another foster parent interview, an assessment of the child, and videotaped structured exercises. The third session will be a follow-up visit conducted at a later date. The specific measures and exercises which will be used, and estimated time requirements, are detailed on a separate sheet titled "Foster Care Research Project Measures List." I have read and reviewed this list and have had my questions answered by the researchers.

All information collected in the study is confidential, except any incidence of child maltreatment. I understand that my name will not be identified at any time. Additionally, I understand that the information provided by the children involved in this study is confidential. I understand that only the results of the standardized child assessments will be shared with the child's Department of Social Services caseworker and the foster parent, for purposes of supporting the child's development. I understand that there are no measurable risks to my participation in this study. I also understand that a goal of this study is to learn more about the experiences of children and families involved in the foster care system. I understand that I am free to ask questions or to withdraw from participation at any time without penalty.

Signature of Study Participant	Date

Appendix B

Foster Parent Consent Form

FOSTER FAMILIES AND CHILDREN PROJECT

FOSTER PARENT CONSENT FORM

TO THE REST	PROFESSION AND ADDRESS OF THE PARTY OF THE P
Project	little:

Foster Families and Children Project

Principal Investigator:

Brenda P. Jones, Ph.D. Institute for Child Study 3304 Benjamin Building University of Maryland College Park, MD 20742

301-405-2580

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Signature of Study Participant	Date

Appendix C

	Backg	ground Questionnaire
		Subject # Date:
	BACKGF	ROUND QUESTIONNAIRE
		Date 3 months ago
TAR	GET CHILD	
1a.	DATE of assessment	(mm/dd/yy)//
16.	DATE OF BIRTH	(mm/dd/yy)//
1c.	AGE at assessment	(yy/mm)/
2.	SEX	
	1 Female 2 Male	
3.	ETHNICITY/RACE/REGIC 1	
4.	PREGNANCY HISTORY	
	Normal/Nonremarkable Complications	
	2blf complications, Specify98Don't know	
5.	BIRTH STATUS	
	Full-term Premature/Low birth weight Birth Complication (e.g., tox Specify Significant Birth Defect (e.g. Specify Specify	emia; drug-addicted) , cranio-facial anomaly; congenital heart defect)

	Subject #	
	Date	
6.	MEDICAL HISTORY	
6a.	Illnesses:	
	1 None/Developmentally normal 2 Recurrent/Acute (e.g., recurrent otitis media) 3 Chronic/Persistent (e.g., asthma; persistent otitis media req. prophylaxis/tubes) 4 Physical Disability/Handicap (e.g., blind, deaf) 5 Mental Retardation (i.e., severe to profound, documented with testing, etc.) Please specify illness/disability	-
6b. year	Number of times [NAME] stayed overnight in the HOSPITAL in the past r? (Number) 98 Don't know	t
6c.	Reason(s) for visit(s) (Specify) 98 Don't know	
	i i i i i i i i i i i i i i i i i i i	_
6d.	Number of Emergency Room visits in the past year for [NAME]. (Number) 98 Don't know	
6e.	Reason(s) for visit(s) (Specify)	
CAR	REGIVERS	
MON		
7.	ETHNICITY/RACE/REGIONAL BIRTHPLACE	
	1 African American/Black USA 2 African 3 Caucasian/White USA 4 Caribbean 5 Central American 6 Chinese 7 Eastern European 8 Japanese 9 Korean 10 Mexican American 11 Middle Eastern 12 Puerto Rican 13 South American 14 Southeast Asian 15 Mixed Parentage 16 Other (specify) 99 refuse (do not read)	

		Subject#
		Date:
8.	EDUCATION	
	1 6 th grade or less 2 7 th grade 3 8 th grade 4 9 th grade 5 10 th grade 6 11 th grade 7 high school graduate 8 Associate's degree/trade school graduate 8 partial college (1-3 years) 9 college graduate/Bachelor's degree 10 Master's degree 11 PhD, MD, JD, or other professional degree 99 refuse (do not read)	
9.	OCCUPATION 1 FT employment 2 PT employment only 3 Stay-at-Home parent by choice 4 Unemployed by choice 5 Unemployed 99refuse (do not read)	
IF EN	MPLOYED	
	9b. Current job position/Title (get details re:	position)
	9c. Profession/Skill/Trade (get details re: skill)	
-	9d. If Self-Employed, please describe/spec	cify employment
10,	Date of Birth (mm/dd/yy)// 99refuse (do not read)	,
10b.	AGE at assessment (yy/mm)/	

		Subject #	
DAL	0		
(NO	TE: Collect data for any partner of primary ca	regiver residing	in home.)
11.	ETHNICITY/RACE/REGIONAL BIRTHPLA	/CE	
	1 African American/Black USA 2 African 3 Caucasian/White USA 4 Caribbean 5 Central American 6 Chinese 7 Eastern European 8 Japanese 9 Korean 10 Mexican American 11 Middle Eastern 12 Puerto Rican 13 South American 14 Southeast Asian 15 Mixed Parentage 16 Other (specify) 99 refuse (do not read)		
	* * * * * * * * * * * * * * * * * * * *		
12.	EDUCATION 1 6 th grade or less 27 th grade 38 th grade 49 th grade 510 th grade 611 th grade 7high school graduate 8Associate's degree/trade school graduate 8partial college (1-3 years) 9college graduate/Bachelor's degree 10Master's degree 11PhD, MD, JD, or other professional degree 99refuse (do not read)		
13.	OCCUPATION		
	1 FT employment 2 PT employment only 3 Stay-at-Home parent by choice 4 Unemployed by choice 5 Unemployed 99refuse (do not read)		
FEN	MPLOYED	•	
	13b. Current job position/Title (get details re:	position)	

		Subject #		
	13c.	Profession/Skill/Trade (ge	Date: et details re: skill)	
	13d.	If Self-Employed, please	describe/specify employment	
14.	Date of Birth (mm/dd/yy)/_/ 99refuse (do not read)			
14b.		AGE at assessment (yy/mm)/ 99refuse (do not read)		
FAM (Hous		all adults in household; use bes	t estimate)	
15.	INCC	OME SOURCE(s)	Approx monthly \$ figures in household	
		Employment Child support Pension Foster care payments Adoption subsidies TANF (Public Assistance) Social Security SSI/SSDI Other/Specify: Total Ion't know (do not read) efuse (do not read)		
16.	INCOME LEVEL (All Household, before taxes) 1 >\$100,000 2 \$90,000-\$99,999 3 \$80,000-\$89,999 4 \$70,000-\$79,999 5 \$60,000-\$69,999 6 \$50,000-\$59,999 7 \$40,000-\$49,999 8 \$30,000-\$39,999 6 \$10,000-\$19,999 7 \$5,000-\$9,999 6 \$10,000-\$19,999 7 \$5,000-\$9,999 6 under \$5,000 98 don't know (do not read) 99 refuse (do not read)			

	\$	ubject#	
17	. MARITAL/RELATIONSHIP STATUS	Date:	
u.	1 Married 2 Married but not living together 3 Legally Separated 4 Divorced 5 Widowed 6 Never married 97 Other {SPECIFY: 99 Refuse		}
17b	Are you currently living with a partner with whom you have li 1yes 2no 99Refuse	ved for at least 3 m	onths?
18.	HOUSING STATUS		
	Cwn house/condo/townhouse Rent house/condo/townhouse Own apartment Rent apartment Other/Specify:		
19.	Living in SUBSIDIZED housing?		
	1 No 2 Yes		
20.	Living with other ADULT relatives besides spouse/	partner?	•
	1 No (IF NO, SKIP TO QUESTION 22)	•	
	2 Yes 2a. If yes, Specify		
	2a. If yes, Specify(in relation to respondent)		
21.	Are you having to provide significant caretaking/he ADULT relatives?	p for this/these	other
	1 No 2 Yes 2b. If yes, Specify:		
22.	How many MOVES in past 3 years?		
	1 None 2 Once 3 Two to three times 4 Four or more		
23.	MEDICAL STATUS OF PRIMARY CAREGIVER		
23a.	# of times in hospital for medical problem in last year	r	
23b.	//_ (mm/dd/yy) date of last hospitalization?	*	
23c.	# of days experienced medical problem in the last 3) days	
23d.	# of visits to physician in last year		
23e.	Do you have a chronic medical problem?	1 YES	2 NO

23f. 23g.	Are you regula	arly taking prescribed nathral receiving treatment	nedication? t for a medical problem	1 YES 2 NO ? 1 YES 2 NO
24	CARE OF	CHILD		
1 3	respondent (p relative Plea:	orimary caregiver) se specify		ear? ny/family child care provider ol, Head Start program)
He	b. Since Child \ ad Start programyes	Welfare officially placed m? 2no	[NAME] into your care), has he/she ever attended a
24 1 3	c. How many hi not at all 11-20 hours p	ours per week is [NAM 2	E] cared for by caregive <=10 hours per week 21-30 hours per week >40 hours per week	ers other than you?
1 32.	d. In the last mo not at all 1-3 times per 2-3 times per	2 month 4	AME] gone to a babysitt <once a="" month="" once="" week=""> 3 times per week</once>	ter?
1 3	primary careg relative (pleas	IE] with most of the tim iver/respondent e specify who)	2babysitter/nann	ny/family child care provider
25.		D COMPOSITION	[NAME] during a week?	
First N	lame	Age	Sex 1-female, 2 ma	*Relationship lie (use code # below)
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
*relationship to primary caregiver/respondent				
I CHESTING	iship to primary	caregiver/respondent		
1 - self	iship to primary	caregiver/respondent 4 - stepdaughter	7 – foster son	10 – spouse
1 - self	nship to primary	4 - stepdaughter		10 – spouse
1 - self 2 - biolo		4 - stepdaughter	7 – foster son 8 – adopted daughter 9 – adopted son	•

Subje	ct#
Date:	

MY EXPERIENCES AS A FOSTER/RELATIVE CAREGIVER

	have you been a not your biological	***	Il the children you have cared for
1 < 6 months	2 6 month	s – 1 year	3 1-3 years
4 3-5 years	5 5-10 yea	ars	6 > 10 years
Welfare o	r any other kind o ? Please include	f placement ag foster children	ge's or Montgomery County} Child ency officially placed a child into as well as children of relatives or
3. Did you k	now [NAME] befo	re s/he was nia	iced with you?
1 yes	2 no {IF NO, S	•	owa min you.
3a. If yes,	for how long?		
1< 6 months	2 6 months	s – 1 year	3 1-2 years
4 2-3 years	53-4 years		64-5 years
3b. What wa	s the date you firs	t met [NAME]?	' /_ {mm/yy}
4. Does [NA	ME] know that yo	u are not his/he	er birth mother/father?
1 yes	2 no	98 don't kno	w
5. Have you	ever hoped or pla	nned to adopt	[NAME]?
1 yes	2 no	98don't know	V
1 biolog 2 biolog 3 mater 4 mater 5 mater 6 mater 7 pater 8 pater	pical father Inal aunt Inal uncle Inal grandmother Inal grandfather Inal aunt Inal uncle		9. paternal grandmother 10. paternal grandfather 11. step-mother 12. step-father 13. sister 14. brother 15. foster mother 16. foster father
	ease explain: y:		
or. Curenapecii	y·		

7. Are you a: {READ} 1 Relative of 's [NAME]'s birth family? 2 Friend of [NAME] 's birth family? 3 Foster parent? 4 Other/specify 8. In your lifetime, how many children including [NAME] have you raised or taken care of full time for one (1) month or more. I'll walk you through this. 8a. How many of your own birth children: 8b. How many children of relatives or friends: 8c. How many children that you officially adopted: 8d. How many foster children: 8d. How many foster children: 8e. {CALCULATE TOTAL#}:
1 Relative of 's [NAME]'s birth family? 2 Friend of [NAME] 's birth family? 3 Foster parent? 4 Other/specify 8. In your lifetime, how many children including [NAME] have you raised or taken care of full time for one (1) month or more. I'll walk you through this. 8a. How many of your own birth children: 8b. How many children of relatives or friends: 8c. How many children that you officially adopted: 8d. How many foster children:
3 Foster parent? 4 Other/specify 8. In your lifetime, how many children including [NAME] have you raised or taken care of full time for one (1) month or more. I'll walk you through this. 8a. How many of your own birth children: 8b. How many children of relatives or friends: 8c. How many children that you officially adopted: 8d. How many foster children:
8. In your lifetime, how many children including [NAME] have you raised or taken care of full time for one (1) month or more. I'll walk you through this. 8a. How many of your own birth children: 8b. How many children of relatives or friends: 8c. How many children that you officially adopted: 8d. How many foster children:
taken care of full time for one (1) month or more. I'll walk you through this. 8a. How many of your own birth children: 8b. How many children of relatives or friends: 8c. How many children that you officially adopted: 8d. How many foster children:
taken care of full time for one (1) month or more. I'll walk you through this. 8a. How many of your own birth children: 8b. How many children of relatives or friends: 8c. How many children that you officially adopted: 8d. How many foster children:
taken care of full time for one (1) month or more. I'll walk you through this. 8a. How many of your own birth children: 8b. How many children of relatives or friends: 8c. How many children that you officially adopted: 8d. How many foster children:
8a. How many of your own birth children: 8b. How many children of relatives or friends: 8c. How many children that you officially adopted: 8d. How many foster children:
8b. How many children of relatives or friends: 8c. How many children that you officially adopted: 8d. How many foster children:
8b. How many children of relatives or friends: 8c. How many children that you officially adopted: 8d. How many foster children:
8c. How many children that you officially adopted: 8d. How many foster children:
8d. How many foster children:
8e. {CALCULATE TOTAL#}:
So, you have raised or taken full-time care of [TOTAL #].
9. Did you spend more than one month living with someone other than your
biological parents when you were a child? 1- yes 2-no (IF NO, SKIP TO Q.1)
9a. If yes, for how long?
1 < 6 months 2 6 months – 1 year 3 1-3 years
4 3-5 years 5 5-10 years 6 > 10 years
4 3-0 years 5 5-10 years 5 10 years
9b. If yes, with whom did you live?
1 grandparents 2 aunt/uncle
3 other relatives 4 foster parents
5 adoptive parents 6 other/specify:
10. What childhood experiences have you had which affect the way you care
your foster/relative's child?

		Subject #
		Date:
11. How often do you	see the agency casewor	ker?
1 once a week	2 twice a month	3 once a month
4 every other month	5 4 times a year	6 3 times/year
7 2 times/year	8 once a year	9 never
12. What are the usua	reasons you contact you	ır caseworker?
		·
	and the agency casewor ative's child? 1 – yes 2	rker work as a team to meet the
14. Do you feel that you your foster/relative care		gh financial support to care for 2 – no
	being a foster parent/relachild's biological parents	ative caregiver means working? 1 – yes 2 - no
16. (If caregiver has bid from raising your foster/		ng your biological child different
17. What was the reaso	n you decided to care for	this foster/relative's child?

Appendix D

Questionnaire on Parenting Attitudes (PACR)

Date		

QUESTIONNAIRE OF PARENTAL ATTITUDES

The following statements represent matters of interest and concern to parents. Not all parents feel the same way about them. Read each statement carefully and circle the number at the left which most closely reflects YOUR degree of agreement or disagreement. If you have more than one child answer according to the child of kindergarten age.

$\overline{}$										
		Stro	1 ingl gre	W.		2 Moderate Disagree	3 y Slightly Disagree	4 Slightly Agree	5 Moderately Agree	6 Strongly Agree
(C	irc	le (Orie	:)						
1	2	3	4	5	6	(1)	I respect my child's	opinions and end	courage him/her to	express them.
1	2	3	4	5	6	(2)	l encourage my chil	d always to do hi	s/her best.	
1	2	3	4	5	6	(3)	I put the wishes of r	ny mate before ti	he wishes of my cl	nild.
1	2	3	4	5	6	(4)	I help my child wher	n he/she is being	teased by his/her	friends.
1	2	3	4	5	6	(5)	l often feel angry wi	th my child.		
1	2	3	4	5	6	(6)	(6) I punish my child by putting him/her off somewhere by him/herself for a while.			
1	2	3	4	5	6	(7)	(7) I watch closely what my child eats and when he/she eats.			
1	2	3	4	5	6	(8)	(8) I wish my spouse was more interested in our children.			
1	2	3	4	5	6	(9)	I feel my child shou scared or upset.	ld be given comf	ort and understand	ling when he/she is
1	2	3	4	5	6	(10)	l try to keep my chi ideas or values t		ldren or families w	ho have different
1	2	3	4	5	6	(11)	try to stop my chil- he/she might get		ough games or doi:	ng things where
1	2	3	4	5	6	(12)	I believe physical p	unishment to be	the best way of di	sciplining my child.
1	2	3	4	5	6	(13)	I believe that my ch	nild should be see	en and not heard.	
1	2	3	4	5	6	(14)	(14) I sometimes forget the promises I have made to my child.			
1	2	3	4	5	6	(15)	(15) express affection by hugging, kissing and holding my child.			
1	2	3	4	5	6	(16)	I find some of my g	reatest satisfacti	en in my child.	
1	2	3	4	5	6	(17)	I prefer that my chil	ld not try things it	f there is a chance	he/she will fail.

									Sub	oject#	
									ľ	Date	
	1 Strongly Disagree		2 Moderately Disagree	3 / Slightly Disagree	4 Slightly Agree	5 Moderately Agree	6 Strongly Agree				
(Circle One)											
1	2	3	4	5	6	(18)	l wish my child did n	ot have to grow	up so fast.		
1	2	3	4	5	6	(19)	l feel my child should sometimes.	d have time to t	think, daydream ar	nd even loaf	
1	2	3	4	5	6	(20)	I find it difficult to pu	nish my child.			
1	2	3	4	5	6	(21)	l let my child make r	nany decisions	for him/herself.		
1	2	3	4	5	6	(22)	(22) I worry about the bad and sad things that can happen to my child as he/she grows up.				
1	2	3	4	5	6	(23)	(23) I do not allow my child to get angry with me.				
1	2	3	4	5	6	(24)	(24) I feel my child is a bit of a disappointment to me.				
1	2	3	4	5	6	(25)	(25) I expect a great deal of my child.				
1	2	3	4	5	6	(26)	(26) I am easy going and relaxed with my child.				
1	2	3	4	5	6	(27)	I give up some of my	interest becau	ise of my child.		
1	2	3	4	5	6	(28)	I tend to spoil my chi	ld.			
1	2	3	4	5	6	(29)	I talk it over and reas	son with my chi	ld when he/she mi	sbehaves.	
1	2	3	4	5	6	(30)	I trust my child to be him/her.	have as he/she	should even when	I am not with	
1	2	3	4	5	6	(31)	I joke and play with r	ny child.			
1	2	3	4	5	6	(32)	l give my child a goo	d many duties	and family respons	sibilities.	
1	2	3	4	5	6	(33)	My child and I have	warm, intimate	times together.		
1	2	3	4	5	6	(34)	I have strict, well-est	ablished rules f	or my child.		
1	2	3	4	5	6	(35)	I think I should let my tries new things.	y child take ma	ny chances as he/s	she grows up and	
1	2	3	4	5	6	(36)	l encourage my child	to be curious,	to explore and que	estion things.	
1	2	3	4	5	6	(37)	sometimes feel that	t am too involv	ved with my child.		
4	2	2	a.	E	8	/29\					

										Date	
		Stro	1900	100		2 Moderately Disagree	Moderately Slightly Slightly Moderate		Moderately	6 Strongly Agree	
(0	Circ	le (One	∍)							
1	2	3	4	5	6	(39) 1	believe in praising results than punis	my child when I shing when he/s	he/she is good and he is bad.	think it gets better	
1	2	3	4	5	6	(40) 1	make sure my chile accomplish.	d knows that I a	ppreciate what he/	she tries to	
1	2	3	4	5	6	(41) I	encourage my chil	d to talk about h	is/her troubles.		
1	2	3	4	5	6	(42) 1	teach my child to k	eep control of h	is/her feelings at a	Il times.	
1	2	3	4	5	6	(43) 1	(43) I try to keep my child from fighting.				
que	2	3	4	5	6	(44) i	(44) I dread answering my child's questions about sex.				
1	2	3	4	5	6	(45) V	(45) When I am angry with my child, I let him/her know it.				
1	2	3	4	5	6	(46) I punish my child by taking away a privilege he/she otherwise would have had.					
1	2	3	4	5	6	(47) 1	give my child extra	privileges wher	n he/she behaves	well.	
1	2	3	4	5	6	(48) 1	enjoy having the he	ouse full of child	iren,		
1	2	3	4	5	6	(49) I	believe that too mu child.	ich affection and	d tenderness can h	arm or weaken my	
1	2	3	4	5	6	(50) 1	believe that scoldir	ng and criticism	makes my child in	prove.	
1	2	3	4	5	6	(51) I	believe my child sh	ould be aware o	of how much I sacr	ifice for him/her.	
1	2	3	4	5	6	(52) 1	worry about the he	alth of my child.	i i		
1	2	3	4	5	6	(53)	feel that there is a	good deal of co	nflict between my	child and me.	
1	2	3	4	5	6	(54) I	(54) I do not allow my child to question my decisions.				
1	2	3	4	5	6	(55) I	like to have some t	ime to myself, a	away from my child		
1	2	3	4	5	6	(56) 1	(56) I let my child know how ashamed and disappointed I am when he/she misbehaves.				
1	2	3	4	5	6	(57) I	encourage my child	d to be independ	lent of me.		
1	2	3	4	5	6	(58)	make sure I know v	vhere mv child i	s and what he/she	is doing	

Subject #	186	The Co	
Date			

_											
		Stro	1 ingl gre			2 Moderately Disagree	3 Slightly Disagree	4 Slightly Agree	5 Moderately Agree	6 Strongly Agree	
(C	irc	le (One	:)							
1	2	3	4	5	6	(59)	I find it interesting a	nd educational	to be with my child	for long periods.	
1	2	3	4	5	6	(60)	instruct my child not to get dirty while he/she is playing.				
1	2	3	4	5	6	(61)	I think jealousy and quarreling between my children should be punished.				,
1	2	3	4	5	6	(62)	I think my child mus	t learn early no	to cry.		
1	2	3	4	5	6	(63)	I control my child by warning him/her about the bad things than can happen to him/her.				pen
1	2	3	4	5	6	(64)	don't think my child should be given sexual information before he /she can understand everything.				
1	2	3	4	5	6	(65)	believe it is unwise to let my children play a lot by themselves without supervision from grown-ups.				

Appendix E

Foster Parent Attitudes Questionnaire (FPAQ)

Subject	#	
Date		

Foster Parent Attitudes Questionnaire (traditional)

Directions

This questionnaire is to help us learn more about the thoughts and beliefs of foster parents. Please read each statement carefully and decide how strongly you agree or disagree with the statement. Please mark the answer which <u>comes closest</u> to describing your own reaction to the statement.

Please circle "A" if you strongly agree with the statement.

Please circle "B" if you agree with the statement.

Please circle "C" if you neither agree nor disagree with the statement.

Please circle "D" if you disagree with the statement.

Please circle "E" if you strongly disagree with the statement.

	A B Strongly Agree Agree		C D Neither Disag Agree nor Disagree						E rongly sagree
1.		Foster children have unique needs which are different from A B C those of children living with their biological parents.							
2.	-	Building a strong attachment between me and my foster children A B C is the most important thing I can do for them.						D	E
3.	I decided to children.	I decided to take foster children because I wanted to adopt A I children.						D	E
4.		t have happened be we emotional proble	efore to foster children o	cause	A	В	С	D	E
5.	I will feel a to move.	deep sense of loss	when/if my foster child	has	A	В	C	D	E
6.			and their biological pare y from foster parents.	ents	Α	В	Ċ	D	E
7.		or foster children if fo have to leave.	oster parents learn to le	t them go	Α	В	С	D	E
В.		ponsibility to make : ey need for any pro	sure my foster children blems they have.	get the	Α	В	С	D	Е

Subject	#	
Date		

Please circle "A" if you strongly agree with the statement.

Please circle "B" if you agree with the statement.

Please circle "C" if you neither agree nor disagree with the statement.

Please circle "D" if you disagree with the statement.

Please circle "E" if you strongly disagree with the statement.

	A Strongly Agree	B Agree	C Neither Agree nor Disagree	D Disagree					E rongly sagree
9.		to take foster children n unfortunate situation	because I wanted to he	l p	A	В	C	D	E
10,			em behavior should be no has problem behavior	S.	A	В	C	D	E
11.	I talk to n	ny foster children abou	t their biological parents.	*	A	В	C	D	E
12.	Foster ch	ildren grow out of any	problems they may have	ē.	A	В	C	D	E
13.		ildren should have pic ir their biological parer	tures or objects to help t its.	hem A B	C	D	E		
14.		ter children have to ch and to their new paren	iange placements, they a ls easily.	are	A	В	C	D	E
15.	Wheneve my casev		h my foster children, I co	ntact	A	В	С	D	E
16.	Raising n my life.	ny foster children is the	most important thing in		A	В	C	D	E
17.	I feel it is	my duty to protect and	fight for my foster child.		A	В	C	D	E
18.		l parents generally cau vho are in foster care.	se emotional harm to the	eir	Α	В	С	D	E
19.		gs toward my foster ch be) toward my biologic	ild are the same as they cal children.	are	A	В	C	D	Ε
20.	When I no	sed help with my foste	r child, I find it on my ow	n,	Α	В	G	D	E

Subject	#	
Date		

Please circle "A" if you strongly agree with the statement.

Please circle "B" if you agree with the statement.

Please circle "C" if you neither agree nor disagree with the statement.

Please circle "D" if you disagree with the statement.

Please circle "E" if you strongly disagree with the statement.

	A strongly Agree	B C D Agree Neither Disagree Agree nor Disagree				-1			E rongly sagree	
21.			out their biological parent their foster parents' home		A	В	C	D	E	
22.	. My foster children are my own children.					В	C	D	E	
23.		ave a close relations my foster children.	hip with the biological		Α	В	C	D		
24.	I will adopt	opt my foster children if they are free for adoption.				В	С	D	E	
25.	When my to bother n		have, they are trying		A	В	C	D	E	
26.		to help my foster ch n while they live with	ildren develop as much me.		Α	В	С	D	E	
27.	I decided to	o take foster childrer	n because I enjoy children	1	A	В	С	D	E	

Appendix F

Early Childhood HOME

	Subject #
	Date:

EARLY CHILDHOOD HOME

Place a plus (+) or minus (-) in the box alongside each item if the behavior is observed during the visit or if the parent reports that the conditions or events are characteristic of the home environment. Enter the subtotals and the total on the front side of the Record Sheet.

I. LE	ARNING MATERIALS	23. House has 100 square feet of	
		living space per person. 24. Rooms are not overcrowded with	H
	ld has toys which teach colors, sizes, and pes	furniture.	L
2. Chi	d has three or more puzzles.	25. House is reasonably clean and minimally cluttered.	
leas	id has record player or tape recorder and at st 5 children's records or tapes.	IV. RESPONSIVITY	
4. Chi	ld has toys or games permitting free expression.	26. Parent holds child close 10-15 minutes per day.	
5. Chi	ld has toys or games requiring refined vernents.	Parent converses with child at least twice during visit	
	ld has toys or games which help teach numbers.	28. Parent answers child's questions or requests verbally.	
7, Chi	ld has at least 10 children's books.	29. Parent usually responds verbally to child's speech.	
8. At i	east 10 books are visible in the apartment or	30. Parent praises child's qualities twice during visit.	
	mily buys and reads a daily paper.	31. Parent caresses, kisses, or cuddles child during visit.	
10. Far	mily subscribes to at least one magazine.	Parent helps child demonstrate some achievement during visit.	
11. Chi	ld is encouraged to learn shapes.	V. ACADEMIC STIMULATION	
II. LA	INGUAGE STIMULATION	33. Child is encouraged to learn colors	
	ld has toys that help teach the names of mals.	34. Child is encouraged to learn patterned speech.	
	ld is encouraged to learn the alphabet.	35. Child is encouraged to learn spatial relationships.	
	rent teaches child simple verbal manners case, thank you, I'm sorry).	36. Child is encouraged to learn numbers.	
15. Par	ent uses correct grammar and pronunciation	37. Child is encouraged to learn to read a few words.	
16. Par	rent encourages child to talk and takes time to	VI. MODELING	
17. Par	ent's voice conveys positive feelings about child.	38. Some delay of food gratification is expected.	
18. Chi me	ild is permitted choice in breakfast or lunch	39. TV is used judiciously.	
	YSICAL ENVIRONMENT	40. Parent introduces Visitor to child.	
19. Bui	lding appears safe and free of hazards.	41. Child can express negative feelings without harsh reprisal.	
20. Ou	tside play environment appears safe.	42. Child can hit parent without harsh reprisal.	
	erior of apartment is not dark or perceptually notonous.	VII. VARIETY	
	ghborhood is aesthetically pleasing.	43. Child has real or toy musical instrument.	

								Subject #					
								Date	ec.				
44. Child is every of	 Child is taken on outing by a family member at least every other week. 					51.		s child choos ucts or brand					
45. Child has been on trip more than 50 miles during last year. 46. Child has been taken to a museum during past year.						VIII. ACCEPTANCE							
46. Child has been taken to a museum during past year.					52. Parent does not scold or yell at or derogate child more than once.								
Parent encourages child to put away toys without help. Child's art work is displayed some places in house.					 Parent does not use physical restrair during visit. 								
			-			54. Parent neither slaps nor spanks child during visit.							
50. Child e mother	ats at least or figure) and f	ne meal per o ather (or fath	lay with mot er figure).	her (or		55. No more than one instance of physical punishment occurred during the past week.							
	ı	14	III	IV	V	\Box	VΙ	VII	Mili	TOTA			
TOTALS													
COMMEN	TS:												
		-											

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