Bonding and Psychosocial Adjustment of Youth in Foster Care

Alicia Marie Nicoleau

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LOMA LINDA UNIVERSITY
School of Behavioral Health
in conjunction with the
Faculty of Graduate Studies

Bonding and Psychosocial Adjustment of Youth in Foster Care

by

Alicia Marie Nicoleau

A Dissertation submitted in partial satisfaction of
the requirements for the degree
Doctor of Philosophy in Family Studies

June 2017
Each person whose signature appears below certifies that this dissertation in his/her opinion is adequate, in scope and quality, as a dissertation for the degree Doctor of Philosophy.

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ACKNOWLEDGEMENTS

I would like to thank all of my committee members for all the time and energy they have invested in me. I would like to express my deepest gratitude to Dr. Fox and Dr. Sealy for your challenging questions, advice, and insightful comments. You both have been wonderful mentors offering a blend of guidance as well as autonomy throughout this process. I would also like to express gratitude to Dr. Oloo and Dr. Williams-Reade for your support and feedback. I am truly grateful. Thank you, Dr. Simpson, for your enduring support and encouragement throughout this journey, which had been invaluable to me.

To my family and friends, I am so appreciative of your love and support throughout this process that have enabled me to push through in times of adversity. I also want to thank my father and mother who have taught me that, if I pursue my dreams, I could accomplish anything. To my fiancée Andrey, thank you for your love, support, and encouragement especially during the times I felt discouraged. And finally, I would like to thank God for giving me the strength, knowledge, patience, and wisdom to see this journey through.
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ABSTRACT OF THE DISSERTATION

Bonding and Psychosocial Adjustment of Foster Youth in Foster Care

By

Alicia Marie Nicoleau

Doctor of Philosophy, Graduate Program in Family Studies
Loma Linda University, June 2017
Dr. Curtis A. Fox, Chairperson
Dr. Winetta A. Oloo, Chairperson

Foster families face complex issues that include a history of maltreatment, family disruption, placement instability, behavioral problems, and other adjustment related concerns. Adjusting to these issues presents unique challenges to foster youths and their families. Using family systems theory as the theoretical lens, this study explored the ways in which youth psychosocial adjustment is related to the interactions between foster parents and foster youth in long-term placement as perceived and reported by foster parents. This study utilized a qualitative methodology with a grounded theory approach. Using in-depth interviews, foster parents described their perceptions of how their foster youth cope and adjust in the foster family context. This study has important implications for theory, research, and practice for individuals working with foster youth and their foster families.
CHAPTER ONE
INTRODUCTION

There is a growing body of work that demonstrates the impact of family disruption, among other factors, that lead to significant adjustment problems for foster children and youth (Luke & Coyne, 2008; Petrenkoa, Friend, Garridoa, Taussiga, & Culhanea, 2012; Vanschoonlandt, Vanderfaeillie, Van Holen, De Maeyer, Andries, 2012). Foster care is an important intervention for displaced children and has been shown to be related to positive outcomes relative to foster youth’s previous home environments (Barber & Delfabbro, 2003; Barber & Delfabbro, 2005; Denuwelaere and Bracke, 2007; Proctor et al., 2010). While positive outcomes often occur, foster families also face some unique issues that are critical to psychosocial functioning of children and parents in those households. Due to the various reasons why children are placed in foster care, relational interactions between foster children and their new caregivers may be problematic. This study sought to explore how psychosocial adjustment of youth in foster care is related to the actions, behaviors, and relationships of foster parents and their foster youth.

Background of Current Study

In 2011, the United States Department of Health and Human Services (2013) estimated that 400,540 children were in foster care. Children who have been placed in foster care have been removed from one family system and placed into another system with the expectation that they would thrive and adjust optimally. With this in mind, children in foster care represent a victimized and vulnerable population (Dowdell &
Many children in foster care have experienced maltreatment (Proctor, Skriner, Roesch, Litrownik, 2010; Spencer, Collins, Ward, & Smashnaya, 2010; Strijker, & Knorth, 2009; Zinn, 2012). In addition, children who were involved in the child welfare system typically originate from families that are struggling with mental illness, family violence, and/or neglect (Spencer, Collins, Ward, & Smashnaya, 2010), among other issues. Neglect was found to be the most reported type of maltreatment among children in foster care (Proctor, Skriner, Roesch, & Litrownik, 2010; Strijker, & Knorth, 2009; Zinn, 2012).

Children who were physically abused displayed greater behavioral maladjustment when compared to children who were neglected (Marquis, Leschied, Chiodo, & O’Neil, 2008). Foster children who had experienced sexual abuse are significantly more likely to experience placement instability and an increase in emotional problems (Eggertsen, 2008; Holland & Gorey, 2004). Additionally, children, who were removed from their homes and placed in new environments as a result of maltreatment, may suffer initial heightened behavioral problems (McWey, Cui, & Pazdera, 2010). It is also important to note that children who witnessed abuse of their mothers had an increase in behavioral problems (Strijker & Knorth, 2009). Hyperactivity was associated with children in foster care. Foster children with biological mothers who had psychiatric problems manifested higher hyperactivity (Strijker & Knorth, 2009).

As mentioned previously, youth who were placed in foster care had experienced family disruption. Family disruptions present significant challenges to adjustment and have long-term consequences for these youth. Associated with the disruptions in family
life, foster children often manifest internalizing and externalizing behavior problems (Morgan & Baron, 2011; Schofield & Beek, 2005). These behaviors may proven to be chronic, thus making adjusting to foster care a long-term challenge. Family disruption also affected attachment. Foster children are faced with the task of having to reorganize relational bonds when they are removed from their parents. Therefore, it is possible that these experiences reduce foster children’s ability to form new trusting relationships (Dozier, Stovall, Albus, & Bates, 2001). Literature on foster children suggests that earlier attachment relationships form the foundation for later relational attachments (McWey, 2000; Oosterman & Schuengel, 2008; Wotherspoon, O'Neill-Laberge, & Pirie, 2008).

Some studies have noted the impact of foster care on the psychosocial development of children within that system (Fernandez, 2008; Kools, 1999; Landsverk, Burns, Stambaugh, & Rolls, 2009). Foster parents and foster children also have to navigate new and complex boundaries to enable healthy adjustment, thus making their issues complex. As indicated earlier, foster families dealt with internalizing and externalizing behavior problems, placement instability, adjustment issues within the foster family, and managing new changes that occur as a result of the addition of new members to their family system with their own set of ideas, roles, and patterns from a previous family system.

Children are assigned to foster homes on the basis of foster parents’ desire to care for children other than their consanguineous children. Foster families provide a haven for foster children that are different from their previous experiences within their family-of-origin. In some cases, foster care fails and the foster parents themselves become abusive
and are unable to provide a positive environment for foster youth as they should and, therefore, present issues for psychosocial adjustment. Therefore, it is important to identify the behaviors that families engage in to create a better bond and environment for their children. This will aid in enabling adjustment that is crucial to the well being of foster children and youth.

**Objectives of Current Study**

From a family science perspective, this study sought to explore how a foster youth’s psychosocial adjustment is shaped in the foster family context. This study had two main objectives:

1. To explore how the deliberate actions and behaviors of foster parents facilitate psychosocial adjustment of youth in foster care.

2. To explore how the relationship dynamics between foster youth and foster parents aid in the experience of psychosocial adjustment for the youth involved.

This qualitative study initially utilized family systems theory as a major theoretical framework to explore foster family dynamics and how they shape adjustment for these foster youth. Family systems theory makes the assumption that foster youth and foster parents will exist in a relational system that consists of actions and responses to each other. As a result, foster families have a significant influence on each of the actors rather than in isolation. Using a family systems lens, these interactions are explored for their impact on psychosocial adjustment of youth, though the interactions are captured from the in-depth descriptions of the foster parents in the study.
The qualitative study utilized a grounded theory approach as purported by Corbin and Strauss. This approach will be used to derive rich descriptions of the experiences of the participants in the study. Few studies have used this approach to derive a deeper understanding of foster family relationship dynamics (Lindsey, 2001). As mentioned previously, studies have revealed that adjustment generally improves over time with children who are placed in foster homes. Therefore, it is important to explore how psychosocial adjustment takes place with foster youth in foster families over time. Psychosocial adjustment has been defined as the emotional and behavioral adaptive response to challenging situations (Jones & Morris, 2012).

For this study, a literature review was completed. The way a literature review is conducted varies from method to method. Using grounded theory as proposed by Strauss and Corbin (1990), the literature review was utilized to understand the gaps in the literature. Though a literature review may provide comparisons, enhance sensitivity, and provide questions for the interview process, there is no need for researchers to review all of the literature to avoid stifling theory (Corbin & Strauss, 2008; Strauss & Corbin, 1990). Additionally, it is important to maintain a balance between science and creativity that is accomplished by maintaining a skeptical attitude, following research procedures, and constantly asking questions pertaining to the data (Strauss & Corbin, 1990). It is important to note that, in this proposal, the term children and youth were used interchangeably, due to the literature grouping this population together.

It was noted that foster children who did not live with their relatives experienced more externalizing behavioral problems than children in kinship care (Vanschoonlandt et
al., 2012). Therefore, this study explored the relationship between foster parents and foster youth, specifically those who are not in kinship care.

Knott and Donovan (2010) found that African American children were more likely to be placed in foster care when compared to Caucasian children. Therefore, this study has interviewed foster families of African-American decent. Forehand and colleagues (1991) found that with the increase of stressors in non-foster families, internalizing and externalizing behaviors among adolescents increased correspondingly. Youth who are in foster care face additional stressors that result from family disruption and the reasons that bring foster children into foster care, and, therefore, one may expect to find more stressors inherent in a foster care situation. As such, it is important to discover how foster youth are able to navigate through these stressors and adjust psychosocially. It is for this reason that this current study included African-American foster parents under the age of 65 living in the northeast region of the United States. The study utilized in-depth interviews with foster parents to explore the dynamics that enable psychosocial adjustment of foster youth. This study adds to the field of family science as it explores the experiences of foster youth and foster parents with regard to psychosocial adjustment.
CHAPTER TWO

CONCEPTUAL FRAMEWORK

To own a theoretical orientation and provide guidance to research, choosing a theoretical framework has been proven to be beneficial as it adds to conceptual clarity and theory building in the field of inquiry. Theory is defined as interrelated concepts about a phenomenon (Lavee & Dollahite, 1991). There are various theories in the field of family science that differ in their level of scope and abstraction. These theories include grand theoretical frameworks, middle range theories, and micro theories (Hill, 1966). Grand theoretical frameworks are at the highest level of abstraction, followed by middle range theories, and at the lowest level of abstraction are micro-range theories. Talcott Parsons advocated for grand theoretical frameworks, because he desired a theory of “social systems, which would be encompassing and explanatory” (White & Klein, 2008, p.37). Therefore, grand theoretical frameworks lay the foundation for all theories and phenomena studied within family science.

Family systems theory allows for the exploration of the family dynamics that are regarded as more significant explanations of behavior than individual characteristics. It supports the notion that human beings do not exist in isolation but are constantly deriving feedback from and giving feedback to their environment. Family systems theory concerns itself with the dynamics and interactions between and among individuals (White & Klein, 2008).

This present research utilized family systems theoretical framework by applying these concepts to foster families. This will utilize a grand theoretical framework to study interactions in which these foster youth live.
History of Family Systems Theory

General systems theory was the forerunner of family systems theory (Day, 1995; White & Klein, 2008). This theory was first associated with the work of Ludwig von Bertalanffy (Bertalanffy, 1976; Whitchurch & Constantine, 1993) and evolved in the 20th century (White & Klein, 2008). General systems theory was birthed from a variety of influences that included mathematics, biology, and robotics (White & Klein, 2008). Additional contributions included Herbert Spencer’s belief in the processes that form structures and Norbert Weiner’s concept of cybernetics (White & Klein, 2008).

In 1954, James Miller, Margaret Mead, Gregory Bateson, Don Jackson, Jay Haley, and John Weakland applied general systems theory concepts to the family structure (Whitchurch & Constantine, 1993; White & Klein, 2008). Bateson and his colleagues argued that the family is a system of communication constantly giving and receiving feedback (White & Klein, 2008). Based on the study of schizophrenia, they also argued that one person having schizophrenia is a symptom of the family rather than an individualized issue (White & Klein, 2008). Therefore, it was discovered that people are influenced by their interactions within the system (Whitchurch & Constantine, 1993). It was out of this notion that family systems theory was born.

Assumptions of Family Systems Theory

There are several important assumptions of family systems theory. The first assumption is that all parts of the family system are interrelated (White & Klein, 2008). Family systems theory posits that human behavior is shaped in the context of multiple systems of influence (Whitchurch & Constantine, 1993). The second assumption is that
in order to understand a system, the entire system must be studied as well (White & Klein, 2008). The purpose for this is that systems theory does not interpret individuals, situation, or events in isolation but rather in the context of their relationships (Becvar & Becvar, 1982). The last assumption is that there are mutual influences between the system and its environment (White & Klein, 2008). Therefore, each family member is affected and affects one another within the family system (Becvar & Becvar, 1982; Brown & Chrístensen, 1986; Whitchurch & Constantine, 1993). Anderson and Sabbathelli (1998) further emphasized this point by stating that a change in the system affects the entire system. This creates ricocheting effect and calls for re-stabilization of the entire system.

**Concepts of Systems Theory**

There are several concepts salient to family systems theory that have been used over the years and are relevant in their application to foster families. As indicated, family systems theory focuses on interactions rather than an emphasis on personality, as in psychology. Central to family systems theory is the concept of system, equilibrium, morphostasis, morphogenesis, boundaries, feedback, variety, and equifinality. Following is an identification and explication of the family systems theory concepts.

**Family System and Family Subsystems**

The family system is defined as the process of each member of the family operating together (Brown & Christensen, 1986) and consists of people in relationship
with one another (Rosenblatt, 1994). White and Klein (2008) further defined a system as a unit that can influence as well as be influenced by its environment.

It is also important to note that individuals are members of many different systems (Becvar & Becvar, 1982). In systems theory, subsystems are viewed as a set of related parts (Strong, Devault, & Cohen, 2011). In addition, a subsystem is defined as “a part of the system that can be analyzed separately as to its exchange with the system and other subsystems” (White & Klein, 2007, p.160). Therefore, subsystems comprise of individuals within a family that may be grouped by marital relationships, sibling relationships, and parental relationships (Anderson & Sabbathelli, 1998; Rosenblatt, 1994).

**Equilibrium and Homeostasis**

White and Klein (2008) defined equilibrium as the balancing of outputs and inputs within a system. The family system may be considered to be homeostatic. Homeostasis is the system’s tendency to gravitate towards stability (Becvar & Becvar, 1982; Brown & Christensen, 1986). Although stability is an important goal, it is important for the system to have the ability to accept change in order to achieve it. In addition, the family has a purpose and an objective, and each system changes over time although it resists change (Strong, et al., 2011). Therefore, the system has to accommodate change in order to survive. Furthermore, the family system must constantly adjust to new information and internal and external changes within the family system (Anderson & Sabbathelli, 1998). Homeostasis is the system’s preservation of its equilibrium that occurs through feedback and control (White & Klein, 2008).
Feedback

Feedback is how a family communicates with one another (Brown & Christensen, 1986). In systems theory, feedback is circular; therefore, each individual’s behavior becomes a reinforcing response for the other person’s behavior (Brown & Christensen, 1986). Feedback increases the likelihood of the system’s survival and effectiveness in facilitating change (Becvar & Becvar, 1982). This concept is important in understanding families and the actions of the members within it.

There are two types of feedback in family systems theory, positive and negative feedback (Whitchurch & Constantine, 1993; White & Klein, 2008). Positive feedback alerts the system that a change has occurred, while negative feedback preserves the existing condition of the family (Becvar and Becvar, 1982; Brown & Christensen, 1986; Whitchurch & Constantine, 1993).

Morphostasis and Morphogenesis

Morphostasis is the concept that describes the tendency of families to resist change (Anderson & Sabbathelli, 1998; Brown & Christensen, 1986). Families often resist change to maintain stability (Brown & Christensen, 1986; Day, 1995; Whitchurch & Constantine, 1993). Morphogenesis emphasizes that families must change in relation to changing situations to promote development and growth (Brown & Christensen, 1986; Day, 1995; Whitchurch & Constantine, 1993).

Strong and colleagues (2011) noted that a change in the family system could result in emotional turmoil and distress. In an attempt to restore the equilibrium, a family member may try to force a subsystem back into his or her role and functioning (Strong et
Maintaining balance is a constant challenge for families because the family system encompasses individuals with competing and changing needs (McCubbin & Patterson, 1982). Therefore, healthy families allow growth and change (Anderson & Sabbathelli, 1998; Becvar & Becvar, 1982). Additionally, families need change and stability. Extremes in either morphostasis or morphogenesis are considered dysfunctional in family systems theory. If a family allows for too much change the family system breaks down. If the family is too resistant to change the system does not grow. Therefore, healthy families require balance (Becvar & Becvar, 1982). Although in stressful situations change is desirable, if change is too intense or recurrent it jeopardizes the family’s stability (Becvar & Becvar, 1982).

**Boundaries**

Another concept of family systems theory is that all systems have boundaries. Boundaries are defined as consistent behavioral patterns that differentiate the members of the system in providing personal and family membership (Becvar & Becvar, 1982). A boundary is an invisible border between the system and its environment and varies between open and closed (Whitchurch & Constantine, 1993). A family system is not completely open or closed and varies in its degree of permeability. A system with a closed boundary would prevent anything from coming in or out of the system (Becvar & Becvar, 1982; White & Klein, 2008). Their environment often influences families; therefore, family systems are open systems, varying in the level of openness (Whitchurch & Constantine, 1993). A system with a completely open boundary allows everything to come into the system, and results in the system losing most of its identity (Becvar &
Becvar, 1982; White & Klein, 2008). Therefore, as noted earlier, family systems are not completely open or closed. In addition, a boundary may also include internal and external boundaries. Internal boundaries manage information within the family unit, while an external boundary determines who is a part of the family system (Anderson & Sabbathelli, 1998). Foster families need to have a degree of openness in their boundaries to allow for the inclusion of new members into their family, and no less, must allow a family to allow for the adjustment of a previous or original family to allow a member out of a family system to join their own.

**Variety**

According to White and Klein (2008), all systems have different degrees of variety. Variety signifies the level that the systems have enough resources to compensate for any new environmental difficulties or the ability to adjust to changes (White & Klein, 2008). Without variety it is difficult for the system to adapt to change.

**Equifinality**

Another concept in family systems theory is equifinality. Equifinality in family systems theory is defined as the family’s ability to achieve a purpose in various ways (Becvar & Becvar, 1982; Bertalanffy, 1968; Brown & Christensen, 1986). This implies that there are various roads that lead to the same destination (Brown & Christensen, 1986; Whitchurch & Constantine, 1993).
Family Systems Theory Application to Foster Families

A systemic view of foster families provides explanations regarding a foster youth’s psychosocial development in the context of the family. In many cases, while the biological family of the foster youth may not be physically present, they often have an impact on foster youth. In addition, foster youth are affected by the new family system they are joining. Considering the reality that foster youth are removed from their biological and/or foster families and are placed in a new home context, the experience of change, loss, and adjustment challenge equilibrium in these families are real life experiences. According to systems theory, foster youths’ entrance and exits out of families throw off the foster families’ equilibrium. When foster youth leave one family system and enter another system they must learn new ways of adapting. Roles are often undefined because the foster youth also may have difficulty deciphering who is in or out of their family unit. In addition, foster parents have a hard time deciding who is in and out of their family when foster children are removed which may impact their interactions with new foster children and their family. These boundary issues become important in their experiences.

Foster parents may also experience role strain, issues surrounding the inability to have children, and loss of a foster child. Parenting stress is related to an increase of externalizing behavioral problems in foster youth (Vanderfaeillie et al., 2013). As systems theory explains, there are mutual influences that each member has on the other members of the family system. In addition to these challenges, Eastman (1979) noted that foster parents are often asked to carry out a role that is inadequately defined. As a result, significant adjustment and transitions are necessary (Eastman, 1979). Without a
defined boundary, it is also difficult to determine who is in and out of the family (Eastman, 1979) and the roles to be assigned to each. This can create significant boundary ambiguity in families (Boss, 2002).

While adaptation is necessary, excessive openness and change within a system can be detrimental to its identity and well-being of its members (Eastman, 1979). The foster parent and foster youth must extend their external and internal boundaries to accommodate new members into their family system. Additionally, the foster family and the foster youth must adapt to their new family member. When a foster child enters the foster family system there may be some resistance to change within the system. A change in the family structure affects the entire system; therefore, the entire system must readjust. This then creates challenges for each member of the family to maintain equilibrium. This may also include new roles for each family member. To maintain the system, foster families must have morphostatic qualities to maintain a level of unity and stability to continue as a viable foster family system (Eastman, 1979). In addition, to maintain flexibility and adaptability within a system foster families must also maintain morphogenic qualities (Eastman, 1979).

**Summary**

Central to family systems theory is the belief that each family member affects the other and that these effects are reciprocal. Therefore, within systems thinking, foster parents are considered to be the main intervention tool for foster youth given that they are part of the central environments for childcare (Timberlake & Verdieck, 1987). In order
to understand how foster adolescents adjust in foster care, it is important to examine how the foster parents facilitate adjustment.

The concepts and assumptions of family systems theory offer a unique contribution to understanding the relationships between foster youth and their foster families. Foster parents and foster youth have their own adjustment concerns and each influence the other. Specifically, foster youth do not exist in isolation but are part of an important system that is shaping and reshaping actions, behavior, attitudes, and function of their lives. Additionally, foster parents and foster youth become a part of this system and create attitudes and family values based on their relationship with one another.

When youth enter the foster home they often have issues stemming from their family of origin. These behavioral concerns may exacerbate issues with their foster parent and other youth in the home. In addition, foster parents have their own personal issue that may stem from their decision to foster such as an inability to have their own children. These dynamics are communicated in the foster family system. Therefore, foster youth are contributing to their environment just as foster parents are. This study sought to explore the multidirectional influences using in-depth interviews with foster parents to explore these issues. The implications for theorizing in these families will be noted.
CHAPTER THREE
REVIEW OF LITERATURE

Psychosocial adjustment is a very important task for all youth. This adjustment may be related to levels of self-esteem, self-image, emotional maturation, sexuality, and familial relationship. For some, this is seen to be an individual phenomenon. However, family science literature often emphasizes the social and familial context, of which an individual is a part, as the greater determinant of psychosocial adjustment. This research focused on psychosocial adjustment of foster youth as they interact with their foster family specifically from the perspectives of foster parents. Specifically, youth in foster families have left or have been removed from their parents’ home and have been placed in a new family context, referred to as foster care. This new home arrangement may have a positive impact on the psychosocial development of foster youth. On the other hand, foster care is not always positive, and, in fact, can have a harmful impact on psychosocial adjustment. There is a growing body of work that demonstrates the impact that foster parents have on foster youth and their adjustment process. The recent research has proposed attempts to explore the interactions in the foster family context that affect normal adjustment of foster youth.

This literature review focused on the present state of the social and behavioral sciences literature that addresses the body of work around the psychosocial challenges and adjustment of foster youth and how this adjustment is facilitated in the context of their new foster home environment with foster parents. Special care will be taken to examine the treatment of this phenomenon in family social science literature, and a backdrop of family systems theory will be held constant. The present review is essentially
exploratory and will continue to unfold and develop as data are explored and new findings come to light.

**Psychosocial Issues for Foster Youth**

There are a number of factors that necessitate the disruptions of families. These include domestic violence, emotional abuse, psychological abuse, sexual abuse, neglect, inadequate parenting, and use of drug and alcohol, among other reasons. Additionally, children who experienced physical abuse and/or neglect had an increase in internalizing behavioral problems (Petrenko et al., 2012). Youth who experienced trauma had a significantly higher probability of experiencing internalizing behavioral problems when compared to youth who had not experienced trauma (Greeson et al., 2011). Therefore, foster youth are especially vulnerable to various high-risk behaviors and unhealthy coping mechanisms to manage personal challenges (Storer, Barkan, Sherman, Haggerty, & Mattos, 2012). To help mitigate these issues, relationships with their foster families are significant in influencing healthy psychosocial adjustment.

**Psychosocial Adjustment Defined**

For this study, psychosocial adjustment was defined as an adaptive emotional and behavioral response to a life-altering event (Jones & Morris, 2012). In addition, psychosocial symptoms will include conduct problems, emotional symptoms, inattention, hyperactivity, and difficulties with peers (Rots de-Vries, van de Goor, Stronks, & Garretsen, 2011). Emotional responses will include internalizing behaviors such as depression, anxiety, and withdrawal (Ferguson, 2009). Behavioral responses will include
the externalizing behaviors such as rule breaking and aggressive behaviors that include drugs, alcohol, and high-risk sexual activity among other behaviors (Ferguson, 2009).

**Internalizing Behavior Problems**

Individuals placed in foster care may experience internalizing behavior problems. Within the first four months of placement, foster children were reported to be more anxious and withdrawn when compared to their classmates who had not been displaced from their families (McAuley & Trew, 2000). Foster children reported feeling stigmatized and insecure as a result of being placed in foster care (Bogolub, 2008). In addition, foster children experienced multiple feelings in foster care that included sadness, fear, anxiety, confusion, loss, and stress (Brukas, 2008). In a qualitative participatory research study of 55 foster parents in the United States (U.S.), Pasztor, Hollinger, Inkelas, and Halfon (2006) reported that children in foster care often have mental and behavioral concerns. Foster children often experience depression, eating disorders, posttraumatic stress, bipolar disorder, sleeping disorders, and learning disabilities (Pasztor et al., 2006).

**Externalizing Behavior Problems**

In addition to internalizing behavior problems, foster youth also experience externalizing behavioral problems. Children in foster care often have behavioral concerns that include aggression, inappropriate sexual behaviors, attention deficit disorder and other acting out behaviors (Pasztor & colleagues, 2006). At the one-year point, McAuley and Trew (2000) reported an increase in conduct behavioral problems
among children in foster care. Furthermore, foster children who were labeled as disruptive or identified as problematic were more socially maladjusted and had an increase in conduct disorder, emotionality, and hyperactivity (Barber & Delfabbro, 2002). Children who had experienced physical and sexual abuse had an increase in externalizing behavior problems (Petrenko, et al., 2012). Children who were sexually abused, had tantrums, lied, engaged in profanity, exhibited defiant behaviors, vandalized property, and acted out sexually (Smith & Howard, 1994). Furthermore, foster children who had witnessed domestic violence acted out sexually at a younger age (Dowdell & Cavanaugh, 2009). Common inappropriate sexual behaviors engaged in by girls in foster care included sexually aggressive remarks, exposing themselves, sexual and genital touching without permission, and fondling (Dowdell et al., 2009). Coohey (2010) found that boys who were sexually abused were more likely to have internalizing behavioral problems.

**Foster Parenting and Psychosocial Adjustment**

Foster youth must grapple with the impact of family disruption, placement in a new environment, and are expected to manage the symptoms that result from being exposed to maltreatment. Studies have noted that foster families are important intervention tools to aid in psychosocial adjustment and decrease maladaptive behaviors to meet the demands of foster youth. For example, Barber and Delfabbro (2003) noted that foster children were less likely to be depressed or sad, anxious, fearful, nervous, worried, and were less likely to skip school after the first four months of placement. In addition, foster children showed an overall improvement in school performance up to four months after placement with their foster parents than at intake (Barber & Delfabbro).
A quantitative study by Pears and colleagues (2010) conducted in the United States of America found that foster parent involvement was associated with academic competence and social-emotional competence.

In a quantitative study conducted in Australia, Barber and Delfabbro (2005) examined how psychosocial adjustment improved with long-term foster care. Barber and Delfabbro noted that after the initial four-month period of being placed in foster care, foster children were less likely to be agitated, worry, lie, cheat, and destroy property. At eight months, they found that there was a significant improvement in emotional and conduct disorder. Emotional disorders that included feelings of unhappiness, feelings of nervousness, anxiety and worry as well as conduct disorders continued to improve over 12 months (Barber & Delfabbro). Hyperactivity became stable over time (Barber & Delfabbro). Children in foster care were reported to be less agitated, better behaved, and less worried (Barber & Delfabbro, 2003). Foster children were also less likely to destroy or damage property, be disobedient at school, engage in physical attacks, lie, and were more likely to concentrate and sit in one place (Barber & Delfabbro, 2003). Pears, Bruce, Fisher, Kim, and Yoerger (2010) confirmed these findings and added that caregiver involvement also increased with school adjustment.

Milan and Pinderhughes (2000) conducted a quantitative study with 32 foster children ages 9-13 to examine factors that influence adjustment among children who experienced maltreatment. Foster mothers reported that their foster children manifested more relational behavior and less internalizing behavioral problems when they viewed their relationships with their foster family as positive (Milan & Pinderhughes). The effects of maltreatment were mediated through caregiver involvement and found that the
support of foster parents moderates negative effects of family disruption and negative exposure (Pears et al., 2010). A Belgium study by Denuwelaere and Bracke (2007) emphasized that support from foster fathers and foster mothers were associated with fewer emotional problems and an increase in feelings of self-worth in foster children.

To further explore the positive effects that foster parents have on foster children, Pears, Kim, and Leve (2012) conducted a quantitative study in the United States of America with girls and their foster parents. They found that foster parent support increased competency in academics and decreased aggression against peers among girls in foster care (Pears et al., 2012). Foster youth when compared to youth in-group homes were significantly less likely to run away, be arrested, and charged for violent and non-violent crimes (Baskin & Sommers, 2011).

Proctor and colleagues (2010) engaged in a quantitative longitudinal study of children in the United States. They found that having a stable caregiver and a lower occurrence of physical abuse created positive adjustment for internalizing behaviors (Proctor et al., 2010). Proctor and colleagues also found that having caregiver stability was also associated with externalizing behaviors (Proctor et al., 2010). Adolescents placed with foster families are less likely than youth in group-homes to engage in delinquent behavior (Baskin & Sommers, 2011).

**Negative Effects of Foster Care**

Many studies have highlighted that foster parents are an important intervention for mitigating internalizing and externalizing behaviors. While research has shown how these new environments are helpful, it is not always evident. If foster family dynamics
are not optimal, the foster family may not be a good environment for foster youth. Some studies have found that foster care is ineffective for foster children. Lawrence, Carlson, and Egeland (2006) conducted a longitudinal study with a Minnesota sample of 189 children who were maltreated and stayed with the maltreating caregiver, children in foster care, and children who were never maltreated. Lawrence and Egeland found that the effectiveness of foster care is doubtful due to the poor developmental, behavioral, psychological, and educational outcomes it has yielded. Zlotnick and colleagues (2012) found that adults with a history of foster care had a higher incidence of physical and mental health problems when compared to children without such history. When examining social, emotional, behavioral, and educational outcomes Fernandez (2008) and Kools (1999) noted that out-of-home placement contributes to poor functioning.

Blome, Shields, and Verdieck (2009) utilized secondary analysis of adults who were previously in foster care to examine pre treatment program risk factors that lead to post treatment program outcomes. They noted that children in foster care are more likely to use alcohol and drugs before the age of thirteen, and foster youth were more likely to run away (Blome et. al, 2009). Thompson Jr. and Auslander (2011) reported on a quantitative study of 320 adolescents from the United States of America who began a transitional life skills program before 15 to 18 years of age. Adolescents in foster care or other out of home placement reported using alcohol and marijuana within the previous six months. The use of marijuana and engaging in delinquent behavior was found to predict foster youth engaging in high-risk sexual behavior that may lead to Human Immunodeficiency Virus (Thompson Jr. & Auslander, 2011). Foster youth had frequent alcohol and drug use, were more likely to be less cooperative in school, display
inappropriate sexualized behavior, and were more likely to experience mental health problems (Barber & Delfabbro, 2002). It is also important to report that adults who were placed in foster care have an increase in difficulty associated with marital happiness and having a social life (Cook-Fong, 2000).

The contradictions in the findings of the aforementioned studies are due to small sample sizes which may limit generalizability; secondary analysis, which pointed to missing data of the foster care experiences, not having a longitudinal study, and differing lengths of placement and entry into care. In addition, many of the studies that point to foster care being ineffective have compared children who have never been maltreated to children in foster care who have been maltreated and as noted previously children who have experienced maltreatment will different outcomes. The studies that have revealed that foster care can yield positive outcomes foster children were compared to themselves from the beginning of their placement until significant time has passed.

**Optimal Foster Parenting Dynamics**

With the various challenges foster youth face; foster parents play a pivotal role in helping foster youth navigate through the various challenges. Many studies show the importance of foster parents in mitigating several challenges that foster youth face to enable successful adjustment. One such study reported that children in long-term foster care with no connection to their family of origin can often experience membership and support by foster families and their extended families can provide family (Schofield, 2002). Sinclair and Wilson (2003) noted that the success of foster placement was mostly contingent upon the foster parents. Foster parents are central to providing a secure base
for emotional and social development. Some studies have acknowledged the importance of foster parents’ emotional sensitivity in working with foster children (Oosterman & Schuengel, 2008; Schofield & Beek, 2005). In a study with biological families, Dailey (2009) noted that validation and acceptance from their parents is related to middle adolescent psychosocial adjustment among non-foster families. This may also have implications for foster families.

Foster parents are crucial components in the care of youth in out-of-home placements (Rosenwald & Bronstein, 2008). Cheung and colleagues (2011) noted that foster families and social workers have an influence on children’s externalizing behaviors. Denuwelaere and Bracke (2007) noted that an increase in conflict among foster children and foster parents was associated with an increase in behavioral problems among foster children. Cheung, Goodman, Leckie, and Jenkins (2011) conducted a quantitative study in Canada with 1063 children ages 10 to 17 to examine the influence of foster families and social workers on externalizing behaviors of children who receive foster care. They found that the family has relative importance on child externalizing behavioral problems (Cheung et al., 2011). Legault and colleagues (2005) engaged in a quantitative study with foster youth in Canada to examine predictors of psychosocial adjustment. They found that youth had lower anxiety when they had a female caregiver with whom they had a relationship, high number of close friendships, and higher self-esteem. Additionally, they also displayed less physical aggression when they had a smaller amount of caregivers, higher self-esteem, close friendships, relationships with female caregivers, an increase in the use of coping strategies and a decrease in the use of avoidant coping methods (Legault et al, 2005).
Some studies focus on the effects of a foster parent’s support on foster children. One such study by Denuwelaere and Bracke (2007) noted that although the support of both foster parents increased self-esteem and self-efficacy, the relationship with foster fathers had the biggest impact. As indicated, foster parents have a great influence with foster children given the close relational interaction with foster children.

**Health Challenges**

Given that children in foster placements may have experienced abuse and neglect, they are at an increased risk for developing issues surrounding mental health (Holton, Ronning, Handegard, & Sourander, 2005). Utilizing a Californian Health Interview Survey with 70456 adults who were placed in foster care as children, Zlotnick, Tam, and Soman (2012) conducted a study and found that foster children were more likely to have experienced mental or physical health problems when compared to children who were not placed in foster care.

In addition to the studies noted above, other studies focused on foster care health challenges and psychosocial adjustment. In an Australian study, Kaltner and Rissel (2011) noted that foster parents reported that their children had health concerns that included developmental, physical, and behavioral issues. In a quantitative study in the United States of America with 188 adolescents aged 11 to 16 years of age in long-term foster care, Woods, Farineau, and McWey (2012) sought to determine whether adolescents with chronic illnesses in long-term foster care had an increase in delinquency, externalizing, and internalizing behavioral problems. In addition, Woods and colleagues (2012) found that adolescents in foster care who had repeated health
problems reported an increase in internalizing and externalizing behavior problems for children managing chronic illnesses when compared to those without chronic illnesses.

Utilizing the National Survey of Child and Adolescent Wellbeing, Jee, Barth, Szilagyi, Aida, and Davis (2006) reported that younger children who were placed in foster care might experience severe allergies, asthma, other respiratory diseases, ear infections, eczema, or other skin diseases. Hansen, Mawjee, Barton, Metcalf, and Joye (2004) noted that foster children had significantly more developmental and health problems when compared to children who were not placed in foster care. Most of the caregivers reported that foster children under their care had at least one chronic health condition that included asthma, cardiac conditions, diabetes, behavioral issues, psychological concerns, and developmental disabilities among other concerns (Schneiderman, Smith, & Palinkas, 2012). Dowdell and colleagues (2009) found that girls in foster care had physical health problems that included disability, chronic illness, or asthma. Zlotnick and colleagues (2012) found that after foster placement it was found that adults with a history of foster care reported poorer health status.

Foster Youth Placement Disruption and Adjustment

Placement disruption may thwart any attempts to create healthy adjustment among foster youth in foster care. Riggs, Augoustinos, and Delfabbro (2009) noted that placement instability cause an inability to create meaningful relationships as foster children become adults. The inability for foster youth and foster parents to have a connection is often due to frequent placement changes, foster parents having negative preconceived notions about foster youth, and issues that arise between foster parents are a
few of the issues experienced (Storer et al., 2012). In addition, some of the youth in this study described giving up hope that foster parents could be a parental figure. Lack of trust for foster parents was also mentioned in this study (Storer et al., 2012).

Placement disruption occurs often in foster families. Tarren-Sweeney (2008) noted that placement instability often occurred within the first year of placement in foster care. Placement instability also occurs as a result of the personality traits of the foster parent, personalities of the foster children, and the interaction between the two factors (Sinclair & Wilson, 2003). Fisher, Stoolmiller, Mannering, Takahashi, and Chamberlain (2011) found that placement disruptions took place due to foster children’s problematic behavior. In addition, foster parents who were rigid in limit setting had an increase in placement disruption (Crum, 2010).

Placement moves affect the foster child, the family the child is leaving, the new family the child is going into, friends, neighbors, educators, and also other support systems to the foster child (Unrau, 2007). Children in foster care who were removed from their parents or guardians reported feeling neglected, guilty, anxious, and craving love (Luke & Coyne, 2008). Children who had experienced multiple placements had a significantly higher occurrence of hyperactivity, conduct disorder, emotionality that included feelings of unhappiness, feelings of nervousness, anxiety, worry, and lower social adjustment (Barber, Delfabbro, & Cooper, 2001). Osborn, Delfabbro, and Barber (2008) noted that children who experienced instability within foster placement often have had an increase in psychosocial dysfunction. In a study of African-American children who had experienced placement instability were found to be at an increased risk for
engaging in delinquent behavior as well as additional problematic outcomes (Ryan, Testa, & Zhai, 2008).

Fernandez (2007) emphasized that as the number of placements increase, foster children were less likely to experience cohesion with other children within the foster family. When caregivers reported problematic behavior from foster children within the first three months of placement in the home, foster children experienced placement instability over a year in comparison to the children in treatment foster care, a family-based intervention utilizing social learning values to reduce disruptive behaviors, improve prosocial behaviors, and lessen developmental delays among preschoolers in foster care (Fisher et al., 2011).

*Transitioning Foster Youth*

Placement satisfaction was also related to externalizing behaviors (Cheung et al., 2011). Children who were satisfied with their placement had lower externalizing behaviors (Cheung et al., 2011). Therefore, it is important for foster parents to create successful transitions to prevent placement disruption. Transitioning children into foster placement may also enhance placement stability. Mitchell, Kuczynski, Tubbs, and Ross (2010) engaged in a study in which foster children gave advice to foster parents on how to aid transition to foster care upon entering a new home. Mitchell and colleagues found that foster parents should familiarize foster children with the people and pets in the home, the benefits of living there, the rules and responsibilities, and be sensitive to the foster children’s feelings. Foster parents must provide a comfortable and welcoming environment, familiarize themselves with activities, and provide emotional support and
other comfort items (Mitchell et al., 2010). Wilson (2006) emphasized that placements were more successful when foster parents were child-oriented, warm, and the child’s characteristics matched those of the parents’ matched foster parents and foster child characteristics.

Barber and Delfabbro (2005) noted that foster children in long-term foster care reported being satisfied with their current placement as a result of having nurturing foster parents. Most children reported that they got along well with their foster families and had good relationships over a period of time (Fernandez, 2007). According to Henderson and Scannapieco (2006), positive parent-child interaction contributed to successful placement. Foster children believed a good family consisted of foster parents who made them feel at home, were kind, and available when needed (Hedin et al., 2011). Sinclair and Wilson (2003) reported that placements that were less likely to be disrupted if youth had foster families that were encouraging, loving, caring, respected foster children for who they were as individuals, and treated them as members of their own family without creating conflicts with the foster child’s family of origin (Sinclair & Wilson, 2003). Placement stability was found to occur by having supportive foster parents that were able to set firm and flexible limits (Wes, 2010). Furthermore, Wilson and colleagues (2003) assert that responsive parenting is essential for a successful foster placement. A responsive parent is able to appropriately handle difficult behavior while reinforcing positive self-esteem (Wilson et al., 2003). This occurs by creating a sense of safety, support foster children’s achievements, and assist and in the regulation of moods and behaviors (Wilson et al., 2003). Foster parents who were able to set limits and were given support provided a higher incidence of placement stability (Crum, 2010). Harsh
punishment, and inconsistent discipline methods were associated with an increase in internalizing behavior problems in foster children (Vanderfaeillie, Van Holen, Vanschoonlandt, Robberechts, & Stroobants, 2013).

In a quantitative study conducted in Canada, Brown (2008) explored what foster parents needed to enable successful placements. This study found that the right matching of personality and skills of foster parents, the ability to obtain information about the foster child, agency policies, procedures and participation, role clarity, engaging in and maintaining relationships with professionals involved with the foster children, community support, networking with other foster families, having a supportive family, and self-care are important to enable successful placements (Brown, 2008). In a case study in the United Kingdom, Wilson and colleagues (2003) found that for foster children to successfully maintain a stable placement, foster parents must view foster children as members of their family and communicate it to them. Foster families must have family solidarity; create relationships, rituals, culture, and identity; and youth should be included in family portraits, and family gatherings (Brown, 2008).

The Relationship Between Foster Youth and Biological Children

Foster youth are often impacted by the significant people in their lives. Foster parents must manage the tensions between foster youth and their biological children. It is important to examine how these relationships affect adjustment and to explore the relationship between foster youth and biological children of foster parents. Höjer (2007) engaged in a mixed methods study with children of foster parents to understand the impact that fostering had on their lives. The sample included eight children participating
in in-depth interviews, 684 children answering a questionnaire, 17 children in focus groups, and 30 children participating in discussion. Children of foster parents reported a range of feeling compassion towards foster children while others reported difficulty relating to foster children and experiencing many conflicts (Höjer). Most of the children of foster parents in this study described conflicts as common sibling behaviors while others expressed behaviors that could not be excused. Some described having to deal with challenging behaviors of foster children and sharing their parents. Many children reported not sharing their problems with their parents to protect their parents from additional parental stress (Höjer).

**Foster Family Members and Foster Children’s Adjustment**

Since foster parents are also affected by their environment, it is important to focus on the adjustment of foster parents’ relationship with biological children while raising foster children in their home. One such study by Younes and Harp (2007) interviewed foster parents and their children to explore the impact of fostering on biological children. In this study, many foster parents reported feeling a split between making a difference in their foster child’s life and responding to their biological child’s needs (Younes & Harp). According to Younes and Harp, biological children of foster parents reported having some difficulty adjusting to spending less time with their parents as a result of shared time with foster children. Some of the foster parents in the study reported acting out behaviors from their biological children such as anger and withdrawal, while other foster parents reported that their children were more responsible (Younes & Harp). This can make it difficult to tend to the needs of foster children when competing needs are
demanded from their biological children. Younes and Harp noted the importance of parents spending time with their children to reaffirm their love for them. They also found it helpful for biological children to be involved in decisions to care for foster children (Younes & Harp). Communication regarding the care of foster children was also highlighted as beneficial in buffering or preventing some of the effects of fostering on biological children (Younes & Harp). Overall, parents and children in the study reported appreciating their families as a result of having foster children in the home (Younes & Harp). Also reported in this study by foster parents and biological children was a sense of grief and loss when foster children left the home.

Luke and Coyne (2008) engaged in a qualitative study in the United Kingdom (U.K.) with adults who were previously in foster care to explore foster parents’ influence on foster children. As a result of the findings, foster parents were encouraged to include foster children in family outings, treat biological and foster children equally, assign all members of the family unit responsibilities, encourage community involvement, and give gifts to celebrate occasions to promote a sense of normalcy and inclusion (Luke & Coyne, 2008).

Schofield (2002) emphasized that it is important for foster children to feel as if they belong to the foster family. Schofield (2002) noted that foster parents might empower foster children at the onset of their arrival into their placement by giving them choices. Schofield (2002) noted that allowing foster children to become accustomed to their family by giving them time helps with adjustment. Prior to taking on new foster children. Schofield (2002) noted that foster parents should consult foster children prior to
adding other children into the home to aid in feelings of empowerment and feeling respected.

**Foster Parent Relationships and Foster Youth Adjustment**

Foster youth are also impacted by their foster parents. It is important to examine the relationship between foster parents and foster youth. Orme and Buehler (2001) in their review of foster families’ marital functioning noted that little is identified in the literature concerning the functioning of foster parents who are married. Lindsey (2001) also emphasized that the literature is sparse in terms of how children in foster care are affected by marital and family variables. Despite the limited amount of research, Orme and Buehler (2001) found that some studies have highlighted similarities between biological parents who were married and married foster parents in terms of marital conflict. As a family unit, the marriage relationship can have an impact on the development and adjustment of children.

Studies outside of the unique population of foster children offer insight into the influence of marital stability on children. Yu and Gamble (2008) noted that parents who had a supportive marital relationship also had children with pleasant sibling relationships. Conversely parents who were married and have marital conflict experienced an increase in behavioral problems of their children (Amato & Cheadle, 2008). Hirschberger, Srivastava, Marsh, Cowan, and Cowan (2009) found that by the time the first child is fifteen years of age marital satisfaction declined within their sample. It is important to note that couples with children tend to have lower marital satisfaction as observed in a
meta-analysis of 90 studies of the general population (Twenge, Campbell, & Foster, 2003).

Marital conflict was associated with harsher discipline methods and adolescent and child maladjustment (Buehler & Gerard, 2002). While the relationship between marital conflict and poor behavior is not clear among the foster care population, the effects of marital conflict on behavior in the general population may be similar (Lindsay, 2001). It is through these relationships that foster parents are able to buffer some of the internal and external behavioral problems experienced as a result of being placed in foster care.

Foster Youth’s Adjustment and Their Affiliation To Their Biological Family

Bogolub (2008) noted that foster children reported separation pain due to the loss of their birth parents that permeated throughout their life. Therefore, some studies have also attempted to examine the impact of family visits on psychosocial functioning (Cantos, Gris, & Slis, 1997; Leathers, 2003). As part of their study, Cantos et al., (1997) examined internalizing and externalizing behaviors of children who were visited regularly, irregularly, and not at all. They found that children who were visited regularly exhibited fewer internalizing behavior. Browne and Moloney (2002) concluded that the infrequent visiting patterns are more likely to leave children uncertain about their placement status. Cantos and colleagues (1997) found that frequent visiting patterns created lower internalizing and externalizing behavioral patterns.

In addition to studying the effects of foster parents, other studies have focused on sibling relationships and how it relates to adjustment. Studies have shown that placing
siblings together may at times be beneficial and at other times be problematic for foster children. One such study by Linares, Li, Shrut, Brody, and Pettit (2007) emphasized that foster children with positive sibling relationships who were placed with their siblings adjusted better and had less behavioral problems. Siblings who had problematic relationships were less likely to adjust positively and had an increase in behavioral problems (Linares et al., 2007).

**Gender Issues and Foster Family**

One study looked at the effects of gender in internalizing and externalizing behaviors of children in foster care. A study in Spain found that boys rather than girls in foster care had an increase in externalizing problems when compared to children who had never been placed in foster care (Bernedo, Salas, Garcia-Martin, & Fuentes, 2001). Girls in foster care were diagnosed frequently with PTSD, mood disorder, or oppositional defiant disorder among other diagnoses (Dowdell, Cavanaugh, Burgess, & Prentky, 2009). Girls demonstrated significantly more internalizing behavioral problems and less externalizing behavioral problems than the boys in foster care (Milan & Pinderhughes, 2000). Vanderfaeillie and colleagues (2013) contradicted these findings by reporting that boys when compared to girls in foster care had an increase in internalizing behaviors (Vanderfaeillie et al., 2013). These findings may be contradictory due to differences in the sample. Milan and Pinderhughes (2000) focused on children who experienced maltreatment and adjustment, and Vanderfaeille and colleagues (2013) used the perspectives of foster parents on the development of behavioral issues.
Conclusion

Overall, the consistent theme throughout this literature review is that foster parents do have a profound effect on foster children’s adjustment. Although literature emphasizes that foster families are important in enabling children to adjust to their new environment, the literature is sparse in terms of how foster parents are able to facilitate psychosocial adjustment among foster children. Barber and Delfrabbro (2005) reported that nurturing families helped contribute to these positive changes but their research does not describe what foster parents are doing. Therefore, this study explored the processes of foster youth and foster parents as reported by the foster parents to understand how psychosocial adjustment occurs in foster youth. Many of the studies conducted on foster families to date have been quantitative in approach and fewer utilized a qualitative method. Jones and Morris (2012) confirmed these findings in their review of the literature on psychological adjustment of foster children in foster care that fewer studies utilized a qualitative method. This study adds to the literature due to it’s qualitative nature. Furthermore, this study used a grounded theory to explore the relationship between foster parents younger than 65 years of age and their African American foster youth, fewer studies have taken this approach.

From this review of the literature, it was found that many studies on psychosocial adjustment have been done in Australia, Sweden, Germany, Canada, the United Kingdom, and fewer studies have been done in the United States. As such, many of the studies have a context outside of the foster care system of the United States. This study as proposed will help to fill that gap in the present literature. Additionally, most of the researches on foster families have been conducted by social workers that focus mostly on
child welfare structural issues, rather than on family processes by family scientists. This study will add to the literature in that way.

This present research study sought to add to the existing literature by exploring how foster youth adjust to foster care and how foster parents facilitate psychosocial adjustment utilizing a qualitative method. Additionally, this study explored the dynamic nature of the interactions in the new home context and how these processes affect the psychosocial adjustment of youth who are placed in these contexts. This contributed to the phenomenon and added to the growing literature on adolescent psychosocial adjustment in foster care.
CHAPTER FOUR
METHODOLOGY

This study used qualitative methodology to explore the relationship dynamics that serve to facilitate the psychosocial adjustment of foster youth. While quantitative research is concerned with the expression of data as numerical values to test hypothesis, qualitative research is based on a field of inquiry that emphasizes the participants’ processes (Denzin & Lincoln, 2008). Therefore, qualitative research is most optimal for this study that explores the processes in these families of interest. Qualitative research does not value one methodology above another (Denzin & Lincoln, 2008) and frees investigators to select methodological tools based on what they seek to achieve within the research. Developed through several perspectives—including symbolic interactionism, studies of anthropology, social history, social research of feminism, and philosophy—qualitative research helps answer theoretical questions about perceptions and meanings, and contributes to an increase of understandings regarding human behavior (Rosenblatt & Fischer, 1993). Its interpretive emphasis allows the participants’ world to become more visible (Denzin & Lincoln, 2008). This study utilized a qualitative grounded theory approach to explore the relational dynamics between foster youth and their foster parents. In addition, this study explored how foster parents facilitate the psychosocial adjustment of foster youth.

Grounded Theory

Grounded theory is a methodological approach that emerged from the work of sociologists, Glaser and Strauss, and is considered a scientific method because of its
significance, precision, verification, and rigor (Strauss & Corbin, 1990). It fits well with the aims of the researcher who seeks through a variety of methods to generate data, to gain a deeper understanding of the participants, and to develop meaningful theories regarding what is observed in the research population (Corbin & Strauss, 2008).

Grounded theory was the research approach selected for this study based on its processes that accounts for what is occurring in the data (Corbin & Strauss, 2008; Daly, 2007). Therefore data analysis occurs throughout all stages of this study.

**Strengths and Weaknesses of Grounded Theory**

The grounded theory approach grounds and generates emerging theory in the empirical data from which it is derived, which makes it instrumental to family science and to this study (Echevarria-Doan & Tubbs, 2005). The cyclical process of merging data collection with analysis accounts for all that is occurring in the data (Strauss & Corbin, 1990); and the interview component provides the researcher with an enriched understanding of the participants (Corbin & Strauss, 2008). However, although grounded theory provides thick descriptions of the participant’s processes, reaching the point of theoretical saturation utilizing this methodology is a lengthy endeavour (Echevarria-Doan & Tubbs, 2005). Although the findings are relevant to the phenomenon of interest in the sample population and suggest theories and hypotheses for future investigation, caution is advised in the development of generalizable theory beyond this limited sample (Gelo, Braakmann, & Benetka, 2008).
Research Questions

This study sought to answer two major research questions: (1) How do foster parents facilitate psychosocial adjustment of youth in foster care? (2) How do the interactions between foster youth and foster parents influence psychosocial adjustment in foster youth?

The Role of the Researcher

Denzin and Lincoln (2008) noted that research is interpretive, based on the researcher’s feelings and beliefs about the world. Consequently, the topic of choice and ideas are all influenced by who the researcher is and what she or he believes. Duffy and Chenail (2008) argued that every research conducted has a set of standards that guide how a researcher understands and comprehends the nature of reality and how a study should be constructed. Therefore, the role of the researcher must be clearly defined before her or his engagement with qualitative research. For the purpose of this grounded theory study, the researcher will use a post-positivist lens that, according to Corbin and Strauss, attempts to maintain a level of distance from and objectivity regarding the data (Daly, 2007). This differed from the social constructivist approach advocated by Charmaz (2006) that is concerned with interpreting and creating meanings with participants.

Research Paradigm

In social research, the role of the researcher is determined by the selection of the research paradigm. Each paradigm emphasizes concepts that influence the way a
researcher approaches specific phenomena, engages in the research process, and allows research to evolve (Daly, 2007). A research paradigm also defines how the data are approached.

The paradigm that was utilized for this study was post-positivism. The post-positivist researcher acknowledges the possibility of bias and addresses these biases in the research process by indicating the steps taken to minimize their impact (Daly, 2007). In this present study, bias was minimized by maintaining a researcher log that includes personal notes and observations (Corbin & Strauss, 2008). Analytic memos were utilized, and kept separate from the research logs, for the researcher’s interpretations, questions, and thoughts that will enable other ideas to emerge (Strauss & Corbin, 1998). It is important to note that the post-positivist researcher has no voice in the research; he or she focuses on data that is consistent with the participants’ voices (Daly, 2007). It is for this reason that data was compared to data to stay grounded in the data (Strauss & Corbin, 1998), and the researcher obtained additional reviewers of the de-identified data.

**Epistemology**

A paradigm comprises epistemological positions. Epistemology is concerned with how the researcher comes to understand the realities of what is being studied (Daly, 2007). The first epistemological position is objectivity. An objective researcher believes that there is a concrete reality that exists separately from one’s thoughts (Daly, 2007). The second position is subjectivity. A subjective researcher believes that knowledge is created (Daly, 2007). The positivist researcher lies between objective reality and the subjective meaning-making process. Post-positivist researchers believe that it is
impossible for the researcher to be fully removed from the research while simultaneously attempting to limit any potential biases. Despite the emphasis on objectivity, there are no studies in which the researcher is completely free from bias (Duffy & Chenail, 2008; Strauss & Corbin, 1998); the role of the researcher, then, is to minimize bias within the research (Daly, 2007).

**Disclosure Statement**

The researcher is a very important part of the research process and data gathering, and, therefore, it is necessary to outline aspects of the self that are more likely to have some bearing in the research process. As an African-American female clinician working towards my Ph.D. in family studies, I have an interest in African American families. As a clinician, I have worked with foster families for many years. While practicing as a marriage and family therapist, I have been exposed to and understand some of the various challenges foster families face. It is important to use this awareness to maintain a degree of sensitivity while collecting data from the participants. It is equally important to suspend any preconceived ideas to prevent biasing the data. It is important to maintain a level of distance from my preconceived ideas and biases about intact and foster families while engaging in the research process. It is by bracketing my ideas and thoughts that I will be able to prevent any additional biases that will prevent the data from reflecting the participant’s voices. In keeping with the post positivist view of grounded theory, it is crucial for me as the researcher, to disclose any potential biases to maintain credibility within the study process.
To assist the researcher in maintaining a level of distance, comparing data to data enables the researcher to stay grounded in the data (Strauss & Corbin, 1998). This proposed study followed the qualitative grounded theory research guidelines for the purpose of maintaining an accurate portrayal of the participants’ processes (Daly, 2007). Additionally, this proposed study explored the experiences of foster families with regard to how foster parents facilitate psychosocial adjustment among foster youth.

**Ethical Issues**

For this study, great care was taken to ensure the protection of the participants. The present study was approved by the Institutional Review Board of Loma Linda University, and by the board that oversees foster families within the region from whence this sample was drawn. The researcher will manage ethical issues of research such as issues of confidentiality, coercion, safety, and informed consent. All potential participants provided informed consent at the time of the scheduled appointment. The informed consent provided a detailed description of the research purpose, procedure, risks, rights, and confidentiality. Potential participants were given time to review the document and to decide whether or not to participate. By signing the informed consent (Appendix C), individuals agreed to participate in this study. A $25.00 gift card was offered to each participant as an incentive for completing the interviews.

Participants were informed that the interviews would be recorded to facilitate direct transcribing. All interviews and other information obtained during the research process were transcribed. Names were removed on the transcribed data, and each family interviewed was given a pseudonym. When quotes or examples from an interview were
utilized, all identifying data were changed to prevent identification of any individual participant. Transcriptions were maintained in strictest confidence on password-protected computers. Names and addresses of respondents were stored separately from the transcripts—in a locked file cabinet. After the audio file was transcribed, the data was deidentified and all identifying information was destroyed. Data were only viewed by those who are approved researchers on this study.

**Risks**

A simple reminder or reflection of some experiences from the past or present can alter the participants’ feelings or mood for a time. During the study, some potential risks may have included interpersonal issues or emotional discomfort. Although the risks for participating in this study will be minimal, special effort was made to minimize the risks to maintain the safety and well-being of the foster parents. If at any time the participants felt some discomfort on account of participating in the study, they would have been referred for therapeutic consultation at their own cost. Participants were free to withdraw from the study at any time if they so chose.

**Participants and Recruitment**

Qualitative research is less concerned about the sample size than it is with the depth of the analysis. A large sample size is not important to qualitative research because it is concerned with gathering thick descriptions of participants rather than utilizing a large sample to test hypotheses or generalize in the statistical sense (Gelo et al., 2008). Some qualitative researchers attempt to give an overall estimate of what a typical
qualitative sample size is. According to Creswell (1998), a typical grounded theory sample size would include 20 to 30 interviews. The goal for this study was to include 15-40 individual foster parents. However, in this methodology, the size of the sample is determined by theoretical saturation (Corbin & Strauss, 2008). As such, data collection would end when no new themes or categories emerge from new data that is collected.

The sample for this study included current or previous foster parents less than 65 years of age at the time they fostered an African-American foster youth in the northeast region of the United States. Children in foster care often change placements within 2 ½ months (Connel et al., 2006), therefore to be a participant in this study, foster parents must have had their foster child in their care for at least at least six months. Foster families with youth in placement less than six months and who were not African-American were excluded from the study.

The recruitment of foster parents was done through the use of flyers and snowball sampling. Snowball sampling occurs when current participants refer other individuals for this study. In addition, flyers were sent to the foster agencies soliciting their support in placing flyers in their agency and promoting the study within the agency (Appendix B). When the participant via phone contacted the researcher, a screening process occurred through the use of a script. The researcher utilized a script during the screening process to explain to the participants the eligibility requirements and the research process of the study (Appendix D). This screening process aided the researcher in determining whether or not the participants will be eligible to participate. All participants were interviewed in their homes or a confidential location of their choice.
Data Collection

This study relied on in-depth interviews with foster parents. In-depth interviews involve asking open-ended questions to obtain information essential to understanding phenomena (Strauss & Corbin, 1998). The interviews lasted approximately 60 to 90 minutes. All participants were asked questions from a semi-structured interview guide (Appendix E) utilizing probes to elicit responses. Interview questions enabled the exploration of a particular phenomenon (Strauss & Corbin, 1998) and to stimulate further inquiry. These guided questions consisted of broad open-ended questions to invite detailed discussion on a topic. The interviewer focused primarily on the issues and topics that seem most salient to the participants. The questions in the interview focused on history and impact of foster parenting on foster youth. By asking open-ended questions, the researcher gained insights into the dynamics of foster families. As the research became more focused and the concepts developed, the research questions moved from broad to a focused view (Strauss & Corbin, 1998). Therefore, the interview questions may evolve throughout the research process as theory begins to emerge.

All interviews were audio-recorded utilizing a digital recorder and transcribed verbatim. Demographic information was collected from the participants with the use of a structured demographic questionnaire (Appendix F).

Analytic Strategies

Grounded theory utilizes several analytic strategies in a constant comparative method to analyze data (Strauss & Corbin, 1990). These analytic strategies include open
coding, axial coding, selective coding, memo writing, and data categorizing (Strauss & Corbin, 1990).

**Coding**

Coding is one of the ways in which data is analyzed in grounded theory. Data are analyzed in grounded theory by coding small similar group of cases and grouping them together (Strauss & Corbin, 1998). This study utilized coding to break down and analyze the data (Strauss & Corbin, 1990). There are three types of coding in grounded theory. These include open, axial, and selective coding (Strauss & Corbin, 1990). Open coding entails breaking down, naming, and categorizing the data. This process may occur by line-by-line, sentence or paragraph, or as an entire document (Strauss & Corbin, 1990). During the process of open coding data are dissected for differences and similarities (Strauss & Corbin, 1990). This occurs by making constant comparisons and asking questions (Strauss & Corbin, 1990) that will be utilized to analyze the data. Axial coding entails making connections between categories (Strauss & Corbin, 1990). During the process of axial coding the researcher reassembles the data that was dissected during open coding (Strauss & Corbin, 1990). Axial coding merges the categories and subcategories to add in the development of theory (Strauss & Corbin, 1990). After creating labels, the next step would be to group concepts that is known as categorizing (Strauss & Corbin, 1990). The last step in coding is selective coding entailed a descriptive narrative of the phenomena (Strauss & Corbin, 1990).
Memo Writing

Memo writing is another method used in grounded theory to aid in analyzing the data. In grounded theory, the researcher maintains code notes or memos by writing ideas or concepts from the interview, documents, or other data (Strauss & Corbin, 1990). Keeping a memo represents the abstract thinking of the data that evolves over time (Strauss & Corbin, 1990). The process of memo writing and the constructing of diagrams are integral to the analysis of a grounded theory study. This study maintained them as well. Memos and diagrams were: dated with a reference to the interview it is pertaining to, included a heading regarding the concepts and theory being highlighted, support quotes and phrases of codes, and be modified as necessary (Strauss & Corbin, 1990). An analytic memo contains the researchers questions, interpretations, thoughts and directions that will enable additional data collection (Strauss & Corbin, 1998).

Data Categorization

The researcher returned to the data in a cyclical process when questions and gaps arose in the process of collecting and analyzing the data (Strauss & Corbin, 1990). As theory emerges the interview questions may need to be modified to answer emerging questions. Further interviews with participants may be gathered to collect more data (Strauss & Corbin, 1990). When new responses do not fit within those that have already been identified, new categories are created (Strauss & Corbin, 1990). Analysis moves from simple categorizing to determining how categories are related to one another (Strauss & Corbin, 1990).
Theoretical Saturation

Data collection and analysis will be ongoing and will shape the process in which the results are formulated. The data collection and research process comes to an end when theoretical saturation is achieved (Corbin & Strauss, 2008). Theoretical saturation occurs when no new data or themes emerge because the categories are well developed (Corbin & Strauss, 2008). Until this is achieved data collection and analysis continue. Essential to data analysis and grounded theory is the concept of theoretical sensitivity.

Theoretical Sensitivity

Theoretical sensitivity is the ability to have insight, provide meaning to the data, and the ability to understand and separate what is relevant to the data and what is not (Strauss & Corbin, 1990). Theoretical sensitivity is achieved through reading literature to have a rich background on a particular phenomenon (Strauss & Corbin, 1990). Theoretical sensitivity involves professional experience and personal experience (Strauss & Corbin, 1990). I have had professional experience with foster families that will aid theoretical sensitivity. Theoretical sensitivity involves having insights and providing meaning to the data (Strauss & Corbin, 1998). This study maintained theoretical sensitivity by engaging in a review of literature.

Credibility and Trustworthiness of this Study

Strauss and Corbin (1990) noted that a qualitative study could not be judged by the same guidelines as quantitative research. According to Guba and Lincoln (2008), some have argued about whether or not qualitative research should have a validity
criterion. Validity is crucial to any study because it determines if the findings are trustworthy or valid. In quantitative research validity has been emphasized by the precision of instruments and certainty of results, but in qualitative research validity has taken on a different meaning (Daly, 2007). In qualitative research validity occurs when the explanation of a particular phenomena fits the participants’ descriptions (Janesick, 2003). Validity and reliability are known as conformability, trustworthiness, transferability, and dependability in qualitative research (Daly, 2007).

Objectivity and sensitivity are crucial in maintaining trustworthiness of a grounded theory study. Maintaining a level of skepticism can play a crucial part in maintaining objectivity. The researcher will regard the analysis of data as provisional until validated by additional interviews (Strauss & Corbin, 1998).

To maintain credibility and aid in developing the analysis, prior, during, and after the research process, it is crucial for the researcher to maintain notes separate from the memos and field notes. Researcher’s notes are logs of impressions of the participants’ and researchers’ reactions (Corbin & Strauss, 2008). This process enables the researcher to minimize any potential biases by becoming aware of biases as concepts are developed. To ensure these standards are met, the researcher must achieve intimate familiarity the setting or topic, make systematic comparisons to the data, be sure there are strong logical links between the gathered data and the researchers analysis, and ensure the categories cover a wide range of empirical observations (Strauss & Corbin, 1990).

**Implications**

Although the findings are not generalizable, this study has implications for theory,
research, and practice. While the literature is replete with information on psychosocial adjustment of youth, no theoretical formulations have been proposed regarding these youth in the foster care system. With regard to research, this study sheds important light on this literature that has important gaps. Because of the over representation of Black youth in the foster care system, studies that focus on these youths are crucial. This study responds to that call and will help to advance this research. In addition, this study assists family life educators, family scholars, social workers, clinicians, school counselors, clinical counselors, probation officers, churches, the community, and other licensed professionals who work with youth in foster families to develop best practice skills in helping to advance the psychosocial well-being of youth in that context.

Family systems theory is complex and difficult to capture all of the systems of influence of foster youth. This study is limited to foster parents’ experiences, and does not include perspectives of foster youth, biological children of foster parents, biological parents of foster youth, social workers, or other foster children who are placed in the home.

Summary

Qualitative research is the optimal research method for studying foster families processes. This method enables the researcher to gather rich descriptions of the participant’s perceptions and experiences. Additionally, grounded theory methodology, as outlined by Corbin and Strauss, was selected to gain a deep understanding of the processes foster families engage in that contribute to the psychosocial adjustment of foster youth. This study focused on the perspectives of foster parents. Additionally, it
focused on how adolescents adjust in foster care and how foster families facilitate psychosocial adjustment.
Reference


CHAPTER FIVE
BONDING EXPERIENCES OF FOSTER YOUTH WITH FOSTER PARENTS

Abstract

This study was an exploration of youth in foster care as they engage in new relationships with their foster parents, and how bonding occurs between foster parents and their foster youth as reported by foster parents. This qualitative grounded theory study included 10 foster parents who had an African-American foster youth between the ages of 12 to 18 in their care. This analysis focuses on four processes that seem to influence bonding between foster parents and their foster youth: (a) Communicating in Conflict with Empathy or Assertion, (b) Sharing Personal Time, (c) Creating Rituals, and (d) Offering Support. This was associated with a focus on the foster youth being a part of their family. This study has important implications for theory and practice to enhance relationships between foster parents and their foster youth in long-term placement.

Introduction

There is a growing body of work that demonstrates the impact of family disruption, among other factors, that lead to significant adjustment problems for foster children and youth (Luke & Coyne, 2008; Petrenkoa, Friend, Garridoa, Taussiga, & Culhanea, 2012; Vanschoonlandt, Vanderfaeillie, Van Holen, De Maeyer, Andries, 2012). Foster care is an important intervention for displaced children and shown to be related to positive outcomes relative to their previous home environments (Barber & Delfabbro, 2003; Barber & Delfabbro, 2005; Denuwelaere and Bracke, 2007; Dubois-Comtois et al., 2015; Proctor, Skriner, Roesch, & Litrownik, 2010). While positive
outcomes often occur, foster families also face some unique issues that are critical to the functioning of children and parents in those households. On account of the various reasons why children are placed in foster care, relational interactions that foster children have with new caregivers may be problematic. Associated with the disruptions in family life, foster children often manifest internalizing and externalizing behavior problems (Gabrielli, Jackson, & Brown, 2015; Morgan & Baron, 2011; Schofield & Beek, 2005; Vanschoonlandt, Vanderfaeillie, Van Holen, De Maeyer, Robberechts, 2013). These behaviors may prove to be chronic, thus making adjusting to foster care a long-term challenge.

For the factors noted above, it is important to identify the behaviors that families engage in to create a better environment for their children. This will aid in enabling adjustment that is crucial to the well being of foster children and youth. This present study seeks to discover how foster youth experience bonds with their foster parents. Bonding, in this study, as applied to foster families was defined as the process by which foster parents develop close emotional connections with their foster youth.

**Conceptual Framework**

Attachment theory posits that the mental health of individuals rests on the ability of infants and children receiving continuous and mutually satisfying intimacy and warmth from their mother or permanent mother figure (Bowlby, 1983). Attachment is defined as an affectional bond that is formed with a specific individual, in many cases the mother (Ainsworth, 1969). Foster children are faced with the task of having to reorganize relational bonds when they are removed from their parents. This attachment
between mother and child “may be supplemented by attachments to a handful of other specific persons” (Ainsworth, 1969, p. 971). In addition, foster parents often act as parent surrogates. Parent surrogates are individuals whose children may become attached to and provide security for in their lives in situations where they could not have that with their biological parents (Ainsworth, 1989). Foster parents often provide for the needs of foster children when removed from their biological family. It is important to note that children in foster care experience separations from their family and experience ruptures in bonding experiences with their family-of-origin. In many cases, foster youth are placed with individuals whom they have never met. In applying attachment theory to foster families, continuous emotionally close relationships or bonds with their foster parents may buffer against the negative consequences of adversity experienced prior to placement. This study sought to explore how foster parents create bonds with their foster youth in long-term placement.

**Literature Review**

In 2014, the United States Department of Health and Human Services (2015) estimated that 415,129 children were in foster care placements and nearly half were placed in non-relative foster family homes. There are a number of factors that necessitate the disruptions and bonds of family members. These include domestic violence, emotional abuse, psychological abuse, sexual abuse, neglect, inadequate parenting, and use of drug and alcohol, among other reasons. Children in foster care often experience a variety of challenges due to the circumstances that cause disruption. Children who experienced physical abuse and/or neglect had an increase in internalizing behavioral
problems (Petrenko et al., 2012). Children who had experienced physical and sexual abuse had an increase in externalizing behavior problems (Petrenko et al., 2012). Sexually abused children had tantrums, lied, engaged in profanity, exhibited defiant behaviors, vandalized property, and acted out sexually (Smith & Howard, 1994). Foster children who had witnessed domestic violence acted out sexually at a younger age (Dowdell & Cavanaugh, 2009). Youth who experienced trauma had a significantly higher probability of experiencing internalizing behavior problems when compared to youth who had not experienced trauma (Greeson et al., 2011). Therefore, foster youth are especially vulnerable to various high-risk behaviors and unhealthy coping mechanisms to manage personal challenges (Storer, Barkan, Sherman, Haggerty, & Mattos, 2012). To help mitigate these issues, relationships with their foster families are significant in influencing the well being of foster youth.

**Relational Bonding**

Literature on foster children suggests that earlier attachment relationships form the foundation for later relational attachments (Bîrneanu, 2014; McWey, 2000; Oosterman & Schuengel, 2008; Shi, 2014; Wotherspoon, O'Neill-Laberge, & Pirie, 2008). Wilson, Petrie, and Sinclair (2003) emphasized that foster children are likely to have difficulties in the area of attachment due to multiple losses and rejections, behavior which is often difficult for those around foster children to deal with, and self-esteem due to lack of successes and skills essential for building self-esteem. In many cases foster children are unable to have attachments with their biological family, therefore, foster
parents have the opportunity to be supportive to aid children in gaining a secure attachment as well as adjust to their new foster families.

Within the first four months of placement, foster children were reported to be more anxious and withdrawn when compared to their classmates who had not been displaced from their families (McAuley & Trew, 2000). Foster children reported feeling stigmatized and insecure as a result of being placed in foster care (Bogolub, 2008). In addition, foster children experienced multiple feelings in foster care that included sadness, fear, anxiety, confusion, loss, and stress (Brukas, 2008). In addition, foster children also often managed feelings of depression, eating disorders, posttraumatic stress, bipolar disorder, sleeping disorders, and learning disabilities (Pasztor, Hollinger, Inkelas, and Halfon, 2006).

Foster parents have an important role in buffering a number of the effects of poor attachment. The literature has noted also the role of foster families in creating attachment bonds with their foster children (Jacobsen, Ivarsson, Wentzel-Larsen, Smith, & Moe, 2014a; Jacobsen, Ivarsson, Wentzel-Larsen, Smith, & Moe, 2014b; Ryan, Testa, & Zha, 2008; Stovall–McClough & Dozier, 2004). Foster parenting is a crucial intervention to the development of foster youth. The intervention of foster parents is based on the assumption that the relationship between foster parents and foster youth will result in positive outcomes. Jacobsen and colleagues (2014b) found that foster youth often had secure attachments with their foster parents valued attachment experiences with their foster youth. In addition, foster youth placed with stable foster parents were able to have secure attachments (Jacobsen et al., 2014a). Stovall–McClough and Dozier (2004) noted that foster youth with positive relationships with their foster parents experienced secure
attachment. Ryan, Testa, & Zha, 2008 noted that positive attachment with caregivers decreased delinquency in foster youth. All these studies have noted the importance that foster parents can have in enabling secure attachments in foster youth.

Studies have engaged in comparisons of the outcomes with institutionalized care and foster children placed with foster families that and the role foster parents may play in securing attachments with their foster youth. When compared to children placed in institutionalized care, foster children placed with foster families whom they felt close to had a higher secure attachment (Nowacki & Scholmerich, 2010). Another study in Romania found that girls who were removed from institutionalized care and placed into foster care and had an attachment to their caregiver had a decrease in internalizing behavior symptoms including anxiety and depression in comparison to those who remained in institutionalized care (McLaughlin, Zeanah, Fox, & Nelson, 2012). These studies emphasize the importance of the relationship between foster youth and their foster families and the positive influence foster families may have on foster youth.

Proctor and colleagues (2010) engaged in a quantitative longitudinal study of children in the United States. They found that having a stable caregiver and a lower occurrence of physical abuse created positive adjustment for internalizing behaviors, while caregiver instability was associated with externalizing behaviors (Proctor et al., 2010). Academic competence and social-emotional competence of foster youth was associated with foster parents that were involved in their foster youth’s life (Pears, Bruce, Fisher, Kim, & Yoerger, 2010). In addition, foster children living with foster parents had an improvement in psychosocial adjustment over time on internal and external behaviors (Barber & Delfabbro, 2003; Barber & Delfabbro, 2005).
From these studies noted above, the relationship between foster youth and their foster parents is an imperative subject to examine. The literature on foster families is sparse in terms of attachment, and fewer studies on attachment have focused on how bonding occurs between foster youth and their foster parents in long-term placement. Many of the research on foster families were done by social workers with a focus on child welfare issues, and fewer studies by family scientist focusing on family processes. This highlights the important contributions of this present study in that it is qualitative in nature and focuses on family processes. This study focused on bonding experiences of foster youth in long term foster care from the perspective of foster parents. Specifically, youth in foster families that had been removed from their parents’ home and have been placed in a new family context, referred to as foster care.

Methodology

Qualitative methodology was selected because of its contributing factors of furthering a deeper understanding of human behavior (Rosenblatt & Fischer, 1993) while enabling the participants’ world to become more visible (Denzin & Lincoln, 2008). A grounded theory method selected as a research approach for this study based on the ability to gain deeper understandings of the participants’ experiences, while developing meaningful theories regarding what is observed (Corbin & Strauss, 2008).

A post positivist lens was utilized in analyzing the data for the present study. Therefore, a level of distance was emphasized to maintain objectivity regarding the data (Daly, 2007). With this in mind, it is important to note that there are no studies in which the researcher is completely free from bias despite the emphasis on objectivity (Duffy &
Chenail, 2008; Strauss & Corbin, 1998). Therefore, the role of the researcher is to minimize bias within the research (Daly, 2007). To assist in maintaining a level of distance and staying grounded, data were compared to other segments of data (Strauss & Corbin, 1998) to maintain an accurate portrayal of the participants’ processes (Daly, 2007). In addition, to ensure these standards are met, intimate familiarity within the literature was achieved to make systematic comparisons to the data (Strauss & Corbin, 1990). This was to ensure strong logical links between the gathered data, the researcher analysis to make certain the categories cover a wide range of empirical observations (Strauss & Corbin, 1990).

**Participants**

Data collection took two years due to the sensitivity and bureaucratic issues surrounding foster youth. This study was based on interviews with 10 foster parents recalling their experiences. These ten foster parents identified themselves as African-American and Indian (1), Caucasian (1), Hispanic (1), African American (5), and of Caribbean decent (2) (See Table 1). All foster parents lived in the Northeast region of the United States and their ages ranged from 31-60 years of age at the time of fostering. All foster parents had foster youth who were African American between the ages of 12-18 that were in their care for at least six months. Participants were recruited via flyers and snowball sampling; in addition, they were selected theoretically based on their relevance to the interest of this study (Corbin & Strauss, 2008). All participants completed an informed consent and were offered a $25.00 gift card upon completion of the interview.
<table>
<thead>
<tr>
<th>Foster Parent</th>
<th>Ethnicity</th>
<th>Marital Status</th>
<th>Age of Foster Parent</th>
<th>Other Children in the Home</th>
</tr>
</thead>
<tbody>
<tr>
<td>Samantha</td>
<td>Caribbean</td>
<td>Divorced</td>
<td>48</td>
<td>2 biological children</td>
</tr>
<tr>
<td>Paula</td>
<td>African-American</td>
<td>Married</td>
<td>Did not disclose</td>
<td>0</td>
</tr>
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<td>41</td>
<td>Did not disclose</td>
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<td>Celia</td>
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<td>Separated</td>
<td>Did not disclose</td>
<td>0</td>
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<td>Eva</td>
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<td>31</td>
<td>0</td>
</tr>
</tbody>
</table>

The study was approved by the Institutional Review Board of Loma Linda University and by the board that oversees foster families within the region of this sample.

**Interview Process**

The interview questions were semi structured, open-ended, and explored the relationship between foster parents and their foster youth. The questions also sought to
explore their processes pertaining to conflict resolution, relationship dynamics, and behaviors. For example, what were some of the challenges your foster youth has faced? How did you manage these challenges? How have these challenges improved over time? What were some of the things that occurred daily or weekly that helped to create some togetherness in your family? Pseudonyms were assigned to maintain confidentiality, and all interviews were transcribed for the purpose of coding.

Coding

This study utilized coding to break down and analyze the data (Strauss & Corbin, 1990). The process began with open coding of the processes that emerged from the interviews. Many codes were identified, for example, “encouraging her”, “making nightly dinners a priority”, “attending PTA”, teaching her how to cook”, “spending quality time together”, “offering positive encouragement”, “establishing boundaries”, “inquiring about solutions”, and “took time off to help out”.

The data were dissected for differences and similarities while making constant comparisons and asking questions (Strauss & Corbin, 1990). When similarities were found, they were grouped together. Codes such as “enjoying Sunday breakfast together,” “taking vacations together,” “making nightly dinners a priority,” “having family nights,” and “exchanging morning and evening hugs” were grouped together as “creating rituals.” Another example is “encouraging her,” “advocating for him,” “empathizing with her experience,” “positive reframe of circumstances” were group under “offering support.”
Analysis

The researcher utilized memos for writing ideas or concepts derived from the interviews while returning constantly to the data in a cyclical process when questions arose during analysis (Strauss & Corbin, 1990). Axial coding entails making connections between categories while merging the categories and subcategories to aid in the development of theory (Strauss & Corbin, 1990). This enabled an understanding of how foster youth were able to bonding with foster parents. Some categories seemed to overlap so the categories were merged, for example, “accommodation” and “giving of time” merged to “giving of personal time”. In addition, “creating routine” was merged into “creating of rituals”. These categories were changed to reflect the final themes that included: Communicating in Conflict, Giving of Personal time, Creating Rituals, and Offering Support. Demonstrating these was a family focus on their foster youth being a part of their family. When there was a family focus the foster parents were able to engage in the processes of bonding. The more they engaged in these processes the more trust was fostered which led to bonding.

Results

The concept of bonding emerged from the data. Bonding is crucial to foster family relationships because it enabled foster youth and foster parents to create new relationship ties after a relational rupture within their family-of-origin. These ruptures are often due to circumstances leading to separation from parents and to foster care placement. As stated previously, bonding is the process by which foster parents develop close emotional connections with their foster youth. Derived from the data, these
processes included Communicating in Conflict with Empathy or Assertion, Sharing Personal Time, Creating Rituals, and Offering Support. These processes involved in bonding are connected to a focus on the foster youth being a part of the family. The following is a report of the results from the analysis done for this present study. It will discuss in detail the four themes that emerged from data analysis and will use data gathered from the in-depth interviews to substantiate them.

In this present study, seven out of ten parents reported on the importance of forming and maintaining bonds with their foster youth. This they saw as a very important task in establishing a new foundation of trust, acceptance, and synchrony in the new and evolving relationship in the foster care context. This was evident in an interview with Drucilla, for example. A foster parent of Caribbean decent, Drucilla had been fostering her 18-year old girl for a little more than one year. She shared:

I was very happy with the bond that we built… just by giving her that support I open up myself to her…and doing everything possible to like, get her to open up. I think that built quite a bit of trust with her.

Another foster parent, Sarah, described her relationship with her foster son: “I think like trust developed. Umm, he got that I wasn’t going anywhere, and I think he got that I didn’t want anything from him.” Carla, a 51-year-old Hispanic foster mother recalled her experience when she was 50 years of age and parenting her foster son. While he was in her care for 10 months, Carla reported, “He trusted me a lot …. and that was something too that he left with. He found someone that he could trust.” These parents who reported on their ability to form bonds with their foster youth, often described an overall improvement in the well being of their foster youth.
Though many foster parents reported the ability to create bonds, three out of ten foster parents reported limited bonds with their foster youth. Bonding was found to be limited when there is a defensive or passive approach to communicating in conflict, and when there was a lack of trust. Samantha was one of the foster parent who had fostered for over 10 years. Of Caribbean extraction, she described having limited ability to bond with her foster youth. She described her 16-year-old foster daughter’s lack of trust in others after being placed in ten homes within a year:

I said to her, why are you acting out? and, this is a front, you know I would always talk to her, and you know, make her laugh. I’d say this is all a front. “Well it’s only about the money, and nobody cares”. I said well, I’m trying to show you why I care about you, but you’re always trying to pull away.

Samantha described an instance in which her foster youth was pulling away by not engaging in a ritual that included family dinners in which her foster youth rarely participated:

We would sit out and eat, I would call her and say, come, come out and eat. “No, I’m not hungry”. I would say come on and eat, lets go, come on. And then sometimes she would come, and sometimes she wouldn’t. I’ll say, whenever you’re ready to eat, the food is there.

Celia, another foster parent who identified as African American, had been a foster parent for two years and foster parenting her foster daughter for ten months. She reported a limited ability to bond with her foster youth describing the inability of her foster daughter to open up to her: “she would talk certain things, but she wouldn’t tell me what she’s suppose to tell me….cause she didn’t know how to bring it to me and let me know”. These foster parents with limited bonding experiences often described minimal influence on their foster youth’s overall well-being.
Creating Bonds

As noted, there were four processes that seemed to influence foster parents’ ability to bond with foster youth. These basic processes included Communicating in Conflict with Empathy or Assertion, Sharing Personal Time, Creating Rituals, and Offering Support. These will be described below.

Communicating in Conflict with Empathy or Assertion

The first theme that emerged from the study was a predominant focus of Communication in Conflict or Assertion. Communicating in Conflict with Empathy implies that foster parents affirm their foster youth’s self-esteem while redirecting or correcting the adolescent’s behavior. Communicating in conflict with assertion consists of setting clear boundaries and consequences to manage conflict. For example, Carla, revealed an empathic way in which she predominantly manages anger outbursts with her 12-year-old foster son:

He would like to get angry, bang his head on the wall, bang his head on the wall, bang his head on the wall. Not hard, [he’s] an attention seeker. He would ball up papers and come in the room and then throw them all over the room…“Aahh!! I can’t wait to get out of here!!” You know I would come in the room, I’d say did you really want to do that? Is there another way that we can handle the situation without you banging your head or balling up the paper?……He didn’t like looking [at] people, looking at me in the eyes, he would keep his head down all the time. I started complimenting him, and he would say, “You’re the only one who thinks I am good, everyone else seems to think I am bad.” And I say, well you’re good. And you tell them that…If anyone calls you bad, let them know because you don’t know me.

Lisa, an African American foster parent of fifteen years, shared her experience while parenting her daughter who was demonstrating acting out behaviors. Around 6 or 7 years into parenting her daughter, she recalled her experience of sharing empathy following a visit with her biological family:
She wouldn’t respond to me…I put my arm around her, hug her and you know, oh, everything went okay? And she would grumble…. you want to talk about it?, but I would try to take the child’s mind off of what had just happened. ….she was crazy about me, but that was still her family. And she still was missing them….and recognizing that, you know, if she had outbursts…it was just because of this reason .

Other foster parents predominantly displayed communicating in conflict with assertion. Yvonne, a 60-year-old African-American and American Indian foster parent recalled when she was 57. She described how she manages conflict with assertion surrounding her foster daughter completing her chores. Yvonne had been fostering her daughter whom for seven years and emphasized boundaries and consequences regarding her foster daughter receiving an allowance:

She was getting her allowance, and then all of a sudden she stopped wanting to do it, so then she asked me for allowance….Every week on Thursday, so I was giving it to her and then she wasn’t doing anything and it became less and less, and I said….no I’m not giving you an allowance ‘cause what did you do to earn it?...So then instead of going into a big thing, I told her when she decides that she wants to take responsibility and do some chores around the house.

While most foster parents displayed predominantly either an empathetic or assertive style to managing conflict with foster youth, some in a predominantly engaged in a passive or defensive approaches to managing conflict that limited bonding. Defensive communication has been defined as an argumentative approach to managing conflict. A passive communication style has been defined as a lack of follow through on consequence or a permissive style of approaching conflict. Celia, displayed a more defensive approach to managing conflict when attempting to engage her foster daughter in maintaining hygiene. Celia describes, “you ain’t laying around all day. You have to wash. You a, you a female. You cannot just lay there all day and not clean your body…..Here you gonna take one everyday, cause your not gonna be smelling”. She
later expressed concern over her foster youth not listening to her requests for her to care for her child that resulted in an altercation and later being removed from the home for a period of time. She described:

I said let me tell you something…. get up, get off the phone, attend to your child. She got nothing but poopy on her butt, wash her up, put some clean clothes on her, stop letting her stink…. this is my house. One thing you’re not going to do is sit in my house and tell me and tell me what your gonna do.

An African American foster parent, Eva, had been a foster parent for twenty years. She fostered her youth for six years prior to returning her to the group home due to the youth’s behaviors being unmanageable. She shared a more passive approach to managing conflict and in hindsight the desire to follow through on consequences:

I was very bad at (laughs) giving punishments and carrying it through, because she use to say to me…why do you put me on punishment for a week, you know your going to forget. So when you get ready to go out to dinner, she’ll go, I thought I was on punishment.

Eva continued:

What happened was she did started giving me a lot of trouble, and so then, the agency put her back in the group home setting…..she went into the group home, cause she was starting to get really out of hand…..getting involved with the weed, and then wanting to sneak out at night, and one boy here, one boy there, so that’s where we started to bump heads, you know. Trying to umm, get her to understand that young ladies don’t live like that, you know, act like that, and try to keep her as a young lady. It was, it was very hard, and then she had a thing of when she didn’t want to listen to me.

Overall, seven out of ten foster parents in this study appeared to resonate with communication in conflict with empathy or assertion. Three out of ten foster parents had alternate experiences that included passive communication or defensive communication in conflict. Out of these communication styles, two foster parents engaged in passive
communication in conflict, while one foster parents engaged in defensive communication in conflict.

**Sharing Personal Time**

The second theme that emerged in this study was Sharing Personal Time. Sharing personal time entails foster parents giving up their own personal time to spend time with their foster youth. A foster parent of Caribbean decent, Drucilla, discussed sharing of personal time to achieve a goal. She described a concern over her foster youth’s obesity and a desire to engage her youth in a losing weight, “I would take some time off for us to like, go to the field and walk and just so, we try to have a little exercise program”.

Another foster parent, Paula, who identified as African-American, described sharing personal time when her foster son was admitted to the hospital for one month on account of a rare condition and not leaving his side until he recovered. She stated, “the whole time he was in the hospital, I was right there.”

While some foster parents described sharing personal time to achieving a specific goal, other foster parents described sharing time for pleasure in addition to achieving a goal. One such foster parent, Eva, shared:

I wish I could instill in all foster parents, I always gave my kids quality time. I would pull them out of school for the day, and say this is quality time...we just gonna spend the whole day together. Nobody else can have.....We get up in the morning and we start out like with the pancake cottage, and then maybe we went to a movie or we went to like a little class. I use to take her to ceramic classes, and then, maybe we go somewhere to get some ice-cream, but, the whole day was hers, and I let nothing, I wouldn’t let anything come. Even in emergencies I had to hold back everything, for that day, because that was her day.
Eva later adds how despite her dyslexia she shares time teaching her foster daughter how to read, “I am dyslexic….When she came to me she wasn’t reading and I taught her how to read”. Another foster parent reveals giving up personal time to achieve a goal while having fun. Samantha explained,

I was trying to teach her how to cook. I said everybody has to learn. So I would make her come out and make macaroni pie. So we would be all in the kitchen, I play music, and I try to you know, get her involved, and let her feel homely…..we tend to joke, and play, and laugh.

A predominant focus on goal is to not only aid in achieving a specific goal, but also exposing their youth to new experiences, having conversations, engaging in pleasurable activities, etc. Sharing of personal time with a focus on goal completion was aimed at helping foster youth to complete a specific task, such as to maintain a healthy weight, assistance with homework, parent teacher conferences, etc. All ten foster parents in this study engaged in sharing of personal time. Five foster parents shared time specifically for achieving a goal. This often included attending parent teacher meetings, teaching youth about self-care and self-esteem, teaching social skills, helping with homework, and teaching youth how to cook. In addition to sharing time to achieve a goal, five foster parents reported focusing on adding pleasurable activities that included playing music, joking and laughing together, dining out, introducing youth to cultural activities, listening to youth’s stories of their family or origin, and spending time as well as cooking for foster youth’s and his or her friends.

Creating Rituals

The third theme that emerged from this study focused on Creating Rituals. To enhance connectivity, foster parents described engaging in family rituals such as meal
times, family nights, celebrations, and vacations, to name a few. Sarah, a Caucasian foster parent who had been foster parenting her 17 year-old foster son for ten months, described creating daily rituals between the two of them:

I had no expectations on if he would or wouldn’t open up….Every night he had to give me a hug, and every day before I left he had to give me a hug. At first he hated it umm, and like again by Christmas I’d get in trouble if I was leaving without giving him a hug…. so I think that was helpful for him.

She further explained being intentional and rearranging her schedule to maintain having nightly dinners:

I would leave, get to work early, so my work day was adjusted, everyone knew why, everyone got it, it was no questions asked….. being single I never cook for myself, but we had dinner at home every single night, and I had been cooking.

Another foster parent, Laura, shared how she engaged in rituals with her foster daughter:

Everybody eats dinner at the same time. We go to church on the weekends…everybody watches TV together. And sometimes they get in there, and they do umm they’ll have like little dance contests…everybody’s birthday…we get the cake, we get the balloons, we get the banners…the chips, the popcorn, all of that stuff, everyone gets a party. Everybody, there’s not one time that anybody has not had a party in this house. Everyone gets a cake, everybody gets ice cream, everybody gets chips, and everybody gets a good meal.

Other foster parents discussed rituals that took place less than weekly. One such parent, Carla, describes their ritual of having movie nights and dance parties at home: “movie nights…and you know he liked a little reggae, my kids a little soca, and a little hip hop, and we would do our little thing here”. Another parent, Eva, describes her ritual of family nights and the importance of rituals:

We did the TV, and the popcorn, and we all sat together, and that was kind of a good time to share, I don’t think they all voiced even her, a lot of what she was going though in front of other people….you had that, that free time, then she would talk.

All ten foster parents in this study attempted to create rituals with their foster youth.

These rituals often included cookouts, movie nights, sharing recipes, bowling, vacations,
dining out, game nights, drama nights, and dancing. Seven foster parents engaged in rituals with their foster youth daily or weekly, while three foster parents engaged in rituals less than weekly.

**Offering Support**

The fourth theme that emerged from the data used for this present study focused on Offering Support to aid their foster youth in managing personal issues or to help their foster youth maintain healthy relationships with others and as well as their extended support systems. Offering support has an emotional component in that foster parents often shared a part of themselves with their youth and/or their youth shared parts of themselves with their foster parents. This connection was for the purpose of helping foster youth to manage their emotions or to help them connect with others. As a result foster parents were able to connect with their foster youth, in contrast to sharing personal time, which is activity focused or goal oriented. One such foster parent, Lisa described:

*Umm, just being supportive of her encouraging her, you know, to do better, to umm, to uh, you know, to talk to me more, and letting her know that I was there and I am not going anywhere. And I think that helped a lot….and just talking to her on a daily basis. Giving her hugs, letting her know that I’m there, and if she needs me, I am not going anywhere. I didn’t talk about the negative all the time, you know, cause she liked to do that, throw that up all the time. “When I tried to kill myself”, I said we not talking about that today….what are we gonna do today? You know, let’s not focus on that negative stuff, so she needed that… that constant, you know reminder.*

Another foster parent, Yvonne, offers problem-focused support when her daughter whom she was fostering was in need of support surrounding the stigma of being placed in foster care:

*So I try to take and incorporate the things that I’ve been through, and to understand them more. Like I was the child that daydreamed in class like, where*
are my siblings? You know, and stuff like that, so I’m trying to teach her that just because your in foster care doesn’t mean that your different really than anybody else, because we all have went through something, some separation, or not knowing our father.

Laura illustrates relational support by offering support in a to not only her foster daughter but also her friends:

She struggled for a little bit in the beginning and then when she saw that I was behind her, then she started picking herself up, because everybody else [made a promise] and broke their promise, there was nobody to stand in that corner. But when she would see that I would be behind her, to push her, then she knew that she had some kind of support group. Okay I am going forward now…. Be there for her, you know, and she also had friends that were going through rough times. They weren’t umm in the foster system, but a lot of them were having problems at home. I was always the one that she would bring the kids home to talk to. It’s just like your raising your own child. When you umm have children and, you know, they are going through something or their friends are going through something…. you can always come here.

Another foster parent, Samantha, engaged in relational support when she offered support to her foster youth and her sister who was pregnant by taking them shopping:

One day she asked me if her sister could come. And…the sister was pregnant, and then I took her and the sister shopping, and I bought like a couple of baby items for the sister.

All ten foster parents in this study offered foster youth support. Five foster parents offered support mainly to their foster youth, while five foster parents offered support to not only their foster youth, but to their extended support systems.

Bonding in this study is connected to four processes that include Communicating in Conflict with Assertion or Empathy, Sharing Personal Time, Creating Rituals, and Offering Support. Trust is established through these processes, enabling bonding to take place between foster parent and foster youth. Based on the experiences shared by foster parents it is posited that the more foster parents display these factors, the better they are
able to establish trust resulting in the formation of bonds between parents and the youth they are fostering. Demonstrating these was a focus on the foster youth being a member of their family.

**Family Focus**

Many foster parents maintained a mindset about their foster youth being a member of their family rather than simply an adolescent they are fostering. As foster parents spoke, there was a focus on foster youth being a part of the family. It appeared that foster parents were better able to engage in the processes of bonding. In addition, foster parents were able to give their foster youth a sense of inclusion, and engage in the process of bonding while being able to persevere in the face of challenges. One foster parent, Sarah, exemplifies this mindset when she described her foster son in his earlier months of moving in: Let the quote make sense. I am not understanding. Can this be clarified to make sense? I know that it is a quote, but the person intended to make sense.

He kept saying his whole thing was, your pissed send me back, like I don’t want to be here, you don’t want me, I’m not listening, send me back. Like that was, that was his fun game, and I was like dude, you have no idea how persistent I am, the last thing I’m gonna do in the world is bring you back. I was like, you are mine forever and...it was like ongoing, but that was his whole thing, just bring back, bring me back, I’m like nope. So once we got to like a couple months in, then he realized, like he even stopped saying it, umm that’s when I think he was open too.

Another parent, Lisa, described wrestling with her foster daughter’s behaviors when she first came into the home and whether or not to continue fostering. She described how the focus of her foster daughter being a part of the family helped her to push through the challenges of fostering:
It was hard; some nights I was, like, can I really do this? I questioned myself, I question why I was doing it. And I said, you know, is it gonna pay off in the end. You know, umm for this child, and for my family. Is it? I had to question whether it was affecting my daughter, you know my biological daughter, and umm I just, I prayed a lot… I had the support of my family so we talked about it a lot. And my family had already umm developed a relationship…so that made it a little bit easier.

She also added how she included her foster daughter as a part of the family:

We share love with one another…and having my family so readily include her in everything. And I think that’s what gave her comfort, knowing that if Valentine’s day came she’s gonna get a Valentine’s surprise just like, you know, my daughter was, or Christmas comes and we go to my moms house, she’s gonna get a gift too, cause she’s included. So, I think…that’s what really made it, umm, you know allowed her to trust and be able to function better, because she wasn’t feeling like an outcast. She wasn’t feeling like I’m just a foster child, and I’m not gonna be included.

Family focus is a frame of mind that is often expressed by including their foster youth in all family events and treating him or her as a member of the family. Foster parents not only had this mindset, but, in many cases, made verbal expressions such as “your room” or “your home” to their foster youth. This included words such as “family time” that informed their foster youth that they were included and were part of their family. Some foster parents described having videos and pictures of the youth they were fostering. When foster parents in this study conveyed the sense of family to their extended family as well as their foster youth, many of the foster parents’ extended supports accepted the youth as family. It is through the focus on family that enables foster parents to engage in activities to help establish bonds with their foster youth.

Figure 1 demonstrates the four processes of bonding between foster parents and foster youth.
Figure 1. The Process of Bonding
Discussion

This study sought to explore how foster parents were able to create bonds with their foster youth from the perspectives of foster parents. Foster parents described four processes that included Communicating in Conflict with Empathy or Assertion, Sharing Personal Time, Creating Rituals, and Offering Support. These processes contribute to bonding considerably through the focus of their foster youth being a part of their family, which aided in building trust.

This present study noted how foster parents create bonds with their foster youth. Previous research by McLean, Riggs, Kettler, and Delfabbro (2013) found that when foster parents created an emotionally close relationship with their foster youth, there was behavioral improvement among these youth. In addition, children with foster parents who were in tune with their emotions often expressed less feelings of anger, fear, or sadness (Bovenschen et al., 2016). In addition, foster mothers reported their foster children illustrated more relational behavior and less internalizing behavioral problems when they viewed their relationships with their foster family as positive (Milan & Pinderhughes, 2000).

This current study revealed the importance of supportive foster parents. One previous study echoed that children were able to find a secure base in their foster parents who were a supportive presence (Bovenschen et al., 2016). It was also noted that a supportive foster parent helps foster youth to build self-esteem (Affronti, Rittner, & Jones, 2015; Denuwelaere & Bracke, 2007; Luke & Coyne, 2008). Support also had the ability to decrease the effects of family disruption. The effects of maltreatment were mediated through caregiver involvement, and found that the support of foster parents
moderates negative effects of family disruption and negative exposure (Pears et al., 2010). Supportive foster parents were associated with fewer emotional problems among foster children (Denuwelaere & Bracke, 2007). To further explore the positive effects that foster parents have on foster children, Pears, Kim, and Leve, (2012) engaged in a quantitative study in the U.S. with girls and their foster parents. They found that foster parent support increased competency in academics and decreased aggression against peers among girls in foster care (Pears et al., 2012). These findings coincided with the findings of this study that highlights the importance of supportive foster parents. This current study extended the work of these previous studies offering thick descriptions of how foster parents offer support.

Although many parents in this study described the ability to create bonds with their youth, there were some were three foster parents that experienced limited bonds. One parent mentioned a foster youth in particular that had experienced 10 placements within a year. McLean and colleagues (2013) in a study that included foster parents, discovered that some children had a limited ability or desire to create an attachment bond as a result of experiencing multiple placements. There was a lack of trust in foster parents due to past experiences, and a desire to create distance for protection (Skoog, Khoo, & Nygren, 2015). These two studies may provide possible insight by explaining why the foster youth in this present study had difficulty trusting, engaging in family rituals, and creating bonds with her foster mother. She frequently stated “no one cares” and that “it’s only about the money”. Affronti and colleagues (2015) noted that foster care alumni shared similar beliefs that foster parents only cared for them due to the financial benefits.
The foster parents style of communicating in conflict was important in enabling bonding between foster parent and child. When foster parents engaged in communication in conflict with passivity or defensiveness, there were limited bonding experiences. Current studies noted the way foster parents communicate in conflict has an impact on their foster youth. Studies have also found a link between permissiveness and externalizing behavioral problems (Argyriou, Bakoyannis, & Tantaros, 2016; Fuentes, Salas, Bernedo, & García-Martín, 2014). Salas, Garcia-Martin, Fuentes, Bernedo (2015) found that children’s self-esteem is negatively affected by criticism and rejection. Lannin, Bittner, Lorenz (2013) noted that a defensive approach to communicating in conflict often increased conflict. In addition to an increase in behavioral problems, an increase in conflict between foster children and foster parents was associated poor bonding experiences among foster children (Denuwelaere & Bracke, 2007). These studies also offer insight to the foster families that experienced limited bonds due to their permissive or defensive approach to managing conflict. As these studies have noted when communicating in conflict occurred with defensiveness or passivity there is an effect on the bonding experiences, therefore not engaging in this factor can significantly affect bonding experiences.

Most importantly, bonding occurred as a result of a focus of the perception that their foster youth was a part of the family, despite the challenges of fostering. Most of the foster parents shared this sentiment in questioning whether or not the child would benefit by remaining in their care. Other studies have noted the importance of not giving up in the face of challenges and the significance of inclusion. One such study noted that parents expressed a presence of security towards their foster children by not giving up on
them in the face of significant challenges (Christiansen, Havnen, Havik, & Anderssen, 2013). In addition to not giving up, inclusion was also crucial to enabling foster youth to feel a part of the family. Most foster youth felt as though they were a part of the family through inclusion (Affronti et al., 2015; Christiansen et al., 2013). Biehal (2014) further added ways in which foster children felt included through the foster family gatherings, rituals, family events, birthday, holidays, family outings, and implicit by daily practices of inclusion coinciding with the current study’s finding. Another study noted that foster parents who include foster youth in family outings, encourage community involvement promote a sense of normalcy and inclusion (Luke & Coyne, 2008). Long-term foster families and their extended families can provide family membership and support to foster children (Schofield, 2002). It is through this focus, that the processes of bonding are able to occur.

This study explored how bonding occurred between foster parents and their foster youth from the perspectives of foster parents. These four processes that included Communicating in Conflict with Empathy or Assertion, Sharing Personal Time, Creating Rituals, and Offering Support. These processes influenced bonding considerably through the focus of their foster youth being a part of their family. These studies have emphasized the importance and contributions of these findings of this present study.

**Strengths and Limitations**

While the findings were relevant to the phenomenon of interest in the sample population and suggest theories and hypotheses for future investigation, caution is advised in the development of generalizable theory beyond this limited qualitative sample.
(Gelo, Braakmann, & Benetka, 2008). This study sought to gathering thick descriptions of the participants experience rather than utilizing a large sample to test hypotheses or generalize in the statistical sense (Gelo et al., 2008). In addition, this study was limited to foster parent’s perceptions regarding their relationship with their foster youth. Therefore, no behavioral count was done determine how often bonding occurred within each of the factors. Therefore, reliance is on what the foster parents described. It is also important to note that participants who volunteered to participate may have had a more pleasant experience in fostering than those who chose not to participate in this study.

The findings of the current study compliment findings from previous research and emphasize the importance of foster parents maintaining emotional ties with their foster (a word is missing after foster). Psychosocial issues are a great concern for foster families. With many factors contributing to maladjustment, it is important to gain thick descriptions & an understanding of foster family dynamics that influence the overall well-being of foster youth. This study adds to the existing literature by illustrating how bonding occurred between foster youth and foster parents within this sample. This study also adds to the literature by applying attachment theory to the study of foster families which was shown to be sparse (Bovenschen 2016). This current study also addresses the research gap by using a qualitative approach as most articles on foster families is quantitative in nature. In addition, most of the researchers on foster families have been conducted by social workers that focus mostly on child welfare structural issues, rather than on family processes by family scientists. Lastly, most of the literature on foster families and the application of attachment theory focused on the childhood ages, and fewer on youth in long-term foster placement.
Implications for Theory, Future Research, and Practice

This study has implications for theory, research, and practice. While the literature is growing on foster families, limited studies focus attachment and on how foster parents are able to bond with their foster youth. With regard to research, this study sheds important light on the gaps in the literature. Due to the over representation of African-American foster youth in the foster care system (Knott & Donovan, 2010; Summers, 2015), studies that focus on these youths are crucial. This study responds to that call and will help to advance this research. In addition, this study has implications for marriage and family therapists, family life educators, and social workers. Marriage and family therapist, family scientists, and social workers can play a significant role in helping foster parents work on stabilizing the symptoms of their foster youth. Marriage and family therapist can engaged foster families in bonding experiences in session and discover how they may engage in these factors of bonding in ways that are specific to their youth. Family life educators may provide seminars educating foster families on how they may enhance bonding experiences between foster parents and their youth. Finally, social workers may also provide training and policy geared towards enhancing foster families and bonding.

This study was limited to foster parents’ experiences, and does not include perspectives of foster youth, biological children of foster parents, biological parents of foster youth, social workers, or other foster children who are placed in the home. Future studies may wish to incorporate foster youth and additional systems the foster youth is a part of. Additionally, future studies may want to address the marital status of foster parents, and reasons for fostering that may affect the adjustment of foster youth.


APPENDIX A

PSYCHOSOCIAL ADJUSTMENT IN FOSTER FAMILIES RESEARCH PROTOCOL

SUMMARY

This present study as proposed seeks to explore the dynamic relationships in foster families and how these relationships foster adjustment in foster parents and foster youth. This study will take the form of in-depth interviews with foster parents. The interviews will be based on an interview guide that attends to the major research areas of interest. Interviews will be transcribed and analyzed using a constant-comparison qualitative approach. Results will help researchers, practitioners, educators, and policy makers firstly to understand specific aspects of foster family experiences. Secondly, the results will help to develop theory and guide interventions that are grounded in the lived experiences of these families.

I. PROBLEM AND OBJECTIVES

Rationale

Children in foster care often have poor behavioral, emotional, and social development. Facilitating psychosocial adjustment is an important task for foster parents. As well, developing relational bonds are necessary to help establish trust in the foster home. Studies have identified different components to consider in the policy and practice of foster care. Continuity of care and stability of foster children are the main goals in the preservation of relational bonds. This study is going to focus on exploring what foster parents are doing to assist in the facilitation of adjustment.
Problem Statement/Objectives

The purpose of this study is to understand the role that foster parents play in the facilitation of psychosocial adjustment of foster youth. The major research questions for exploration are:

1. How do foster parents facilitate psychosocial adjustment of youth in foster care?
2. How do the interactions between foster youth and foster parents facilitate psychosocial adjustment?

Previous Studies, Background

Iglehart (1993) emphasized that foster children who entered foster homes at a younger age were less likely to be maladjusted than children who entered foster care at a later age. Children who were abused displayed an increase in behavioral maladjustment than children who had been neglected (Marquis and colleagues, 2008), while children that were labeled as disruptive or identified as problematic were more socially maladjusted (Barber & Delfabbro, 2002). It has been observed that psychosocial adjustment generally improves over time with children who are placed in foster homes (Barber and Delfabbro, 2005).

In the realm of foster care, foster parents are at the forefront of providing a secure base for social, emotional, and physical development. Some studies have identified the importance of foster parent emotional sensitivity to work with foster children (Oosterman & Schuengel, 2008; Schofield & Beek, 2005). Other studies have demonstrated that foster parent training in general is beneficial when examining placement stability, parent attitudes, parenting skills, and emotionality-tension (Boyd & Remy, 1978; Czerwinskyj,
There are some limits to these aforementioned studies that this present research study would examine. Further, retrospective studies have made the attempt to explore adjustment. This study will capture how foster parents facilitate adjustment as it is happening.

II. METHODS

A. Overview.

This present study as proposed will use a qualitative methodology. Specifically, it will utilize a constant-comparison approach towards the development of grounded theory (Corbin & Strauss, 2008). This occurs throughout the process of coding, by using small, similar group of cases, and grouping them together. When new responses do not fit within those that have already been identified, new categories are created. Analysis moves from simple categorization to determining how the categories are related to one another. Data collection and analysis will continue until new categories no longer emerge or appear to be defined. Unlike quantitative method, no attempt will be made to generalize in the statistical sense. Participants are selected for theoretical purposes in order to determine the extent to which the findings from one particular case or set of circumstances appear to apply to another.

B. Length and Scope of Study

The data collection range for this study can occur between 15 to 40 interviews, but will end upon theoretical saturation. As far as time frame is concerned, this study will be open ended. Due to the in-depth nature of the study, and new topics for focus maybe constantly generated as more information is collected during the interview.
process. The target date for completion of data analysis and manuscript preparation of the first phase of the study is April 2015, but may be extended due to theoretical saturation.

C. Permission To Engage In Research

The researcher does not have immediate access to foster parents for the purpose of research. As such, it is important to get appropriate approval in order to conduct and engage in research involving this population. Upon approval from the Institutional Review Board of Loma Linda University, the researcher will then submit this document to the agency overseeing foster families to seek their approval. Oversight will be shared in accordance with the guidelines.

D. Sample Selection and Informed consent

The foster care agency will receive a letter and be contacted regarding handing out flyers to potential participants and placing them in their agencies. The letter says there will be one interview. As mentioned, participants will be recruited using flyers. When contacted the researcher will utilize a phone script to discuss more details of the study. Participants would be asked to recommend others that they are aware of that meet the inclusion criteria. In addition, a letter (Appendix B) will be sent to some foster agencies soliciting their support in placing/posting flyers in their agency. All interested families would be invited to meet a designated researcher at an agency or other convenient location for an appointment. All participants will be given an informed consent at the time of the scheduled appointment. They would be given time to review the document and to decide on participating through signing the informed consent (Appendix C). As determined by the and by the board that oversees foster
families within the region of this sample. The inclusion criteria for this proposed study include: 1. Being a current or previous foster parent under the age of 65 at the time they had at least one African-American foster youth between 12-18 years of age; 2. Having at least one target child for at least 6 months. Exclusion criteria include: 1. Not having at least one foster child between 12 and 18 years of age; 2. Being a foster parent for less than 6 months.

E. The Interviews

Participants will be interviewed in their homes. The interviews will take the form of a guided conversation utilizing an interview guide (Appendix E). The interviewer will focus primarily on the issues and topics that seem most salient to the major areas of concern for the present study. Demographic information will be collected from the participants with the use of a structured demographic questionnaire (Appendix F). Each interview is estimated to last for approximately 60 to 90 minutes.

F. Training and Qualifications of Interviewers

The interviewer would:

- Be graduate level students in family science who have completed courses in research methods, including qualitative research.
- Have experience talking with people about personal issues.
- Undergo training for this specific project related to foster families dealing with legal and ethical issues, as well as other sensitivities needed for dealing with the prevailing areas of inquiry.

G. Transcription and Storage of Interview Data.
All interviews would be audio taped using a digital recorder. Participants will be informed of the intention to record interviews to facilitate direct documentation of each interview. The taped interviews will be transcribed and all names and other indentifying information will be removed from the transcribed data and each interview will be assigned a number to identify it. For example, an interview with a foster parent will be assigned a number 100. Only members of the research team will have access to the transcribed interviews. After transcription, the audio-file would be destroyed. Names and addresses of respondents who gave permission to be re-contacted will be stored separately from the transcripts in a locked file cabinet. Data stored on computers will be password protected to ensure confidentiality.

H. Confidentiality of Respondents in Presentation of Results

If quotes or examples from interviews are utilized, all identifying data will be changed to protect anonymity of participants. Information received during the interviews and research process will be held in the strictest of confidence by the researcher.
APPENDIX B

LETTER TO FOSTER AGENCY

Date
Organization
123 Street
City, State, Zip

Dear

We are contacting you to request your participation in a research study that explores the perspectives of foster parents in regards to the adjustment of foster youth in their care. We know that families in foster care have positive experiences as well as challenges. Further, they are faced with the task of creating attachment bonds while during many familial transitions. Facilitating psychosocial adjustment is an important task of foster parents. While this study is intended to add to the research literature on foster families, the results may have some benefits to foster family agencies and workers that provide ongoing training in this area. These benefits will be reflected in furthering the research of foster families.

We are kindly asking for your participation in our research project. We would like you to help us recruit current or previous foster parents who are under the age of 50, or were under that age at the time of fostering the African-American foster youth. These foster parents must have an African-American foster youth between the ages of 12-18 who have been in placement for 6 months or longer. When necessary we may request the use of a room at your agency to conduct interviews at your convenience. Your support will include passing out flyers to your foster families about the study with our contact information if they are interested in participating. Interviews will be between 60 to 90 minutes in length.
The data collected will be kept confidential and all identifying information will be removed when the interviews are transcribed. All participants will be treated with respect.

The researchers will follow up with you by phone in the next two weeks. If you have any questions and/or wish to participate, please feel free to contact Alicia Nicoleau, M.S. 718-407-4807 or Dr. Winetta Olool: 909-558-4547 ext. 42099 the research supervisor at Loma Linda University. This is my doctoral dissertation project.

Thank you for your time and consideration.

Sincerely,

Winetta Olool, PhD

Alicia Nicoleau, M.S.
Informed Consent for Foster Parents

This is a request for your participation in this dissertation research study on foster families and how foster youth and foster parents adjust to the experiences of being in these families. The interview will include African-American foster parents under the age of 65 with an African-American foster youth ages 12-18 who have been under your care for at least six months. The interview will be conducted by a doctoral level student from Loma Linda University.

Purpose and Procedures

The purpose of the interview is to understand the dynamics of foster families. After you sign the consent form, you will participate in an interview that will take approximately 60 to 90 minutes to complete including the survey. Interview questions will include history as well as foster parents’ experiences of foster care with their foster youth and foster parental assessment of foster youth adjustment. The interview will be audio taped and all tapes destroyed after transcription. Data collected from foster parents and foster youth will be kept private without any information that identifies the participants of this study.
Risks and Referral

The Institutional Review Board at Loma Linda University that reviews human studies has decided that participating in this study exposes you to minimal risk such as memories of past events. Potential participants may refuse to answer any questions that make them uncomfortable during the course of the interview. For those in need of counseling services, referral source to psychological services may be provided at your own expense. A separate listing of low cost or free community services will be given at the time of the interview.

Benefits

This study has the possibility of providing participants with a chance to share your thoughts and experiences that concern foster families.

Participant(s) Rights

Your participation in the interview is completely voluntary. You have the right to withdraw from the study at any time. Your decision whether or not to participate or withdraw from this study at any time will not affect your ongoing or future relationship with foster agencies. There will be no penalties for withdrawing from this study.

Confidentiality

The researchers will make every effort to maintain your right to privacy. All personal information in the study will be kept private. All recordings will be destroyed after the interview has been recorded and any identifying information will be secured and removed from the record.

Cost and Reimbursement

Each participant in this study will receive a $25.00 gift card after completing the
interview.

**Impartial Third Party Contact**

If you wish to contact someone not associated with the study regarding any question or complaint that you may have about this study, please contact the Office of Patient Relations (OPR) at Loma Linda Medical Center, Loma Linda California, 92350, email patientrelations@llu.edu, and phone (909) 558-4647.

**Informed Consent Statement**

I have read the contents of the consent form and have understood the verbal explanation given by the investigator. I hereby give voluntary consent to participate in this study. Signing this consent document does not waive my rights nor does it release the investigators or institution from their responsibilities. I may call Dr. Winetta Oloo at (909) 558-4547 ext. 42099 if I have any additional questions or concerns. I have been given a copy of this consent form.

By signing below, I give informed consent to participate in this research project:

_____________________________________________ ________________
Name of Participant Date

_____________________________________________ ________________
Signature of Participant Date
I have reviewed the contents of this consent form with the person signing above. I have explained potential risks and benefits of the study. I attest that the above named subject has indicated their consent to participate in this study.

Signature of Investigator

Printed Name of Investigator

Date

Date
Hello (insert name) my name is Alicia Nicoleau, and I am a doctoral student in the Department of Counseling and Family Sciences at Loma Linda University. Our research team is conducting a research study on foster families to explore issues of adjustment and bonding in these families. I plan to conduct interviews with current or previous foster parents under the age of 65 that has at least one African-American foster child that is 12 years of age or older in your care for at least six months. Do you meet this criteria. (If yes continue, if no thank them for their time and ask about a referral for someone who does meet criteria) ….

We would like for you to volunteer to be a part of this study. Participation is completely voluntary and we value any choice that you make regarding our request. You are free to stop participating in the interview at any point. After completion of the interview you will receive a $25 gift card as our thanks. I would like to tell you a little more about the study so that you can decide if you want to volunteer to participate.

Should you participate, you would complete one interview and fill out a brief demographic survey that will be approximately 60 to 90 minute in length total. This will not be a therapy session. The purpose is to help researchers understand foster families through your eyes. No evaluation or judgment of your family would be made. Some examples of the interview questions would be experiences as well as challenges you face as a foster parent and some of the experiences and challenge your foster youth has faced. We are requesting one foster parent to agree to participate in the interview process.
All information obtained from the interview will be kept confidential to protect all participants. All indentifying information will be removed when transcribed and all audiotapes will be destroyed after transcription. Do you have any questions? (If yes or ask more about how it works…..)

Would you like to participate so that we can begin the process of getting the proper consents and could you talk with the foster child about their interests?? (If yes, continue. If no thank them for their time and ask about a referral).

Please let us make arrangements for the interviews at this time.

When we meet for the interview as scheduled, we will review the procedures involved in this study and ask each of you to sign a consent form documenting your willingness to participate.

Referral Interview

Introduce yourself as a doctoral student in the Department of Counseling and Family Sciences at Loma Linda University. I recently interviewed (Mr. or Mrs.) and she/he referred me to you as a person who may be helpful to us in a research project that I would like to tell you about. She/he (Referral Source) thought you might be interested. We know foster families have particular experiences that are noteworthy. To learn more about what real people are experiencing, we would ask a number of questions that we would like for you to respond to. Allow me to tell you more about the study at this time.
APPENDIX E

INTERVIEW GUIDE

Each interview will address all of the following general questions, followed by probes to expand and clarify meaning and to pursue topics raised by the respondents. Elicit specific examples. Ask “why?” The order and wording of the questions may be altered to fit the flow of the conversation. Each of the questions will be softened through the use of language such as “please describe…” and “kindly tell me…”, etc.

Getting Started

1. Begin with a few moments of “small talk” to engage the respondents and help them feel comfortable.

2. Review the purpose of the study and the informed consent document. Obtain the informed consent and data sheet of each participant.

3. Inform the participants that they will be involved in a directed conversation, that you are not evaluating them, but learning from them. Remind them that they may decline to answer any question or shut off the recorder or conclude the interview at any time. Ask if there are any other questions.

History of Fostering

1. Thank you for taking the time out of your busy schedule to be interviewed…. to begin please describe what were some of the reasons that inspired you to become a foster parent?

2. Do you have a significant other who co-parents with you?

If co-parenting, ask:
3. What is your experience like in co-parenting with your partner with your foster youth?

4. What were some of the important circumstances that made it possible for you to foster ____ (name of youth)_____.

5. Tell me about some of the support and resources you receive or utilize as a foster parent.
   - Social and children services
   - Counseling
   - Classes
   - Special school services
   - Church and other community support
   - Supportive relationships

6. What would you say are some of the challenges of foster parenting?
   - What are some of the challenges of foster parenting ____ (name of youth)_____.
   - How were you able to manage these challenges?

7. Please share with me some of the things that you enjoy most about foster parenting.
   - What do you enjoy most about being a foster parent to ____ (name of youth)_____.

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Impact of Foster Parenting and Parental Assessment of Youth Adjustment

8. Tell me about some of the changes you had to make when ____ (name of youth) ____ came into the home?

9. Tell me about some of the changes your family had to make when ____ (name of youth) ____ came into the home?

10. Describe what your role is as a foster parent(s)?

11. Please share with me some of the things that occur on a daily or weekly that help to create some togetherness in your family

   - Celebrations
   - Special days
   - Birthdays
   - Holidays
   - Holy days

12. Kindly share some of the challenges ____ (name of youth) ____ has faced, such as any problems with their behavior, expressing emotions, friends, and in school.

   - How did you manage the challenges?
   - How have these challenges improved over time?
   - How do you think you’ve contributed to overcoming the challenges?
   - What did your foster youth do to overcome the challenges?

13. How would you describe the emotional adjustment of ____ (name of youth) ____ before and after the time they came to you, as far as you know?

14. How would you describe some of the emotional issues after ____ (name of youth) ____ came into the home?
• How have these symptoms gotten better or worse over time?

• How do you think you’ve contributed to overcoming these challenges?

15. Do you get mental health services to help manage these issues and how have those services been helping since you have been receiving them?

16. Do you expect that these issues would resolve over time what are your thoughts about the future of these situations?

17. Is there anything else you would like to share or let me know?
APPENDIX F

BACKGROUND INFORMATION

Each Participant must Complete

Family #__________ Date Interviewed _________

Sex: ____Male   ____Female   Year of Birth 19_______(Year)

Race: (Choose One) ___Black ___Hispanic ___ White ___ Asian ___ other

__________________________ Insert Information

With what ethnic group do you identify? (i.e, Korean, Mexican, Greek, etc.)

__________________________

Marital Status: ___ Married___ Never-Married___ Divorced___ Widowed ___ Remarried

___ Cohabitating

If remarried number of marriages____

Current or Previous Occupation __________________

How many foster children are currently living at home? ________

List their ages__________________________________

Do you have biological children? _____No _____Yes

List their ages__________________________________

How long have you been a foster parent? ________
Length of stay of foster youth discussed in the interview _____________

Age of youth (discussed in the interview) at the time he or she stayed in your home

A1. What is your highest level of education completed?

___Elementary school ___High School ___

College/Trade School

___Some high school ___ Some College/Trade School ___ Graduate School

A2. What is your personal yearly income?

___Below $20,000 ___$ 21,000-40,000 ___$ 41,000-75,000 ___above $75,000

A3. How many hours a week currently, do you work outside the home?

___ 1-10 ___ 11-30 ___ 31-40 ___Over 40 ___

Do not work outside the home? Yes ___ No___

A6. Are you a member of a church? ___Yes ___No

A7. With what religious faith do you identify?

______________________________
A8. How often do you attend religious services?
______________________________________
Please provide contact information so that we may reach you for possible follow-up information.

(Voluntary—will be stored separately from the information you provide)

ID #_________ Date Interviewed _____________

My name _________________________________

My phone number __________________________

My addresss__________________________________________

Street Address or PO Box City State Zip

Do you know anyone else that would be willing to participate in this study?

Name _________________________________
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