A COMPARATIVE INVESTIGATION OF THE EFFECTIVENESS OF TWO FOSTER PARENT TRAINING PROGRAMS

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ABSTRACT

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Over the last 50 years, foster family care has become the most widespread from of substitute care for children with special needs and those requiring parental surrogates. With this reliance has come the realization that foster parents require specialized training if they are to respond adequately to the needs of children under their care. While a great many training programs have been developed, their evaluations have not been conclusive.

It was the purpose of this investigation to assess the differential effects of two 16-hour behaviorally-oriented foster parent training programs on perceptions of family climate, parenting efficacy, placement stability and dependence on agency staff. One curriculum emphasized child behavior management and self-management, while the other concerned only behavior management. The self-management component was designed to train parents in techniques of self-control that would allow them to reduce emotional

arousal and facilitate the use of behavioral principles in crisis situations.

A group by time research design was used to evaluate the two curricula. Pretest, posttest and follow-up measurements were made, the latter 60 days after completion of training.

The subjects were licensed foster parents affiliated with a child placement agency, who were required to attend training to maintain their licenses. The majority of the subjects wre urban black, female, single heads of households. It was hypothesized that subjects trained in both parenting and self-management skills would outperform those trained in parenting skills only.

Using univariate analysis of repeated measures analysis on the data, it was found that the two training groups did not significantly differ on the outcome measures. It was reasoned that the results could not be explained solely in terms of the manipulated variables, but that selection bias due to attrition, poor attendance, insufficient training time, subjects' inadequate reading and writing skills and trainer's inexperience with persons of low educational levels, offered competing explanations of the results. It is suggested future efforts at foster parent training curriculum development take into consideration the learning styles and needs of foster parents with low educational levels.

Dedication

To my parents, especially my mother, Julie Mariellie, whose belief in my abilities helped me to believe in myself. To my wife, Margareth, for her patience, understanding and devotion and to our son, Jean-Paul, whose presence has enriched my understanding of what it means to be a parent.

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CHAPTER ONE

THE PROBLEM

Introduction

Over the past fifty years, foster family care has become the preferred form of substitute care for neglected, abandoned and abused children. Fanshel (1970) indicated that in 1933, foster parents cared for 42 percent of children in need of surrogate parenting. By the late 1970s, 75 percent of such children were served by foster family care (Horejsi, 1979). Of 1.8 million children under the age of 18 who were receiving social services in 1977, more than half a million were involved with foster family care (Shyne & Schroeder, 1978) and in 1974 it was estimated that about 160,000 foster families per year served as surrogate families (Child Welfare League of America, 1974).

This increased reliance on foster family care has presented foster care professionals and foster parents with new challenges. Today's foster children often come from home environments that have contributed to developing behavioral and emotional difficulties (Horejsi, 1979; Kaplan & Seitz, 1980). These include disorganized home

environments (Maas & Engler, 1959; Thomas, 1961), where family members possess relatively few personal and social resources (Horejsi, 1979). Foster children, thus, are likely to have histories of parent-child conflict, aggressive behavior, self destructive tendencies, disruptive community behavior, school difficulties and emotional disturbance (Gillham, 1983; Larson et al., 1974). In addition, a large proportion of foster children are reported to be physically, medically and mentally disabled (Bryant, 1981; Gillham, 1983).

The difficulties inherent in working with problem children have turned foster parenting into a more demanding job than it formerly seemed to be. Foster chidren appear to require much more than a stable home environment and parental supervision. Compared to other children, a foster child is likely to require more of the foster parents' time, effort and commitment according to Dinnage and Pringle (1969). Gillham's observations (1983) appear to corroborate those of Dinnage and Pringle. She indicates that "providing care to children with special medical or emotional needs requires not only extra time, but also greater patience, skill and endurance in dealing with the child's demands and their effects on the foster parents personal life " (p. 9).

Need for the Study

The foster care field is lagging in its ability to provide foster parents with the skills needed to successfully respond to the needs of today's foster children and to reduce the effects of those needs on their personal lives. The difficulties presented by foster children and the inadequate preparation of foster parents have combined to create situations that are likely to result in more harm than good for both children and foster parents. For example, Hampson and Tavormina (1980) question the ability of foster parents to manage behaviorally and emotionally disordered children therapeutically. Because of these discrepancies between foster parents' skills and children's needs, the stability and continuity of care that are so crucial to the behavioral and emotional rehabilitation of children, is in jeopardy. This is especially evident when foster parents become disillusioned and withdraw from family foster care (Boyd & Remy, 1978). The realization that foster home care entails much more then they had anticipated appears to underlie the decisions of many to drop out. Such parents appear overwhelmed and completely bewildered by their foster parenting experiences (Cautley, 1980). Boyd & Remy (1978) reviewed the findings of a 1973 study which revealed a one-year dropout rate of 25 to 50 percent. Other parents, who do not drop out of foster family care when faced with an emotionally or behaviorally disordered child,

may request the removal of the child but remain potential foster parents. These parents, however, feeling deceived by the placement agency, are likely to become cautious about accepting new referrals and relucant to accept new placements (Cautley, 1980; Horejsi, 1979).

When a foster parent drops out or requests the removal of a foster child, the placement is a failure and necessitates the replacement of the child. Garrett (1977) found that foster children are likely to experience 2.7 moves or new placements before leaving the foster family care system. Stone and Stone (1983), after an examination of 64 case records, found that 48.5 percent of the children had experienced unplanned transfers. A majority of the unplanned transfers occurred within the first four weeks of the placements. Cautley (1980), in a study of new foster parents, found that one-third of the parents requested the removal of their foster children. Of 39 parents, 15 percent requested removal of the foster child within three months of the placement. This situation has been found to be related to adverse emotional states in foster children and foster parents (Bauer & Heinke, 1976; Dinnage & Pringle, 1969; Fein & Maluccio, 1984; Horejsi, 1979; Kline & Overstreet, 1972; Stone & Stone, 1983), which severely impede the delivery of quality care to foster children (Stone & Stone, 1983).

Replacements and Foster Children

It has been argued that multiple placements contribute to feelings of rejection, insecurity and a sense of rootlessness in foster children (Horejsi, 1979). Being moved from one home to another fosters a distrust of adults and strengths feelings of being unacceptable and unwanted. Children who experience such replacements are at risk of developing identity problems, suffering fears of separation and experieincing difficulties in forming close relationships (Horejsi, 1979). Moreover, replacements have been found to be related to adjustment difficulties that tend to increase the risk of failure in future placements (Boyd & Remy, 1978; Maas & Engler, 1959). In addition, failed placements may delay a foster child's return to his natural family or render permanent placement more difficult when return to the family of origin is not possible or preferable. Fein & Maluccio (1984) reported that children with more foster placements did not do as well as those with fewer placements on measures of family adjustment, behavior and school functioning (p.428). While the investigators did not indicate what constituted "more" and "fewer" placements, it appears that failed placements have the potential for transforming temporary placements into a way of life.

Replacements and Caseworkers

Unsuccessful placements also affect child care workers adversely, seeming to exacerbate the strains that exist in the professional lives of caseworkers (Barrett & McKelvy, 1980; Bryant, 1981). These professionals usually carry large caseloads and are under constant pressure to locate new homes (Horner, 1981). A failed placement may deprive the worker of a home, while creating an immediate need for replacement of a child, sometimes on the spur of the moment. Such situations keep caseworkers constantly "putting out brushfires" and prevent even distribution of their time among the foster parents on their caseloads. Because of this, the child care worker appears to respond to foster parents only in times of crises, that is, when a change in placement is needed or in reaction to a complaint needing investigation, with little time left to provide support and reassurance to foster parents who seem to be doing well. By inadvertently neglecting foster parents who are not in crisis, the child care worker runs the risk of being perceived as uncaring and unsupportive of these parents' efforts to tackle a difficult, frustrating and seldom rewarding task. Aldridge et al., (1974) report that parents become demoralized, worry about not doing a good job or feel that they are being used. In apparent agreement, Stone & Stone (1983) found that the degree of contact, rapport building and energy expended by placement staff were

strongly associated with placement success. The opposite is often true, however, when parents question the agency's support. It has frequently been noted that a foster parent's request for the removal of a child is motivated less by that child's behavior than by a perceived lack of support from placement agency personnel (Kline & Overstreet, 1972).

Another area likely to feel reverberations from the unsuccessful placement of a foster child is the foster family. The introduction of a new child into a family is bound to be associated with some disruption of that family's equilibrium, which brings about changes in the family's usual patterns of relating. As Wilkes (1974) points out, the addition of one foster child to a family of three increases the possible subgroups within that family from 4 to 11. With increased possible relationships, foster family members have less time to be with each other. Wilkes explains, "each family member now has a number of groups within the home in which he may be included or from which he may be excluded, and he must work out his position with each group " (p. 374). Thus changes in family composition, resulting from frequent placements and premature terminations, may create a sense of family disorganization and confusion among family members. Moreover, the relatively large amount of time that foster parents may spend working with problematic children may engender

resentful feelings in spouses and natural children, contributing to conflictual family environments. This situation is threatening to the biological members of the family and puts the foster community at risk.

The effects of failed placements on foster parents, while perhaps less severe than on foster children, are far from being innocuous. Mash & Johnston (1983) found that parents of hyperactive children, when compared with those of normal children, perceive themselves as less competent and derive less pleasure from the parenting role. Mothers of hyperactive children were found to be significantly more likely to experience depression, social isolation, self blame, role constriction and detachment from their children than mothers of normal children. Moreover, significantly higher levels of stress were associatd with parent-child interactions for mothers of hyperactive children than for those of normal children. Observations of the functioning of foster parents, although lacking empirical substantiation, would appear to agree with Mash and Johnston's findings. Jocobs (1980) notes a pervasive sense of powerlessness and isolation among foster parents and Stone & Stone (1983) suggest that failed placements contribute to burnout in foster parents. Moreover, the caution and reluctance to accept new children that characterize foster parents who have experienced a failed placement (Horejsi, 1979) suggest that such parents may

experience some degree of role constriction. McCoy and Donahue (1961) noted that foster mothers tended to blame themselves for placement failures.

Interventions

In light of the previous discussion, various aspects of the foster care system could be targeted for intervention. At the point of placement, child care agencies can make efforts to reduce the discrepancies between parents' strengths and foster children's problems. A great number of investigations have been undertaken to identify correlates of successful foster parents, families, and homes in attempts to provide empirical information to be used in developing successful parent-child matches (Cautley, 1980; Cautley & Aldridge, 1975; Fanshel, 1966; Levant & Geer, 1981). While reported results are informative, they seem to have had very little impact on the foster care field. The ability of child care workers to match foster parents and foster children, based on research-derived information or in any sensible manner, is seriously undermined by the limited availability of foster homes and the increasingly large numbers of children in need of foster home placements (Horner, 1981; Taylor & Star, 1967). Horner (1981) observes that "many foster care programs are hard pressed simply to find sufficient numbers of placements for the children thought to need such help, and are rarely able to be as

selective as the literature would suggest " (p. 42). Potential parents that child care agencies may turn down when there is a sufficient supply of homes may be hurriedly recruited in times of need (Fanshel, 1970; Horner, 1981). In short, child-parent matching is not very practical unless or until the demand for foster family homes decreases.

An alternative approach would be for child care workers to develop and maintain regular contact with the parents affiliated with their agency, regardless of how the placement is unfolding. This would provide foster parents with needed support and alter perceptions of the agency staff as preoccupied mainly with foster parents' transgressions (Cautley, 1980). This solution would require that agencies employ more child care workers so as to decrease the ratio of foster families to workers and has two major weaknesses. First, there are few placement agencies capable of offering the degree of staff support needed on a consistent basis (Horner, 1981). Second, this approach could lead to increased dependence on agency staff and thus prevent the professionalization of foster parents. The greater the parents' dependence on agency staff, the more likely it is that parents will be treated as clients instead of coworkers.

The third intervention approach, which appears to be the most promising at this time, is to render foster parents more effective in handling foster children and in coping

with the effects of the job. Increasing parents' effectiveness is likely to decrease their dependence on agency workers, thereby freeing workers to distribute their time more evenly and consistently among families in their caseloads. Furthermore, more effective parenting is likely to facilitate the adjustment of the foster child in ways that do not overly tax the resources of other family members. It is also likely to reduce conflictual relationships in the home environment. In short, training appears to be the best strategy to bring about placement stability, increase parents' sense of parenting competency and reduce dependence on agency workers. Moreover, it has been argued that it is the least expensive way to prevent parent dropout and failed placements (Boyd & Remy, 1978). Given these potential advantages, it is not surprising that an increasing interest in the development and evaluation of foster parent training programs has been noted.

The need for foster parent training that has long been recognized by parents and foster family care professionals (Boyd & Remy, 1978; Goldstein, 1967) has generated a number of training programs, emanating from different theoretical perspectives. Some of these have been empirically evaluated (Brown, 1980; Cobb et al., 1982; Guerney, 1976; Levant et al., 1981).

Cobb and his colleagues (1982) trained parents in communication, conflict resolution and behavior management

skills. Levant and his colleagues emphasized human relations skills, while Guerney's training concentrated on effective commnication and parenting skills geared toward children under 12 years of age. A fourth training program helped foster parents develop greater awareness of the difficulties of foster children and increased understanding of foster family care (Ryan, 1979).

Evaluative studies of the above training programs have produced results that are encouraging but far from conclusive. The results suggest that foster parents are able to acquire the skills taught in training (Cobb et al., 1982) and that training is related to positive attitudes toward children (Brown, 1980; Guerney, 1976). Training does not, however, appear to be associated with changes in children's behavior or to affect placement stability (Levant et al., 1981). Only one study reported training to have a positive effect on stability of placement and children's behaviors (Boyd & Remy, 1978), but even those findings must be interpreted with caution as the experimental and control groups were constructed two years after training had occurred. Training consisted of a behaviorally-based parenting skills program.

It is of interest that none of the evaluative studies assesses the effectiveness of training in reducing foster parents' dependence on placement agency staff. While the failure of agency staff to respond promptly to foster

parents' needs apparently influences parents' decisions to retain the children placed in their care, little attention has been paid to this variable. Clearly, there is a need for prospective evaluations of foster parent training programs which include number of contacts between foster parent and agency staff as an outcome variable, as this would provide an indication of the effects of training on foster parents' abilities to function with relatively high degree of independence following training.

Recent developments in the field of parent training (Wolfe et al., 1981) and stress innoculation theory (Meichenbaum, 1977) suggest that the inclusion of a self-management component in foster parent training programs is likely to enhance foster parents' effectiveness. Meichembaum and his colleagues (1982) have reviewed results of laboratory studies which suggest that many individuals fail to respond appropriately in stressful situations, not because of a lack of appropriate skills, but because of a failure to use those skills due to the interference of non task-oriented cognitions. Thus, it appears that providing foster parents with parenting skills is only part of the solution. Since foster parents working with emotionally and behaviorally disturbed children operate under stressful conditions (Gillham, 1983), it appears that training which combines parenting and self-management holds greater promise than that which stresses only parenting skills. It was

thought that such training would allow foster parents to become aware of the cognitions that mediate their responses to problem behaviors and provide them with an opportunity to alter these in favor of more task-oriented responses. In addition, training would equip foster parents with coping skills that could be used to reduce emotional arousal. Parents who receive such training, as compared to parents who do not, can be expected to make more effective use of learned skills in crisis situations and to show greater tolerance for behaviorally and emotionally disturbed children.

In summary, it appears that foster parents are not adequately prepared to respond to the needs of behaviorally and emotionally disturbed children. This situation results in placement failures, which further strain the resources of foster family care. The effects of replacements or failed placements prevade all aspects of foster family care. Foster children, foster parents and placement workers are adversely affected. Failed placements drain the field of experienced parents, a much needed but limited resource, and compound the problems of finding and training an adequate supply of foster parents to provide children with stable care. Foster parents become dependent on agency staff for guidance, support and reassurance while the latter are constantly responding to perpetual crises which hinder their

ability to respond to the on-going needs of foster parents not experiencing crises.

It appears that foster parent training constitutes the best form of intervention to address the problem of placement stability and its consequences. While a number of training programs have been developed, there is a need for continuing program development, particularly since existing training programs have not been found effective in reducing placement breakdown in carefully designed evaluative studies (Slattery, 1980; Slobodian, 1980). There is also a need to evaluate training programs with respect to more tangible outcome measures. More important, however, is the possibility that current training curricula may be inadequate in preparing foster parents to work with problem behavior. Recent developments in the treatment of abusive parents through training and in the field of stress innoculation indicate that self-management techniques may hold some promise of efficiency for future foster parent training programs, as foster parents are known to be exposed to psychologically and physically threatening situations that may stimulate cognitions that are likely to interfere with their ability to use acquired skills in times of stress.

Purpose

The major purpose of this study has been to determine the differential effectiveness of two behaviorally-based foster parent training programs on measures of (1) perceptions of family environment, (2) foster parents' sense of parenting efficacy, (3) placement stability, and (4) dependence on agency staff. Several investigators have indicated that foster parents have expressed a need for training in managing foster children's behaviors (Cautley, 1980; Hampson & Tavormina, 1980). Both parenting training and parenting plus self-management training programs have been found useful in helping parents handle behavior problems (Karoly & Rosenthal, 1977; Wolfe et al, 1981). Of the two programs, one provides both parenting and self-management skills, while the other provides parenting skills only.

Another reason for this particular investigation was that while both of these types of training have been found effective, there have not been any comparative investigations of their differential effectiveness. The need to provide the field of foster family care with empirically tested and efficacious training programs provided another reason fo this comparative study.

The fourth and last purpose of this project was to provide foster parents with training in behavior-based

parenting techniques that have been found helpful with other parent groups (Karoly &Rosenthal, 1977; Whaler et al., 1973, Wolfe et al., 1981). Moreover, although the need for universal training of foster parents has long been recognized (Goldsteinn, 1967; Vassaly, 1976), many foster parents continue to receive little or no training at all or receive training of dubious quality.

Statement of the Problem and Research Questions

This study was conducted in an effort to evaluate the differential effectiveness of two 16-hour foster parent training programs. The models compared in the study consisted of:

(1) Parenting and self-management skills training

(2) Parenting training only.

Four research questions based on the previous discussion were formulated to guide the inquiry.

1. Does training in parenting and self-management skills, as compared to training in parenting skills, lead to improved family environment as perceived by foster parents?

2. Does training in parenting and self-management skills, as compared to training in parenting skills only, lead to an increased sense of parenting efficacy in foster parents?

3. Does training in parenting and self-management skills, as compared to training in parenting skills only, lead to fewer placement breakdowns?

4. Does training in parenting and self-management skills, as compared to training in parenting skills only, lead to fewer contacts with agency staff?

Hypotheses

Based on the research questions, ten experimental hypotheses were formulated.

The following hypotheses were related to Question #1.

H1:1 Foster parents trained in parenting and self-management skills will score significantly higher on the Cohesion scale of the Family Environment Scale than those trained in parenting skills only.

H1:2 Foster parents trained in parenting and self-management skills will score significantly lower on the conflict scale of the Family Environment Scale than those trained in parenting skills only.

H1:3 Foster parents trained in parenting and self-management skills will score significantly higher on the control scale of the Family Environment Scale than those trained in parenting skills only.

The second hypothesis is related to Question #2.

H2:1 Participants trained in parenting and self-management skills will score significantly higher on the Foster Parent Parenting Efficacy Scale than parents given parenting training only.

Hypotheses related to Question #3 are:

H3:1 Participants trained in parenting and self-management skills will express significantly fewer requests for removal than those trained in parenting only.

H3:2 Participants trained in parenting and self-management skills will experience significantly fewer unrequested removals than those trained in parenting only.

H3:3 Participants trained in parenting and self-management skills will have significantly fewer children running away from their homes than those trained in parenting only.

Hypotheses related to Question #4 are:

H4:1 Participants trained in parenting and self-management skills will need significantly fewer home visits than those trained in parenting only.

H4:2 Participants trained in parenting and self-management skills will have significantly fewer office contacts than those trained in parenting only.

H4:3 Participants trained in parenting and self-management skills will have significantly fewer problem-related telephone contacts than those trained in parenting only.

Definitions of Terms

The following terms are defined in the context in which they were used in this study.

Foster parent.--a person who is licensed by the state to provide foster care services.

Request for removal.--a verbal or written communication from foster parent asking for the removal of a foster child.

Home contact.--any documented visit to foster parent home.

Office contact.--any documented office visit by a foster parent.

Phone contact.--any documented telephone contact with foster parents, for purposes of resolving a problem

situation, monitoring treatment progress or establishing rapport with foster parent.

Unrequested removal.--the removal of a child from a foster home prior to the contracted termination date, due to violations of foster care rules or to foster parents' inability to function as parents.

Incidence of child running away.--the number of times a foster child has failed to return to his foster home within a 24-hour period.

Cohesion.--the degree of commitment, help, and support family members provide for one another (Moos & Moos, 1981).

Conflict.--the amount of openly expressed anger, aggression, and conflict among family members (Moos & Moos, 1981).

Control.--the extent to which set rules and procedures are used to order family life (Moos & Moos, 1981).

Theoretical Foundations

This research study derived its conceptual framework from family systems, social learning and cognitive behavior theories. The assumptions underlying each theoretical perspective will be briefly reviewed in light of their implications for this investigation.

In the view of systems theory (Miller, 1965; Skynner, 1976), the family is made up of interdependent subsystems that constitute individual family members in the many combinations that they can form. Some subsystems derive

their identity from biological characteristics like gender, mother or children, while others appear to be subsystems as a result of their functions and the role they play in the family system. Thus, the adults in one family, that is the husband and wife, can be thought of as belonging to the spousal, parent and provider subsystems.

Since the subsystems are interdependent, changes in one affect all of the others, and thus the family as a whole. Each subsystem has its needs, which compete with and complement those of the other subsystems. This competition is resolved by the development of patterns of behaviors within each family, which function to regulate interactions between subsystems so as to protect the viability of the family. Thus, each family has its rules for meeting the needs of its members. Everyone knows what is permitted, how far to go and what he or she is likely to get (Minuchin, 1981). These rules evolve as a family expands through the inclusion of new members and/or the adoption of new functions by existing family members. For example, a child whose family expands through the birth of another child becomes part of the older brother or sister subsystem, while also a member of the sibling subsystem. The child, by virtue of his family's enlargement, acquires new responsibilities and new privileges, which contribute to the need for adjustment in existing patterns. By responding to such events successfully, a family continues to provide its

members with the sense of stability that is needed for security, yet remain flexible enough to allow for individual growth (Minuchin, 1981).

This suggests that the family as a system is not static, that it is able to respond with some degree of flexibility to the growth of its members or other change-inducing events. The family, however, can afford to be flexible only within some preset range, apparently determined by the nature of its structure, or the established patterns of the relationships among its subsystems. Each family has a limit but that limit differs for individual families. This threshold appears to function as a feedback mechanism that activates the hemostatic responses of the family system. In other words, the family has the ability to tolerate and grow from changes up to a point. If change threatens the system beyond its level of endurance and endangers its existence, however, the system is likely to reject change or develop other mechanisms to reestablish some sense of equilibrium among its relationships and thus preserve its structure. Subsystems that are not integrated with the family system are scapegoated or rejected (Skynner, 1976).

The responsibility for protecting the system, while it is diffused throughout the subsystems, rests primarily with the decider-subsystem (Skynner, 1976). This function tends to rest with the parental subsystem. According to systems

theory (Miller, 1965), this subsystem gathers information from other systems and its own subsystems, evaluates the information in light of the overall systems' interests, and if the need exists, it initiates corrective action to bring deviant subsystems' behavior in accordance with the interests of the whole system. Minuchin (1981), in describing the responsibilities and the rights of parents, states:

> The adult in the parental system have responsibility to care for, protect, and socialize the children, but they also have rights. The parents have the right to make decisions that are related to the survival of the total system, in such matters as relocation, selection of schools and the determination of rules that protect all family members. (p.18)

In light of the above discussion, the introduction of a child into a foster home necessitates changes in the existing patterns of relationships among the subsystems of the foster family. It would appear that the family, as a system, has the potential to adjust to the resulting changes and integrate the foster child within its existing subsystems to the extent that it is not pushed beyond its capacities for endurance or tolerance. Foster family care professionals have attempted to prevent such overloading of a family's structure by careful matching of children and families, but this has not worked effectively because of the relative scarcity of foster families with respect to demand.

Thus, many foster families receive children that severely tax their resources. Resulting placement breakdowns are perceived as a failure by the family and/or foster child to develop successful integration strategies that meet the needs of the incoming child and those of the family members. Moreover, it is contended that such breakdowns reflect the family system's attempt to restore its equilibrium by getting rid of a divisive element.

The role of the parental subsystem makes it the logical choice for intervention efforts aimed at the amelioration of conflictual family climate. This is all the more important in view of the contention that parents' perception of the family climate has motivational potential (VanDerVeen, 1965). Increasing recognition of the influence of cognitive processes on behaviors underscores this point (Bandura, 1981). Moreover, findings from several studies indicate that parents' perception of problem behaviors do not agree with those of trained observers (Karoly & Rosenthal, 1978; Arnold et al., 1975). This suggests that parents may be responding to much more than observable behaviors, that the meaning attributed to a problem behavior is affected by factors other than the actual behavior.

The parental subsystem optimally reflects the interests of the family as a whole in its decisions. Its purpose is to serve, as well as to guide the other subsystems. Thus, a foster parent may request the removal of a foster child with

whom he or she is able to work, because other family members are so distraught over the child's behavior that the parent feels that removing the child will be best for the family. Parental perceptions function as a mediating variable that has the potential to influence foster parent behavior. Findings suggesting that foster parents' perceptions of family climate are positively related to placement stability appear to lend credence to this contention (Levant & Geer, 1981).

Since the foster parenting experience is likely to produce some disturbance in family equilibrium (Wilkes, 1974) it is likely that foster families experience changes in perceived cohesion, conflict and control within the family. Researchers have found that distressed families experience less cohesion and more conflict (Scoresby and Christensen, 1976).

Social Learning Theory

The view of the family as an interactive system is also shared by proponents of social learning theory who postulate a reciprocal influence in parent-child interaction. Because parents' behaviors toward their children can be rewarded, reinforced, punished or extinguished, it is thought that children teach their parents just as parents teach their children. Patterson et al.(1975), found that interaction patterns in families with aggressive children to be aversive

for both parents and children and to increase in aversiveness over time.

Since behaviors usually occur within a social context, their reinforcement depends to a large measure on the behaviors of others in that context. This implies that helping foster parents become aware of how they unwittingly contribute to the acquisition and maintenance of socially maladaptive behaviors will lead to the adoption of more adaptive behaviors by both parents and children. Behaviorally-oriented parent training has been found successful in the elimination of undesirable behaviors and in producing positive changes in family functioning (Arnold et al., 1975; Karoly & Rosenthal, 1977).

Cognitive Behavioral Approach

While training foster parents in behavioral principles is likely to be influential in improving family environment, reducing placement breakdowns and other placement related events, there is reason to believe that parenting training alone may not be sufficient. Recent developments in the cognitive behavioral approach have highlighted the impact of cognitive variables on behavior. Bandura (1982), in discussing the significance of cognitive processes, notes that "knowledge, transformational operations and component skills are necessary but insufficient for accomplished performances" and that "people often do not behave

optimally, even though they know what to do " (p 122). This, he explains is because self-referent thoughts mediate the relationship between knowledge and action. It is assumed that psychological interventions influence behaviors through their effect on self perceptions of efficacy (Bandura, 1977). Other investigators have reported findings suggesting that self perceptions of personal efficacy are more accurate predictors of performance than past behaviors (Lee, 1982) and are more reliable predictors of performance across treatment modes (Bandura et al., 1977; Brown & Inouye, 1978; Schunck, 1981).

Viewed from this perspective, this investigation attempted to influence self perceptions of efficacy and thus the behavior of foster parents through two modes of treatment. One mode utilized parenting training alone, the other combined parenting training with training in self-management skills.

Meinchembaum (1982) indicates that effective responding requires "attention to the needed skills and to the factors that contribute to the facilitation or inhibition of these skills " (p.293). It has been hypothesized that a person's response to a given situation is influenced more by his perception of that situation then by the intrinsic characteristics of the situation (Bandura, 1982; Meichenbaum, 1977, 1982). This perception is thought to have the potential to trigger emotional and physiological

reactions, which can adversely affect performance, regardless of ability. Thus, it was reasoned that a skills training curriculum which combined parenting and self-management, would facilitate the application of learned child management principles in crisis situations.

Overview

Chapter Two will present a review of the historical development of foster care and a discussion of the literature related to this investigation. The research design and procedures will be described in Chapter Three. Chapter Four will present the results of the statistical analysis of the data. Lastly, a discussion of the results and implications for future research will be presented in Chapter Five.

CHAPTER TWO

REVIEW OF THE LITERATURE

This chapter provides an overview of the historical development of foster family care and a discussion of evaluative studies of foster parent training curricula. It includes a review of literature pertinent to this research investigation.

Historical Overview

Foster family care has existed in various forms throughout recorded history (Kadushin, 1974). Each generation appears to have dealt with the task of providing for parentally-absent children in accordance with its needs and understanding of what constitutes the best long term interest of society. It is not suprising that practices that are deemed salutary by one generation become questionable and may even be considered injurious by later generations.

For most of modern times until the latter part of the nineteenth century, the survival of children with special needs depended to a great extent on their ability to provide labor in exchange for food and shelter. Indenture, as a form of substitute care sanctioned by Elizabethan laws, was

widely practiced in the nineteenth century and began to decline only in the latter part of the century as manufacturing shifted from homes to industrial sites (Kadushin, 1974).

Declining interest in indenture coincided with an increase in the number of children in need of parental supervision in the industrialized cities of the eastern United States. This situation was dealt with by referring such children to adult institutions. Bryant (1981) indicated that "homeless and neglected children commonly were assigned the mixed almshouse and workhouse for the poor, or to adult prisons if their behavior was considered delinquent " (p.10).

Dissatisfaction with indenture and mixing children with adults in institutions provided an impetus for the forerunner to foster family care. The New York Children's Aid Society, under the leadership of Charles Loring Brace, in 1853 undertook to place homeless and poor children from New York with families interested in providing loving care in return for child labor. Children were placed with families living in New York and in the midwestern states (Langsam, 1967). The "placing-out" program, as it was called, represented only a slight improvement on the practice of indenture. Poor parents who could not provide for their children had to give up legal custody permanently so their children could be placed (Kadushin, 1974). There

was little information on the capacity of individuals wanting a child to provide surrogate parenting, other than their willngness to accept a child and no adequate supervision followed the placement of a child. Bryant (1981) aptly summarizes the general operating procedures of the "placing-out" and other family care programs of that period.

> Children were selected for placement almost exclusively on the basis of the poverty of their backgrounds, even when their natural families were intact. Prospective homes were not investigated, or, for that matter even identified for the individal child until the day and hour of placement. Once in the home, the child was left to the good graces otherwise of his new family. (p.10)

The shortcomings of this form of foster care, which neglected the individual needs of children, provided the impetus for the professionalization of foster family care. The Boston Children Aid's Society, under the leadership of Charles Birtwell, introduced a more comprehensive, child-oriented approach that was to become the foundation for the modern foster family care system (Wolins, 1963). In contrast the Brace's approach, Birtwell's emphasized the individual needs of each child. "The society advocated for children by emphasizing the need for investigation and careful selection of prospective foster homes, continuing placement supervision, thorough recordkeeping and periodic

review of cases " (Bryant, 1981, p. 11). Foster care was seen as only a temporary solution and children placed out of their homes were to be returned to their parents once the parents became able to provide for them. Birtwell's approach preserved the family ties after placement that Brace's approach terminated.

With the increased professionalization of foster family care, came a change in the role of the foster parents. In 1866, Massachusetts began "paying board money to foster families for the maintenance of children who might otherwise have been placed in institutions and who were too young to be profitably indentured " (Kadushin, 1974, p. 399). By paying foster parents to care for children, placement agencies acquired a wider selection of homes, greater stability of homes and experienced fewer problems in supervising foster homes (Kadushin, 1974). More important, it eliminated the need for foster children to exchange their labor for food and shelter. Foster parents became temporary custodial caretakeres instead of employers.

From the early years of this century until the late 1950s, foster family care was considered the preferred form of substitute care for parentally-deprived children. Prior to the Second World War, such care was generally reserved for children who were free of physical disabilities, emotional disturbances or behavioral problems. Since foster children tended to be relatively free of problems, foster

parents were not provided with any special training. What was thought to be important was the accurate matching of foster parent and foster child. Training, when it did occur, took the form of advice and suggestions on how to handle specific placement-related problems. By and large, foster parents functioned on their own and were relatively independent of placement agencies because the limited resources of the latter did not allow placement personnel to make frequent visits to foster homes. McCoy and Donahue (1961) aptly describe the position of the placing agencies of that period.

> We are convinced that our foster homes are the most valuable resource for the care of our children. But, like most placing agencies, particularly public agencies with a large number of children in placement, we have long been aware that we have foster parents of vastly different capacities, who vary widely in knowledge and understanding of the problems children have and in methods of handling them. Also, like many other agencies across the country, we are sometimes faced with a lack of staff which makes it impossible to reach all of the foster homes as often as we would like. (p.29)

Foster parents responded to the task in light of their own perceptions of children's needs and their own experience with children.

While this strategy may have been adequate for relatively well-adjusted children, it clearly became inadequate when the traditional clientele of foster family care began to change. Due to a combination of factors, one

of which was greater understanding and appreciation of the importance of family relationships for personality development (Bryant, 1981), child care professionals, who were predominantly trained in the psycholanalytic approach, began to place maladjusted children in foster family care at about the time of World War Two (Bryant, 1981), without expanding the capacity of the system or improving its services. Child welfare professionals were asking foster family parents to undertake a task for which they were ill prepared.

Results of empirical investigation of the effects of foster care clearly reflected the system's inadequacy in responding to the needs of foster children and families. Maas and Engler (1959) conducted an investigation of 4,281 children's case records in nine communities in an attempt to identify conditions which kept children in foster care and precluded adoptions. Their findings suggested that children were being maintained in permanent impermanence upon entering the system. Children were found to experience two to three placements and to spend two to five years in care. The findings of a study comparing 140 foster children referred for psychiatric evaluation to 440 foster children who had not been referred for such evaluation suggested that length of placement was related to referral for psychiatric evaluation and multiple placements (Eisenberg, 1962). The longer the time spent in placement, the greater was the

likelihood of replacement. Replacement was also found to be related to behavioral problems. Children with behavior problems tended to be moved more often than those who did not display such difficulties. The results of these two studies, which were replicated by other investigators, indicate that foster parents were experiencing difficulties in discharging their roles. Thomas (1961) noted that "foster parents have not expected or been prepared to deal with children showing such a magnitude of problems." (p. 218)

Empirical support of foster parents' inadequate preparation to handle behaviorally disordered children, was provided by a study undertaken by Ambinder and his colleagues (1965). Fifty foster parents caring for delinquent boys ranging in age from eight to twelve years of age were asked to describe incidents they experienced and how they responded to them. Seventy-three percent of the techniques used by the parents were those considered unlikely to enhance personal control or to encourage development. Furthermore, it was felt that some might even be harmful. Sixteen percent were judged likely to facilitate control and eleven percent were thought to be neither farmful nor helpful.

Professionals in the field responded to this situation with three remedies. One approach attempted to provide empirical evidence which could be used in the selection of

prospective foster parents. Investigators tried to identify demographic, attitudinal and personality correlates of successful foster parents and families. It has been reported that families that are willing to participate in new experiences, have the ability to find adapting to new and different situations enjoyable, and allow family members to be independent are positively associated with stable and enduring placements (Levant and Geer, 1981). These researchers also found that prior experience with natural children of comparable age to the foster child, prior foster care placements and fewer contacts with social workers, were related to placement stability (Levant & Geer, 1981). Cautley and Aldrige (1975) reported that high religiousness and the presence of one or more school-aged children in the home were negatively associated with successful placements. Positive placement outcomes were found to be associated with familiarity with child care and ability to cope with problematic behaviors (Cautley and Aldrige, 1975). Babcock (1963) found that foster parents who enjoyed caring for preschool aged children tended to come from large families, had limited education, married early and led stable, non-eventful lives. He described them as stable and healthy but somewhat rigid in their approach. Fanshel (1961) indicated that foster parents who appear to enjoy caring for behaviorally disordered children, obtained high ratings from caseworkers for emotional maturity, democratic family

relationships and identification with the role of the foster parent. Those foster parents who cared for non-aggressive physically disabled, mentally retarded and emotionally disturbed children tended to prefer younger children. These parents were found to obtain lower ratings for maturity and democratic family relationships than those who cared for aggressive youngsters. Both groups of parents identified with the foster parent role and had had a good deal of experience with their own children.

The second approach consisted of providing more specialized services to foster children with physical disabilities, behavioral problems and emotional disturbances, which led to the development of a specialty within foster family care known as specialized foster care (Gillham, 1983). Although it was first introduced in the 1950s, the concept of specialized foster care received its main thrust during the 1970s. Gillham (1983) indicated that depressed economic situations and questionable treatment outcomes provided the impetus for community-based treatment alternatives. The relatively high cost of maintaining children in institutions and the undesirable effects of institutionalization in furthering maladaptive behaviors fueled the deinstitutionalization movement of the 1960s (Bryant, 1981; Gillham, 1983). Other factors which generated that movement included a reappraisal of the importance of family life and greater appreciation and

understanding of how behaviors are generalized from one situation to another. If the goal of the habilitation and rehabilitation of delinquent and disturbed children was their eventual return to the community with the ability to function adaptively, it was felt they needed to undergo treatment in a minimally restrictive environment where they could acquire the skills that facilitate adaptive functioning (Bryant, 1981; Gillham, 1983). To keep such children in institutions was considered tantamount to condemning them to perpetual institutionalization, as institutions have their own demands, behavior codes and dynamics which are of questionable value to independent and adaptive adjustment in the real world. More important, however, is the issue of the transfer of adaptive behaviors from the artificial and restricted setting of the institution to the larger community. Keeping children in institutions deprives them of the opportunity to acquire skills needed for community living. Gillham (1983) points out "the recognition that most children will eventually return to a home situation and that the home provides training for future parenting skills provided further justification for the development of community based foster care programs " (p. 1). The significance of modeling for behavioral acquisition lends credence to the importance of treating disturbed children in the community (Bandura, 1977).

The introduction of formerly institutionalized children into foster family care meant that added specialized services were needed to enable foster parents and agency personnel to address the treatment needs of the children and the parenting needs of the parents. Efforts have been made to reduce the ratio of children to workers, thereby allowing workers to spend more time per child. Many such foster children also receive therapy on an ongoing basis as an integral part of their placement (Bryant, 1981).

The severity of the disturbances presented by previously institutionalized children has contributed to a reconceptualization of the foster parent role (Bauer & Heinke, 1976). Foster parents are no longer simply custodial caregivers. An increasing number of child care professionals are calling for foster parents' integration into the treatment team as co-professionals with agency workers (Bauer & Heinke, 1976; Larson et al., 1978; Murray, 1982). Larson et al (1978) describe a specialized foster care program for severely disturbed children aged 8 to 16, in which parents function as parent-counselors. Alberta parent counselors have combined aspects of institutional treatment and regular foster care in a goal-directed treatment program that is thought to have the advantages of a residential treatment center while children reside in regular foster homes. Foster parents play a crucial role in the development and implementation of the treatment program.

Prior to receiving any children, the parent-counselors receive 35 to 40 hours of training in such areas as communication skills, behavior management, work with natural families, theories of personality development, sexuality and legal departmental policy. After training and the placement of foster children, these parent-counselors meet as a group for support and supervision. As in regular foster care, parent-counselors receive a daily allowance for each child, plus payment for other expenses such as clothing, school supplies and training costs.

While other specialized foster care programs do not appear to give foster parents the same degree of responsibility as the Alberta Parent-Counselors Program, they all stress the need for training and recognition of foster parents as a crucial element of the treatment team. Freeman (1978) indicated that foster parents involved in a special foster care program for mentally retarded children, in Pittsburg, were paid salary and considered regular staff. Foster parents in the program received in-service training and enjoyed the frequent contacts with agency staff. Another program that addressed the needs of emotionally disturbed, behaviorally disordered and mildly retarded chidlren aged 3 to 18, provided foster parents with ten hours of formal didactic training that emphasized orientation to the agency's program, nature of the foster parent role, and child behavior management. In addition to

the pre-service training, foster parents receive on-the-job training through frequent contacts with service program managers. Trained foster parents receive payment in addition to the regular room and board payment in recognition of their level of skill and competence (Bryant, 1981).

While specialized foster care has emphasized increased supportive services to both foster children and foster parents, a third approach has emphasized increased supportive services to foster parents only. In recognition of the need to integrate foster parents into the treatment team, Thomas (1961) acknowledged that changes in the types of children entering foster care implied changes in the role of foster parents. She recognized that foster parents needed to do more than provide food, shelter and love and argued they needed to be "part of a child-care team of experts, helping children who are emotionally upset and who face more than the usual problems in reaching adulthood " (Thomas, 1961, p.218). In order to provide foster parents with the needed skills, group training was introduced to supplement (but not replace) the consultative contacts that occurred between foster parents and agency workers (McCoy & Donahue, 1961; Soffen, 1962; Thomas,1961). These training groups provided exposure to a variety of topics related to the foster care field and foster care parenting. Taylor and Starr (1967), in summarizing the benefits of group training,

indicated that such training was thought to contribute to a decreased sense of social isolation, increased ability to discuss feelings and problems with the caseworker, improved role classification between foster parents and social workers with respect to the child's life, increased recognition of foster parent as colleagues instead of clients, greater identification with agency goals, greater opportunity to gather additional diagnostic information, regarding foster children, and improved ability to determine professional and policy problems (p. 371).

Soffen (1962) evaluated the effectiveness of a 32-week group training program in which the curriculum depended on the contributions of the participants but covered such areas as the problems children present and how to handle them, relationships with natural parents, agency policies and the role of the caseworker. The training sought to give parents problem-solving skills, through emphasizing the purposive nature of behavior and testing approaches to respond to problem behaviors. The 20 foster parents who completed the program were compared to 54 foster parents who had not had the program. Experimental and control groups were compared with respect to (1) relationship with casework and agency, (2) understanding growth needs of children and skills in dealing with these needs, (3) understanding meaning of behavior and skill of dealing with these, (4) motivation for becoming foster parents, (5) psychologaical and emotional

climate in the family, (6) understanding the importance of natural parents to foster children and ability to respond appropriately to natural parents. Using caseworker ratings as a measure, Soffen found that the experimental group scored significantly higher than the control gorup on five of the six dependent measures. No significant differences were obtained in ratings of family climate. Flaws in the design of this study, including selection of the subjects, suggest caution in interpreting its results. Foster parents in the experimental group may not have been comparable to those in the control group.

While foster parent group training continues to be offered by agencies, there has been a trend toward better focused, single topic, skills-oriented training. Many of these training programs were developed in universities and combined didactic instructions with group learning (Stove & Hunzeker, 1978).

Evaluative studies of several types of training programs will be reviewed in the succeeding pages. Studies are categorized by their designs, so that group case studies will be discussed first, followed by those with correlational, quazi-experimental and experimental designs.

Group Case Studies

Penn (1978) evaluated the effectiveness of an 11-week, behaviorally-oriented foster parent training program.

Subjects consisted of seven foster parents who were selected for their learning potential. Experience as foster parents varied from none to six years. Completed Child Behavior Inventories on 15 children of these parents indicated that 131 specific behaviors improved and 27 deteriorated during the duration of the training. Improvements and deterioriation were noted for both natural and foster children. The eight natural children who were observed improved on an average 4.8 behaviors and deteriorated on 1.25 behaviors. An average 13 instances of positive and 2.5 cases of negative change were reported for the seven foster children in the study. As there was no comparison group, the results of this study are, to a large extent, uninterpretable.

Similarly, Lloyd, using a one-group design, attempted to evaluate the effects on foster parents of parenting delinquents. A group of six families, that were judged to have a "conductive home environment," were selected from 18 volunteers. Selected parents attended one week of intensive training on working with delinquents, met weekly for group counseling and participated in weekly family therapy sessions. Therapeutic activities employed an interpersonal approach. Comparison of pre- and posttest scores, six months after training revealed that male foster parents experienced growth in the areas of self worth and reliance as compared to foster mothers. As in the previous case, the

lack of a control group suggests caution with respect to these results. Moreover, the extensive amount of supportive services provided to the foster families render this particular program so atypical that it is unlikely it could be carried on a large scale for any extended period of time.

Correlational Evaluations

Relationships between foster parent training and (1) placement disposition, (2) length of placement, (3) foster parent rating of placement success, and (4) licence retention, were examined by Boyd & Remy (1978), who examined 267 placements in four groups, two years after an intensive 16-week behaviorally-oriented foster parent training program. The groups consisted of (1) parents who received training prior to their first placements and who kept their children for two years or less, (2) those who did not receive training and kept their children for less than two years, (3) those who received training after they had their placements and retained their foster children for more than two years, and (4) those who did not receive training and retained their foster children for two years or more.

Recognizing the weaknesses inherent in the design of their study, Boyd & Remy (1978) assessed the comparability of their groups with respect to foster parents' experience, environmental stress, and children's characteristics. The two groups which had received training prior to placement

did not differ on environmental stress, number of prior placements and behaviors of foster children. They differ, however, with respect to experience, foster children's sex and age at placement. These two groups consisted of 55 trained and 113 untrained parents and were considered the primary sample. Multiple regression analyses were used in order to determine the effects of training, experience, environmental stress and foster children's characteristics on the dependent measures. The results revealed that training was a significant predictor of placement disposition, placement success rating and license retention.

Analyses of the data pertaining to foster parents who received training after obtaining their placements indicated that trained parents worked with more difficult children. Training was a significant predictor of licensing retention and placement disposition but the relationship was not as strong as those obtained with the primary sample.

While the authors of this study have done a fairly good job in attempting to assess the equivalence of the two groups of trained and untrained parents, selection bias precludes clear interpretation of the results. It can be argued, as the researchers themselves noted, that the results may have been due to personal differences between the two groups or to a combination of training and personal attributes. This is especially probable since the foster parents volunteer for the training. Moreover, a large

percentage of the trained parents participated in other training or educational activities after the behavioral training ended.

Since many foster parents participated in more than one type of training over the two-year span, the results cannot be attributed solely to the original behaviorally-oriented program. The results, rather, point to the efficiency of training in general and are perhaps more generalizable to foster parents who have attended more than one training activity. Boyd and Remy (1978) report that most of the trained, as compared to a few of the untrained, parents participated in three or more activities offered through the Foster Parent Association. In spite of its limitations, this study represents an effort to evaluate training with respect to outcome measures that are relevant and important to the field of foster family care.

Quasi-Experimental Studies

Cobb et al., (1982) compared 30 foster parents who received training in communication and conflict resolution skills to 18 matched "no contact" controls. They found that trained parents differed significantly on measures assessing communication and problem solving skills from control group parents. Assessment measures consisted of audio tape recorded responses to stimulus situations.

Another group of investigators (Levant & Geer, 1981; Levant, Slattery & Slobodian, 1981) conceived of the foster parent's role as that of a paraprofessional mental health counselor. In accordance with this premise, they selected a group of foster parents who displayed relatively high levels of empathy, genuiness and capacity to be nonjudgemental. Of the chosen parents, 9 were assigned to the training condition and 6 to a "no contact" group based on subjects' time availability. The experimental group received training in helping and communication-oriented parenting skills. No significant differences were found between the two groups with respect to foster child's self esteem, behavior adjustment and placement stability. The only significant result was related to emotionality and tension. The investigators suggest that this result may be spurious. No significant improvement in helping and parenting skills were obtained and it is thought (Levant, Slattery & Slobodian, 1981) that the findings were due to difficulties encountered by the subjects in their daily lives, which interferred with the instructional plan.

A few years earlier, Guerney (1976) reported that parents trained in the Foster Parent Skill Training Program, showed more favorable attitude of parental acceptance than matched controls on the Porter Parental Acceptance Scale. Similar results were obtained on Sensitivity to Children Questionnaire. The investigator relied on a sample of 132

subjects, 57 of whom constituted a "no contact" control group.

Experimental Studies

Brown (1980) compared two training programs with respect to their effectiveness in affecting parental attitudes sensitivity to children and problematic behaviors. One program, the Foster Parent Skill Training Program (FPSTP), developed by Guerney (1976) emphasized communication and methods of handling problematic behaviors. The other, Issues in Fostering (IF), was developed by Ryan (1977) and was concentrated on issues related to foster parenting. Using an initial sample of 76 volunteers, Brown randomly assigned subjects to one of five treatment groups and found there were no differences between the training groups and a "no contact" control group on parental attitudes measured by the Foster Parental Acceptance Scale, Foster Parent Attitude Survey and the Sensitivity to Children Scale. A difference, favoring the FPSTP, was observed with respect to sensitivity to children when compared to the IF program. These results, however, were obtained from a sample of only 59 subjects, decreased due to attrition, mainly of subjects assigned to the control condition.

In evaluating the study, Brown noted several flaws that may have affected the results. It was observed that

pretest scores of the control subjects were higher than those of any of the other groups. He reasons that, since control subjects did not receive any form of training or experimenter-derived reinforcement, the control subjects who returned the assessment instruments might have been those who were most highly motivated and verbally skilled. Moreover, it may be argued that those foster parents might have represented those who felt more competent in their roles as foster parents. As Brown suggested, the relatively high attrition of 50 percent of the control group could have adversely affected the initial randomization.

Another area of possible bias identified by Brown concerned the measuring instruments, which were time-consuming and required verbal ability and skill, which may have affected some subjects' ability to respond. Brown also explained that the "written responses may not translate into behavioral changes, and conversely these instruments may be insensitive to some behavioral changes that did occur as a result of training " (p. 106).

Corroboration of the results by Penn (1978), reported under "Group Case Studies," was provided by the findings of another comparative study of the differential effectiveness of two foster parent training modes done by Hampson and Tavormina (1980a). Behaviorally-based parent training was found to be more effective in improving interactional patterns between foster parents and children and in reducing

problem behaviors, as measured by observation and foster parent reports than reflective group counseling and a "no contact" control group. Additionally, behaviorally trained parents were found to view themselves as causal agents in changing foster children's behaviors and felt more satisfied with their role. Reflective training was found superior in improving parental attitudes.

These results carry greater significance than those reported by Penn (1978) and Boyd & Remy (1978). Of the 42 subjects who volunteered for training, 17 were randomly assigned to the behavioral training group and 16 to the reflective training condition. Nine foster parents who were unable to attend were placed in a waiting list control group. Subjects were members of lower socioeconomic classes.

In contrast to the investigations conducted by Penn (1978) and Boyd & Remy (1978), the results of this investigation were not confounded by the selection process. Foster parents' participation did not depend on their learning potential as in Penn's study. Thus, they were more likely to be representative of parents who volunteer for training. By comparing volunteers with volunteers, the validity of the results of this study was strengthened by eliminating selection as a plausible explanation. More important, however, this study constitutes an evaluation of behavioral versus other types of training for foster

parents, while Boyd & Remy's does not. Since the parents trained in their sample tended to participate in at least three educational activities, the investigation can be construed as an evaluation of the effectiveness of training versus no training.

Unlike Boyd & Remy (1978) who followed their subjects over a two year period, Hampson and Tavormina (1980a) did not include follow up measures in their design. Subjects were tested prior to and after training ended. Training lasted eight weeks.

Summary

Review of the evaluative studies of skills-focused parent training programs reveals several issues that need to be noted and addressed. First, it appears that evaluative investigations are becoming more rigorous in their designs. This is a positive trend in a field in which there is a burgeoning interest in training program development.

The second issue of concern is an apparent reluctance to evaluate training programs' effectiveness on placement-related outcomes. Most of the evaluative studies have focused on assessing changes in parental attitudes and foster children's behavior. Changes in parental attitudes did not appear to lead to changes in parenting nor to changes in foster children's behavior according to the results from Hampson and Tavormina's (1980) study. The

training that led to significantly improved parental attitudes did not generate significant changes in parents' or children's behaviors.

While the interest in assessing behavior change as a result of training is understandable in light of its relationship to placement related problems (Pardeck, 1982), it does not preclude the need to evaluate training with respect to placement breakdown and other placement related difficulties. Since the family functions as an interactive set of subsystems, improvement in foster children's behavior may not be sufficient in improving placement stability. In discussing the results of his study, Penn reported that one parent requested the removal of her foster child in spite of improvement in the child's behavior, because of deterioration in the behavior of her natural children. It is thus suggested that evaluative programs follow the example of Boyd & Remy (1978), who evaluated training on outcome variables that are crucial to helping foster families attain the objecives of foster family care.

The third point of interest concerns the apparent superiority of behaviorally-oriented training programs. These programs appear to lead to behavior change in both children and parents and thus to changes in family functioning (Hampson and Tavormina, 1980; Penn, 1978). Moreover, they appear to be effective among various subgroups of the foster parent population. Penn (1978) has

reported their effectiveness with a selected group of parents, while Hampson & Tavormina's (1980) report indicates their applicability to lower class, rural foster mothers. Similar results have been obtained with other parent populations and will be reviewed briefly in the next section.

Related Literature

The literature reviewed in this section is that which pertained to the parent population in general. The areas that are covered, abbeit briefly, include (1) behavioral parent training, (2) perceptions of family functioning after treatment, (3) self-efficacy studies.

Behavioral Parent Training

Karoly & Rosenthal (1977) compared a group of nine families that had undergone a didactic 10-week behaviorally-oriented training program to a wait-control group consisting of eight families and found that trained parents differed significantly from the controls on measures of parental perceptions of family environment, child problem behaviors, and a number of deviant behaviors that were recorded by trained observers using the Patterson Behavioral Coding System.

Results of the experiment showed that parents who had received training perceived their family environments as more cohesive than those who had not. That is, the members were seen to be more committed to family interests and goals and more likely to be helpful to and supportive of other family members. A decrease in parental perceptions of maladaptive behaviors was also noted after training. Home observations corroborated these parents' perceptions of the decrease in their children's maladaptive behaviors relative to children of control parents. Observers noted a reduction of 59 percent in deviant behaviors, while parents perceived a decline of 34 percent. Based on this evidence, the researchers suggest that a training program which combines cognitive restructuring and systematic parent training, may constitute a powerful intervention tool.

The study subjects, who were self-referred because of difficulties with chidlren who were exhibiting non-compliance, temper tantrums and/or aggressive behaviors, were randomly assigned to experimental and control conditions. Experimental subjects received training in applying behavioral methods such as positive reinforcement, consistency, charting, pinpointing, extinction, timeout, response const and contracting, as well as training in communication techniques. The training format consisted of lectures, role playing and large and small group discussions.

A few years earlier, Wiltz and Patterson (1974) compared six parents who received behavioral training to six parents on a waiting list with respect to their children's rates of deviant behavior and found that children of parents with training experienced significant decreases in observed aggressive behaviors. Similarly, children of parents who had had training, compared to those assigned to a control group, were observed to display significantly less conduct disordered behavior (Walter & Gillmore, 1973).

Of greater interest, however, are studies whose results indicate that training parents in behavioral techniques has an enhancing effect on family functioning. This positive effect appears to be the result of behavioral change on the part of the parents. As parents change their behavior through the application of learning principles, these changes tend to alter previous maladaptive interactional patterns and produce positive changes in their children (Hampon & Tavormina, 1980; Wahler, 1965). Further support for this hypothesis is found in the results of an investigation into the effects of parent behavioral training on the behaviors of siblings of identified target children (Arnold et al., 1975). Identified and non-identified children did not differ significantly with respect to observed deviant behaviors at baseline. Both groups, however, showed significant reduction in deviant behaviors over time. Siblings who were not the target of treatment

showed significant reduction in deviant behaviors at posttest, which were maintained six months later.

The investigators suggested several explanations for these findings. It was felt that the training provided the parents with skills which they used in responding to all children in the family. Training might have also provided more than instructions in equipping parents with sufficient understanding and a sense of mastery that enabled them to apply the principles to children other than those involved in the clinic referrals.

Another explanation takes into consideratioon the interactive characteristics of the family. When one child in a family is experiencing behavior problems, the situation is likely to trigger negative behavior among siblings. The chain of events that evolves may be characterized as reciprocal maladaptive behaviors by the sibling subsystem. These may be maintained, to some extent, through reinforcing contingencies that are partly retained by parents. If, however, the parents break that chain, behavioral improvement is likely to be the result for all involved.

In an effort to maximize the latter response to children's problem behavior, parent training programs have begun to emphasize self-control as an integral component of parents' behavioral instruction. This follows from an understanding that children's aversive behaviors trigger angry responses in parents, which then contribute to

coercive interactional patterns between parents and children. Wolfe and Sandler (1981), for example, observed three patterns of parent-child interaction among abusive parents. One pattern is described as highly deviant child behavior reciprocated with relatively less aversive parental behavior; the second is characterized by high rates of reciprocal aversive behaviors and the third involves relatively more aggressive behavior on the parents part (Wolfe and Sandler, 1981). Similar observations were reported by Patterson and Reid (1970).

The interactional nature of parental response and discipline derives from the basis that children are able to train parents and vice versa. This helps to explain the seemingly contradictory premise that, in attempting to extinguish children's problem behavior, parents can be trained to respond in ways that foster maladaptive interaction. Another explanation, on which most behaviorally-oriented parent trainers agree, is that parents' responses reflect lack of information about child development which contributes to unrealistic expectations of children's behavior. A contributing factor is parental reliance on aversive disciplinary techniques. Aversive techniques, by virtue of their ability to suppress unacceptable behaviors in children, may be readily employed by some parents, but tend to lose some of their effectiveness over time due to habituation on the part of

children. Parents employing aversive discipline then tend to increase the intensity of punishment to achieve the same level of compliance. This situation has been described by Patterson and Reid (1970) as a coercive process in which the aversive behaviors of both parents and children escalate over time. Parental dependence on such aversive disciplinary methods appears to be related to a lack of knowledge of effective positive child management techniques (Sandler, VanDercar and Milhoan, 1978).

Poor impulse control has also been hypothesized to be a factor in aversive parental response patterns (Steele & Pollack, 1968; Wasserman, 1967). Children's behaviors arouse negative emotions in parents who then respond aversively, both to eliminate the deviant behaviors and to reduce their own unpleasant emotions. Thus, the parents' behavior is intended, not only to teach the child to suppress undesirable behaviors, but to relieve their own annoyance, irritation, frustration and anger (Wolfe & Sandler, 1981). Without other methods to help them vent or overcome these emotions, punishment serves a dual role of emotion ventilation for the parent and of reducing the child's deviant behavior through coercion.

At this point is should be noted that while most of the research in this area has centered on abusive parents, it has been found to apply equally well to non-abusive parents who have aggressive children (Patterson & Reid, 1970).

While abusive parents with problem children tend to use harsher methods of discipline, both parent groups operate within the framework of reciprocally coercive family interactions.

Relying on the premise that abusive parents need training in both behavior management and self-control skills, several behavioral science researchers have experimented with training individual parents to alter their behaviors and those of their children (Crozier & Katz, 1979; Denicola & Sandler, 1980; VanDercar & Milhoan, 1978; Wolfe & Sandler, 1981). While these researchers relied on single subject designs in evaluating their interventions, their results have been supported by the results of group design evaluative studies.

Wolfe, Sandler and Kaufman (1981) conducted a study in which 16 court-referred abusive parents were randomly assigned to control and treatment groups. Dependent measures consisted of parental perceptions of child behaviors, caseworkers' ratings of children's problem behavior and home observations. The treatment subjects received group training in parenting augmented by individual home-based training. Control parents received caseworker supervision only. Group training included topics in human development and child management, problem solving, self-control, and modeling of appropriate child behavior. The self-control training that is particularly of interest here

consisted of teaching parents deep muscle relaxation techniques and impulse control procedures specific to their individual problem situations. Teaching parents deep muscle relaxation techniques provided them with coping behavior that could be used to ameliorate negative emotional arousal. When they can respond to stressful encounters in a relatively relaxed and tension-free manner, parents are more apt to retain control of the situation and less prone to respond impulsively. Bandura (1980) postulates that physiologic reactions are one source of beliefs of self-efficacy. The experience of negative emotional arousal and increased autonomic activity are likely to decrease self perceptions of efficacy, while the ability to approach stressful situations in a relatively calm manner tend to bolster confidence in one's capacity to handle such situations.

Training in impulse control focuses on restructuring parents' appraisal of stress-inducing behaviors. This training is designed to help parents generate task-oriented self instructions when facing difficult encounters. It teaches parents to replace negative self-statements with positive ones that are likely to facilitate rather than hinder the task. Michenbaum (1977) observed that when individuals are faced with tasks that they appraise as beyond their abilities or for which they lack appropriate coping responses, they tend to generate task-irrelevant

self-statements which reinforce avoidance behavior by convincing them they will fail instead of succeed. In the case of abusive parents, such training is aimed at helping them to develop greater confidence in their ability to control their responses in anger-producing interactions with their children.

As indicated earlier, the results supported the findings of the single subject studies. It was found that parents who received behavioral and self-control training, as compared to those who received caseworker supervision alone, experienced signficantly fewer child rearing problems. Moreover, the child rearing difficulties they did experience were significantly less intense than those experienced by control group parents. Follow-up measures, at 10 weeks posttreatment, revealed that treatment effects were maintained.

The results of these studies suggest that behaviorally based training methods are effective with different parent populations. They indicate that parental fuctioning is enhanced by training and that it seems to have positive effects on family interactions. Parents who have had the training are able to contribute to the development of interactional patterns that tend to reduce deviant child behaviors. With abusive parents, training not only reduced child rearing problems, but also the intensity of children's problems. Abusive parents, who have been found to be rigid

and predisposed to the use of discipline to control their children (Friedman et al, 1981) were found to be able to expand their parenting repertoires after training. This pertains also to other parents in the studies reviewed. In general, parents who received training acquired parenting skills that were not present prior to training. Training, it might be said, helps parents to broaden their parenting repertoires, thus allowing them to be more flexible and at the same time more systematic in their parenting.

At this time, it is difficult if not impossible to evaluate the contribution of self-control to the effectiveness of training. While Wolfe and his colleagues compared the results of their interventions with agency supervision alone, those comparisons are too inclusive to allow any conclusions to be drawn about the relative effectiveness of any specific component of the intervention. A comparison of behaviorally-based parent training with an intervention that combines behavioral and self-control skills training would permit an assessment of the contributions of the self-control component.

Family Perceptions

Parental perceptions of family environment are thought to be important for long term maintenance of adaptive system functioning (Karoly & Rosenthal, 1977). These researchers argue that the discrepancies noted between parents'

perceptions of deviant child behaviors and those made by trained outside observers, suggest that parents' perception may be affected by their judgements, attitudes or personal biases. Arnold et al (1975) noted that children identified by parents as problem children do not differ from their siblings with respect to rates of deviant behaviors, a finding that supports Karoly and Rosenthal's contention. Further support is provided by findings that indicate discripancies between parents' and trained home observers' assessments of changes in problem behaviors. Karoly & Rosenthal (1977) report a 15 percent discrepancy favoring trained observers' assessments of change following intervention. The hypothesis that deviant behaviors are viewed differently by parents and trained observers is consistent with theoretical expectations. Parents, as the subsystem responsible for the welfare of the family, can be expected to view behavior in relation to its effects on other subsystems and members of the family. As a result, it is likely that parents view their children's behavior in the context of its meaning for the family as a whole. Unlike trained observers, they do not see the behavior of the child as a discrete objective entity, apart from its effects on and meaning for the rest of the family.

Karoly & Rosenthal (1977) hypothesized that training in behaviorally-based parenting would generate perceptions of an increased sense of cohesion, decreased level of conflict

and greater sense of control. Behaviorally-trained parents, as compared to parents without training, perceived their families as significantly more cohesive. No significant differences were found with respect to conflict and control.

The findings of two other studies reveal that training of parents is related to improved perceptions of family environment by family members who were not involved in training. These findings further corroborate the contention that families function as interactive systems in which changes in one member contribute to changes in other members. Haffey & Levant (1984) compared the perceptions of children whose parents received training in behavioral parenting to those whose parents received communication-oriented skills training. Children of behaviorally trained parents perceived their parents as significantly more congruent than children of parents trained in communication skills. The authors indicated that this finding was anticipated and reasoned that behavioral training's emphasis on following through with consequences, both positive and negative, may contribute to greater consistency in parents' behavior. Reiter & Killman's (1978) study did not involve behavioral training, but reported that husbands, whose wives received counseling to improve the quality of communication within the family, perceived their families as significantly more integrated after counseling than those whose wives did not receive training. From these studies it

appears that perceptions of family environments are sensitive to intervention-induced changes.

The results of an investigation conducted by VanDerVeen (1965) suggest that parental perceptions have motivational effects on parents' willingness to seek help. VanDerVeen (1965) explains that family concept, that is, the way a person perceives his family which includes feelings, attitudes, and expectations, influences behavior. Moreover, he states that the family's self concept can be referred to, measured and changed as a result of experience (p. 197).

Parents of children judged low in personal adjustment who were involved with a child guidance clinic, perceived their families significantly less positively than parents of children also judged low in personal adjustment but not involved with a child guidance clinic. Fathers of poorly adjusted children not involved with a clinic were noted to be more satisifed with their families than mothers. This situation was not observed in parents of clinic involved children who were both dissatisfied with their families.

A comparative study of family perceptions between families of poorly adjusted children who attended clinics, poorly adjusted children who did not and well adjusted children revealed that parents of clinic patients were more likely to perceive conflict in their families and to experience difficulties than the other groups. Parents of poorly adjusted non-patients were found to display a

tendency to deny the problems and to present a false picture of harmony within their families. Families of well adjusted children, on the other hand, perceived their families as warm and positive and free of problems (Berkowitz, 1963). The results of this study and that of Vanderveen (1965) appear to suggest that parents' perceptions of their families' functioning may determine to a great extent their willingness to seek help.

In summary, it would appear that perceptions of family environment are crucial in understanding how parents come to define behavior as deviant. Perceptions of family environments seemed sensitive to intervention-induced changes and appeeared to motivate help-seeking behavior in parents.

Self-Efficacy

Social learning theory postulates that psychological interventions lead to behavior change by strengthening self perceptions of efficacy (Bandura, 1977). This construct refers to a person's judgement of his capacity to successfully undertake a given task. Efficacy expectations can be altered through performance achievement, vicarious experiences, verbal persuasion and arousal control (Bandura, 1977). Support for the relationship assumed to exist between perceptions of self efficacy and behavior change has

been provided by the results of several studies (Bandura, 1982).

In an attempt to test the hypothesized role of the self efficacy construct, adults suffering from severe snake phobias were assigned to three conditions (Bandura, Adams & Beyer, 1977). Two groups received treatments based on performance mastery and vicarious experiences, the other received no treatment. Subjects' efficacy expectations were measured at pre and posttest. Subjects who received participant modeling treatment as compared to those in the modeling only conditions obtained significantly higher self efficacy scores. No significant change over time was noted for subjects who received no treatment. Modeling was found to lead to moderate increases in self perceptions of efficacy. In addition, it was found that regardless of the treatment mode, the stronger the self perception of efficacy, the greater the probability that the subjects would successfully undertake a given activity.

Similar results were obtained by Schunk (1981), who reported that self perceptions of efficacy predicted arithmetic performance in children across levels of difficulty and treatment conditions. The children's judgements of their capacities reflected their performance. Schunk reported that the more problems his subject thought they could solve, the more they subsequently solved. Moreover, he observed that the greater the subjects self

perceptions of arithmetic efficacy, the greater their persistence on arithmetic tasks and achievement in such tasks. Weinberg, Gould & Jackson (1979) reported results that corroborate those reported by the Bandura and Schunk studies.

There appears to be, however, a dearth of information pertaining to perceptions of self efficacy in the parent training literature. In light of the motivational effects of this variable, it is surprising that it has not been included as a dependent measure in studies evaluating the effectiveness of parent training.

In summary, it would appear self perceptions of efficacy play a controlling role in producing behavior change. While such perceptions are capable of influencing behavior, they are succeptible to being influenced by psychological interventions. Perceptions of self efficacy appear to determine the degree of effort exerted on a task and the duration of such effort. Clearly, future evaluation of the effectiveness of training would greatly enhance understanding of how parents bring about behavior change, if this variable is included as a dependent measure.

Summary

The purpose of this investigation was to differentially evaluate the effectiveness of two behaviorally-based foster parent training curricula, with respect to parental

perceptions of family environment, foster parenting efficacy, placement stability, dependence on agency personnel. The review of the literature reveals that the role of foster parents is changing and that present and future foster parents need more specialized skills. A number of training programs have been developed to respond to that need. Results of their evaluation appear to suggest that behaviorally-based training is somewhat superior to no training and communication oriented training programs. Behaviorally-oriented training programs appear to be effective, not only in bringing about behavior change in foster children, but seem to enhance the functioning of the family system.

Developments in the field of behavioral training for parents have begun to include a self-control or stress reduction component in programs designed for abusive parents. The self-control component is aimed at facilitating the employment of behavioral principles by reducing impulsive or anger triggered behaviors in response to aversive behavior by children. Since foster parents are continually faced with behaviors that are likely to trigger angry reactions, it is felt that training parents in self management would increase their ability to apply parenting techniques learned in training. It has been found that the greater and the more varied a person's coping responses are

the less stress he is likely to experience (Pearlin & Schooler, 1978).

In accordance with the literature reviewed, this study evaluated the training programs with respect to variables that are critical to the objectives of foster family care, but which appears to have received little attention. While a fair amount of attention has been paid to the effects of training on foster parents' attitudes toward children and perceptions of changes in children's behavior, little interest has been shown in the effects of training on perceptions of family climate, foster parents sense of parenting efficacy and placement related outcomes. This investigation attempted to address this situation by evaluating the effectiveness of training with respect to these outcome measures.

CHAPTER THREE

METHODOLOGY

Introduction

This chapter presents the methodology employed in this investigation. It is divided into several subsections describing the design of the study, the procedures used in selecting and assigning subjects, the training curricula compared and the research setting. In addition, information pertaining to trainers, assessment measures and procedures, and data analysis is presented.

Design

A group X time research design was employed in this study. Two independent variables were manipulated: type of training and time period. Type of training had two levels: (1) parenting and self management skills training and (2) parenting skills training without self management. Time period had three levels: (1) pretest, (2) posttest, and (3) follow-up time periods.

Outcome measures consisted of (1) score on the Cohesion, Conflict and Control subscales of the Family

Environment Scale (FES) (Moos & Moos, 1981); (2) score on the Foster-Parent Parenting Efficacy Scale (PFFES); (3) number of unsuccessfull terminated placements or placement breakdowns, and (4) number of contacts with agency personnel.

Outcome was measured at three points: (1) prior to the onset of training, (2) immediately upon the completion of training, and (3) two months after training ended. The FES and the FPPES were administered on the first and last day of training, and within a two-week period sixty days after termination. Outcome measures based on archival data were obtained after the completion of training, which covered the two months prior to the onset of training, the two months of training, and the two months after training.

Sample Selection

The subjects who took part in this study were licensed foster parents, who were affiliated with a private, non-profit child placement agency. The latter, as part of its contractual responsibilities with the State of Michigan, is required to provide its foster parents with training designed to enhance their ability to parent children with special needs. Foster parents are required to attend training as part of the requirements for maintaining their license.

In addition to meeting its contractual responsibilities, the agency felt that its foster parents needed specialized training in child management and discipline techniques. Agency personnel indicated that a significant percentage of their foster parents had expressed a desire for such training.

Foster parents were informed in person and by mail of the availability of training. Six months prior to the onset of the parenting classes, the need for more rigorous, skills-focused training was noted by agency personnel in a general foster parent meeting. At that time, the foster parents were promised that such training would be forthcoming in the near future. Two months prior to the beginning of training, agency personnel who had daily contacts with the foster parents informed them of the upcoming classes and encouraged them to participate. During these contacts, it was indicated that parents would have the opportunity to receive training in two behaviorally-oriented, parenting skills training programs that had been found helpful to other parents. Three weeks prior to the beginning of this project, the agency notified its foster parents, by letter, of the date and time of training. The parents were asked to contact the agency if the assigned time and day were not convenient. Training was mandatory. Parents were told that they would receive a certificate upon successful completion of training. This certificate was

contingent on attendance at least six sessions, completing all homework assignments and obtaining an average score of 3.0 out of a possible score of 4.0 on all quizzes. Five parents met these requirements. Of those five, three were control subjects and two were experimental subjects.

Assignment

Ninety-eight licensed foster parents were randomly assigned to the two training curricula. Foster parents affiliated with the agency were listed and each one was given a number. Using a table of random numbers, potential subjects were assigned to one of the two training conditions. A coin was tossed to decide which of the two groups would receive the first subject.

This procedure resulted in two groups of 49 subjects each. The subjects in each training condition were than randomly assigned to either a morning or an afternoon class. In this way, four classes were created, with each training group having a morning and an afternoon class on different days. Subjects were allowed to attend either a morning or an afternoon class on their day to facilitate greater consistency in attendance and accommodate parents who could not attend one session or the other.

Of the 98 foster parents who were initially assigned, 52 attended at least one training session. Thirty-seven foster parents did not respond, that is they did not report

for training nor contact the agency. Seven foster parents, three from the experimental and four from the control condition, contacted the agency to indicate that they could not attend at the assigned time. Two parents, one from the experimental and one from the control group declined to participate in evaluation of the training curricula, but attended training. Participation in the curricula evaluation was voluntary.

Of the 52 parents who attended at least once, 27 attended four or more sessions, while 25 participated in three or fewer training classes. The 27 parents who attended four or more sessions consisted of 15 experimental and 12 control group subjects. These 27 parents were considered successful subjects and constituted the experimental sample. This procedure was used because it was felt that subjects needed to participate in at least four sessions in order for training to have an effect. Similar procedures were employed by Brown (1980), Slattery (1980), and Guerney (1976). Table 3.1 presents the number of subjects lost due to the various forms of attrition that occurred.

Another form of attrition that occurred in this study concerned the completion of scaled assessment measures. Many subjects declined to complete the scaled measures, although they agreed to participate in the evaluation of training. These subjects tended to request permission to complete the scales at home and then did not return. Table

Table 3.1

Number of Subjects Assigned and Those Responding

Group	Number Assigned	Number Responding	No Response	Time Conflict	Refused
Exp.	49	28	17	3	1
Cont.	49	24	20	4	1
Total	98	52	37	7	2

3.2 shows attendance and the number of subjects who completed scaled measures.

Of the 27 subjects who constituted the experimental sample, 23 had completed data on the main measures at post-test, 13 experimental, 10 controls. At follow-up, thirteen subjects agreed to complete assessment measures, seven from the control group and six from the experimental group.

Of the four qualified subjects who did not complete the FES and the FPPES at posttesting, one declined to do so because she did not like tests, another consistently forgot to complete the scales and two wanted to delay the examination until the situations in their homes improved. Attempts to persuade these subjects to complete the scales expeditiously were not successful.

Table 3.2

Subjects' Attendance and Completion of Scales

Group	Attendance		Completed FES, FPPES	
	Less than 4	4 or more	Post-test	Follow-up
Experimental	13	15	13	6
Control	12	12	10	7
Total	25	27	23	13

Every subject who had completed the scaled measures at posttest was contacted and given the FES, the FPPES and the Utilization and Usefulness scale at follow-up. Of the twenty-three who were contacted and given the scales, three were angry at the agency and refused to complete the scales, and five consistently forgot to complete them or did not have them completed when contacted by the examiners. The other six indicated the tests were too long, asked why they had to do them again after having done them twice before and complained they had no time.

Using Campbell and Stanely (1963) symbols, the design can be represented as shown in Figure 3.1.

Although it was initially planned that foster parents would be asked to volunteer, the agency made participation in training mandatory. Agency personnel explained that its

$$
\begin{array}{llllll}
R & O_1 & X_1 & O_2 & O_3 \\
R & O_4 & X_2 & O_5 & O_6
\end{array}
$$

Legend:

X_1 = Parenting + Self Management Skills Training

X_2 = Parenting Skills Training Only

O_1-O_2-O_3 = Pretest, posttest and follow-up for Parenting and Self Management curriculum

O_4-O_5-O_6 = Pretest, posttest and follow-up for Parenting Training only

R = Random assignment of subjects

Figure 3.1: Study Design Using Campbell and Stanley Symbols

foster parents had a poor history of voluntary compliance with training, and argued that, since all of its foster parents needed training, voluntary participation would give the message that training was optional. By making training mandatory, the agency hoped to enhance attendance.

Training Curricula

Trainers' manuals for each curriculum are included in the appendix. A brief description and an outline of the content of each program will be presented.

Both training curricula are based on operant and social learning principles. The contents of the training programs were adapted from the works of Burchard and Leintenberg (1978), Abidin (1976) and Patterson (1976). Each curriculum is designed for eight weekly sessions of two hours per week of very structured and skill-oriented programs. Both types of programs have been found successful with parents (Hampson & Tavormina, 1980a; Karoly & Rosenthal, 1977; Wolfe et al., 1981) and the first four sessions of each curriculum were identical. The Parenting and Self Management curriculum covered the following areas:

Sessions 1: Acquisition and maintenance of behavior: modeling and reinforcement; parenting foster children.

Session 2: Selecting target behaviors: pinpointing, observing, recording, graphing.

Session 3: Methods for decreasing behaviors: extinction, response cost, overcorrection, positive practice, time out.

Session 4: Contingency contracting

Session 5: Conflict resolution and self management skills: managing feelings.

Session 6: Conflict resolution and self management skills: deep breathing, relaxation techniques.

Session 7: Developing behavioral program and self-management skills: relaxation techniques.

Session 8: Problem-solving: combining child management and self-management skills.

The Parenting Skills training curriculum constituting the comparison group included the following areas:

Session 1: Acquisition and maintenance of behavior: modeling and reinforcement; parenting foster children.

Session 2: Selecting target behaviors: pinpointing, observing, recording and graphing.

Session 3: Methods for decreasing behaviors: extinction, response cost, overcorrection, positive practice, time out.

Session 4: Contingency contracting

Session 5: Conflict resolution

Session 6: Conflict resolution

Session 7: Developing behavioral programs

Session 8: Problem solving

The goal of the curriculum that combined parenting and self-management skills training was to render foster parents proficient in child management and self control skills. It was felt that training in self-management would facilitate the use of the learned behavioral principles in crisis situations. Meichenbaum (1982) has reviewed laboratory studies suggesting that failure to respond appropriately in stressful situations is not due to lack of skills. The self-management component allows foster parents to reduce negative self-referent ideation and emotional arousal in crisis situations and thus reduces the probability of responding with stereotypical behaviors. A similar procedure has been used successfully in training abusive parents in self-control (Wolfe et al., 1981).

The self-management component combined cognitive restructuring (Ellis, 1970), positive self instruction (Meichenbaum, 1977) and progressive muscle relaxation. The cognitive restructuring component was designed to help foster parents become aware of the cognitions that negatively affect their appraisal of foster children's behaviors and involved discussions of beliefs, values and attitudes that underlie perceptions of problematic behaviors. Parents were taught to realize that such cognitions affected their ability to parent foster children through their affects on their own behavior. Viewing problem behavior as a result of learning was encouraged, as was the foster parent's ability to teach new behaviors. Parents were taught that since all behaviors are learned, foster children can be taught adaptive behaviors that are incompatible with deviant behavior. The training also sought to help foster parents develop the belief that deviant behavior is not catastrophic, but a problem to be solved.

In keeping with Meichenbaum's (1977) proposition that individuals can instruct themselves how to behave differently in stressful situations, foster parents were encouraged to develop positive self-referent ideation about their ability to help a foster child eliminate an undesirable behavior or to teach him a new one. Progressive muscle relaxation was taught so that parents could reduce

their level of emotional arousal generated by anticipatory thinking. Self efficacy theory posits that emotional arousal constitutes one source of self perceptions of efficacy. The greater a person's ability to anticipate or engage in stressful situations in a calm and controlled manner, the more confident he is likely to feel about his ability to handle such situations (Bandura, 1982).

The main purpose for the second curriculum was to provide a point of comparison for the parenting and self management curriculum. Hampson & Tavormina (1980a) found behaviorally-oriented group foster parent teaching to be superior to reflective group foster parent training in enhancing family functioning and eliminating deviant behaviors. Another objective was to train foster parents in child management skills whose effectiveness is well established (Karoly & Rosenthal, 1977; Ross, 1981). As Fairweather & Tornatzky (1977) argued, innovations should be evaluated against such established programs rather than compared to no treatment control group.

Both curricula were developed by this researcher and were reviewed by experts and specialists in behavior management and the foster home field. Based on comments and criticisms resulting from such reviews, changes were made to produce the final versions.

The Setting

The experiment was carried out in a foster care agency in the Flint, Michigan area, that provided specialized foster care services. The agency is responsible for finding foster homes for children in need, and offers a variety of rehabilitative services to foster children. The agency is staffed by professional and paraprofessional mental health workers. The professional staff includes psychologists, consulting psychiatrists, therapists and caseworkers. Approximately 180 foster homes were affiliated with and supervised by the agency. The agency is also engaged in recruiting, training and licensing of foster parents and homes.

Agency foster parents had indicated a strong desire for child management training in addition to the supervision they received from the agency. They had undergone training to orient them to the foster care field, the philosophy of the agency, and state regulations and requirements regarding foster care. The foster parents received financial remuneration for caring for foster children.

The children served by the agency presented a variety of behavioral and emotional problems that are representative of the severe difficulties that foster children experience. These difficulties ranged from none to severe emotional disturbance, including delinquency. Data pertaining to the distribution of deviant behaviors between the two groups is

presented in Chapter Four. All of the children who were clients of the agency received therapy as part of their placement, provided by agency staff who have Masters' degrees in social work or counseling. Case management is done by B.A. level caseworkers, who generally oversee the placement. They are in frequent contact with foster parents and foster children. The goal of the agency is to return foster children to their natural parents as soon as possible or when this is not possible, to make arrangements for permanent placement.

The foster parents affiliated with the agency represented a cross section of the population. Those foster parents who reported for training tended to be from urban and rural areas. Blacks and whites constituted the two main ethnic groups. Foster parents varied in their amount of experience, from several years as foster parents to none. Both, two-parent and one-parent homes were represented. The failure of the subjects to respond to demographic items in the Foster Parent Profile Questionnaire prevents a more detailed description of the characteristics of the subject population.

Trainers

Four agency employees with substantial experience in behavior management volunteered to become co-trainers. Two had been involved in running foster parents support group

meetings. Three co-trainers had master's degrees in clinical psychology, social work and special education and functioned as therapists. One trainer had a B.A. in psychology and was involved in recruiting and licensing foster homes.

Training for the co-trainers consisted of four two-hour sessions during which co-trainers reviewed the principles and techniques of behaviorally-based parenting and self-management skills, and familiarized themselves with the training manuals. Assessment of trainers consisted of written responses to three stimulus situations requiring behavioral intervention. Their responses were scored by the researcher and all four volunteers were found qualified to be co-trainers. Co-trainers' responses were evaluated with respect to (1) mastery of content as expressed through appropriateness of suggested techniques and (2) procedure suggested, that is, the steps to be followed. A score of 90 on a scale of 100 was considered necessary to qualify.

Co-trainers assigned themselves to foster parent training classes based on time availability. They were rotated so that each co-trainer participated in all classes.

Initially, it was planned that the researcher would not be involved in training and that trained volunteers were to teach all the classes. Lack of time on the part of volunteer co-trainers and their insufficient number did not permit the implementation of the original plan. Thus, the researcher was also involved as a co-trainer. This

procedure proved helpful as one co-trainer dropped out after the fourth week of training and other co-trainers were sometimes unable to lead sessions due to emergency situations that required their presence.

Co-trainers met once a week for an hour to discuss training needs and review previous sessions. These meetings addressed such concerns as (1) keeping subjects on task without seeming uncaring about non-training concerns, (2) sporadic attendance, (3) pulling parents out of training, and (4) non-completion of homework assignments. Decisions taken after discussing these concerns were applied in all the following week's training sessions.

Training Implementation

The first 20 minutes of the first training session in all groups were used to (1) provide an overview of training and of the research aspect of the project, (2) explain how subjects were assigned to classes, and (3) seek voluntary participation in the evaluation of training. Another 15-20 minutes were used for pre-testing. Subjects who did not attend the first session of training completed this procedure individually.

Training in both models started in the same week. The decision as to which training model would start first was decided by tossing a coin. Training sessions were held on Monday and Friday, once in the morning and once in the

afternoon. A control and an experimental class met on each training day at different times, such that one condition had a morning class on one training day and an afternoon class on the other day. Subjects were trained in classes whose attendance ranged from two to seventeen participants.

Training classes lasted two hours, except for the first and last class meeting. Half an hour was added to the time periods for these sessions so subjects could complete assessment instructions. Training in both models ended the same week. Classes within the same teaching condition were combined for the last day of training because agency employees were given an unanticipated free "stress day" that fell on the last Monday of training. Subjects were contacted by telephone by agency personnel and asked to attend the next class in their respective groups.

Implementation Difficulties

Training in both conditions was beset by several difficulties, most of which persisted throughout the training period. These problems consisted of (1) sporadic attendance, (2) interruptions, (3) frequent recital of non-related training concerns, (4) non-completion of homework assignments.

Sporadic attendance interferred with the continuity of training. Concepts and principles that had been already discussed often had to be repeated for those who had missed

earlier sessions. This situation may have hindered the mastery of concepts and principles that were introduced toward the latter part of training.

On several occasions, agency personnel came to the room where training was being held to ask to meet with a foster parent. These interruptions persisted throughout training but seemed to decline after this problem was discussed with agency personnel.

Frequent recital of non-related concerns constituted the most difficult problem in completing the training as outlined. Subjects in both conditions, but more of those in the experimental morning class, displayed a preference for complaining about the agency's "pro foster child approach". The participants felt that behavior problems displayed by their foster children were partly maintained by the inadequate support they received from caseworkers and therapists. They seemed to feel that these professionals undermined their parenting roles and diminished the effectiveness of their disciplinary measures. The subjects conveyed the impression that the entire foster family system gave too much power to the children and not enough to the foster parents.

Some parents complained that they were underpaid or questioned the monies they were getting. They felt that they should be receiving the rates paid for severely disturbed children, instead of the regular rates they were

getting. Many parents wanted to know the criteria that were used in determining rates.

Others complained that caseworkers behaved in an arbitrary fashion that they found insensitive to their concerns. They indicated that caseworkers sometimes scheduled appointments for their foster children without adequate prior notice. Some expressed irritation at the attention given to the foster child during home visits, feeling excluded by the caseworker.

This attention appeared to have some unwanted consequences for training. A number of parents indicated that the "gripes of other parents" decreased their interest in coming for training. Other parents approached the researcher individually to express feelings of exasperation with the "constant venting and griping." They indicated that they enjoyed the classes and learned when the co-trainers were able to teach. These parents were encouraged to express these thoughts and feelings during the training sessions.

The apparent need of the foster parents to use training as an outlet to express their feelings of dissatisfaction with the agency placed co-trainers in a delicate position. On one hand, there was the pressure to keep parents focused on the task at hand, while on the other there was concern to empathize with and avoid alienating the participants. It was thought that through these complaints, the subjects were

voicing their frustrations with a difficult job that is seldom rewarding. Moreover, it was felt that co-trainers needed to be careful not to exacerbate the apparent feelings of powerlessness that seemed to underlie the complaints.

Based on this understanding, it was decided that the following procedure would be employed. When subjects began to voice non-training related concerns, co-trainers (1) acknowledged the subject's concerns, (2) inquired as to how many parents had the same concerns, (3) asked subjects to try to relate the expressed concerns to the training topic being discussed or those to be covered, (4) suggested that a specific amount of time be set aside to discuss these concerns after the session's instructional objectives had been met. If subjects persisted in discussing these issues, co-trainers and participants negotiated a specificed amount of time to discuss the concerns. While this procedure did not entirely eliminate the problem, it contributed to an increase in the time used for training.

Training Related Concerns

The participants appeared to have experience a moderate degree of difficulty in accepting the usefulness of the concept of reinforcement. Many subjects felt that reinforcement was tantamount to bribing a child, and preferred punishing techniques aimed at reducing deviant behaviors. Some difficulties were also noted in discussing

contingency contracting and conflict resolution. There appeared to be a marked difference in the responses of participants in the two training conditions. Subjects in one of the experimental classes tended to be vehement in their opposition to negotiating contracts with their foster children. These subjects also resisted doing self management exercises that required them to explore their beliefs, attitudes, and feelings toward deviant behavior. They tended to express ultimatums, demanding that a foster child either, "do it my way or leave my house." Only a small minority, about three parents, appeared to invest efforts in these exercises. Unfortunately, this class had the largest attendance of the two experimental classes.

Subjects in the other experimental class appeared more cooperative, but much less interactive. These subjects tended to join the co-trainers rather than oppose them.

Another training related concern involved homework assignments. By the third session, it became obvious that only a small number of subjects were doing the homework assignments. This situation was pointed out to the subjects with the explanation that doing the assignments would provide the co-trainers with the opportunity to give them feedback on how they were applying the principles. As this situation did not improve, part of the time allocated for discussion of homework assignments was added to the time allocated for review. Data pertaining to the number of

assignments completed between the two groups will be presented in Chapter Four.

Apart from the difficulties noted above, training followed the outline in the trainers' manual. While participants were not required to do any out-of-class reading, they were given access to and encouraged to read Living with children (Patterson, 1976) and Families (Patterson, 1971).

Instrumentation

Three main outcome measures were used. These were: The Family Environment Scale (Moos & Moos, 1981), the Foster Parent Parenting Efficacy Scale and the Foster-Placement Information Sheet.

The FES is designed to assess perceptions of family interactional patterns. It is composed of ten subscales, each consisting of nine true/false statements. Only three of these subscales were used in this study, the Cohesion, Conflict and Control subscales. Consistent with Karoly and Rosenthal (1977), the higher the score on the Cohension and Control subscales, and the lower the score on the Conflict subscale, the more positive the family climate was assumed to be.

The scale is relatively easy to administer. Scale items are short and written in simple language. Test-retest reliability estimates obtained over a four month

period are .72 for Cohesion, .66 for Conflict and .78 for Control (Moos & Moos, 1981). Internal consistency is estimated at .78 for Cohesion, .75 for Conflict and .67 for Control (Moos & Moos, 1981).

The FES has been used with a variety of populations and ethnic groups with little loss in its ability to discriminate between distressed and non-distressed families (Moos & Moos, 1981). Moreover, the subscales appear to be sensitive to intervention-related changes in perceptions of family climate (Karoly & Rosenthal, 1977; Moos & Moos, 1981).

Subjects in this study appeared to respond with caution to the scale's items. A large number of subjects expressed concerns about having their family misperceived by agency personnel. They appear to distinguish two families, one with foster children and one without. It appeared as though some subjects responded to the test with perceptions of their family that discounted the presence of foster children. Subjects inquired as to whether the test was assessing their family or the foster child. When told to respond according to the ways things are done in their families, including everyone in the home, parents volunteered the explanation that many of the items are true of their family only because of the presence of the foster children. The instructions that they respond to the test items based on the way people in their home behave toward

and interact with one another appeared to leave them perplexed.

The Foster Parent Parenting Efficacy Scale (FPPES) is a 10-item test that was designed to assess foster parents' feeling of confidence in their ability to function as foster parents. The items were adapted from the Parenting Sense of Competence Scale developed by Gibaud-Wallston and Wandersman (1978) by rewording ten of the original scale's 16 items in order to make them appropriate for foster parents. An internal consistency reliability estimate of .71 was computed for the scale from the pretest scores of 37 subjects who completed it.

The Foster Placement Information Sheet is a list of six items that pertain to two types of placement-related events. Of these, three items refer to types of placement breakdowns and three to types of contacts between foster parents and agency personnel.

Scoring consisted of recording the number of occurrence of each placement-related event for each foster child in the subject's home. Since length of placement varied for foster children, each type of contact was divided by the number of days spent in the home. The result was then summed for the foster children to obtain a score for each parent for each contact item. Similarly, the number of each type of placement breakdown was divided by the number of foster children in the home and then summed to obtain a score.

This procedure is based on the assumption that the greater the number of foster children in a home, the greater the possibility of placement breakdowns. The higher the scores for each type of placement-related event, the more problematic the placement. The procedure for handling presenting behavior consisted of writing the presenting problem (or lack of problem) for each foster child in the subject's home.

The FPIS was not administered to subjects, but completed by reviewing agency records. As with the other measures, assessments were done on three occasions. Pre-training assessment covered a period of two months, posttest assessment covered the two months of training and follow-up assessment reviewed information pertaining to the two months following the end of training.

The reliability of the items was established through inter-recorder agreement. Initially it was planned that two persons who were not affiliated with this study would serve as recorders. Since only one person volunteered to carry out that task, the researcher also served in the capacity of recorder. While it was possible for this researcher to have non-agency personnel function in that capacity, agency personnel felt that this role would violate the confidentiality of the information contained in the subject's record.

Prior to completing the Foster Placement Information Sheet, a volunteer agency employee was trained in how to identify and record the desired information up to 90 percent proficiency. Unfortunately, this employee terminated her employment with the agency soon after training ended. As there were no other volunteers, the researcher recorded the information. The following procedure was used to establish the reliability of the recorded information.

A random sample of 10 subjects was selected and assigned to a trained recorder. This person received the same training and met the same requirements as the previous volunteer. After the recorder had completed the Foster Placement Information Sheet on the subjects, his scores were compared with those the researcher had given the same set of subjects. The number of agreements was divided by the number of agreements plus disagreements for each item.

Using this procedure, the following percentage of agreement was obtained. Of the items related to contacts with agency staff (Therapists & Caseworkers): home contacts had a proportion of agreement of .80, office contacts also had a proportion of agreement of .80 and telephone contacts had the lowest proportion of agreement of .60. The items pertaining to placement breakdowns had a lower proportion of agreement than those referring to contacts. Unlike contact items, type of placement breakdown was not always clearly stated, and required some interpretation on the part of the

recorder. Request for removal had a proportion of agreement of .50. A proportion of agreement of .60 was obtained for unrequested removal, while number of children who ran away had a proportion of agreement of .80. The relatively higher level of agreement regarding this last item, as compared to the two previous ones, relates to the greater documentation regarding that behavior in agency records. A special report is completed for each child who is on "run away" status.

The low level of agreement regarding requests for removal and unrequested removals was related to conflicting reports between therapists and caseworkers and conflicting statements within the same report regarding the party who initiated the procedure for removing a child from his foster home. One criticism that could be leveled against the procedure used to establish reliability of the item on the FPIS pertains to the relatively small number of subjects selected. It was not possible to use more subjects because of the volunteer's time constraints.

In addition to the outcome measures mentioned above, four other assessment devices were used. These scales provided information on the demograhic characteristics of the sample, amount of information mastered, training climate, and perceived usefulness of the principles and techniques taught in training.

Information pertaining to demographic characteristics was obtained by the Foster Parent Profile Questionnaire.

The questionnaire is a 22 item scale adapted from a scale of the same name developed by Brown (1980). Questionnaire items cover such areas as: experience, age, education, housing, neighborhood, type of children fostered, feelings toward the agency, frequency of contact with agency staff and turnover in child care workers. Participants in this study appeared to respond negatively to this questionnaire. Many participants complained that the questions were too personal. Some indicated that they found it confusing and unclear, and left many items unanswered.

Amount of information mastered was assessed through the administration of four multiple-choice quizzes. Each quiz covered the information presented in the preceding session and was written by the researcher and the co-trainers. Quizzes were administered at the onset of the training sessions. Subjects generally did not like the quizzes, and they were made optional after the third one was given. Subjecs did not volunteer to take the tests after they were made optional. Data pertaining to the performance of the two groups on the quizzes is presented in Chapter Four.

Training climate was measured by the Training Information Sheet. This scale contains 7 items pertaining to time of training, attendance, tardiness, group participation, completion of assignments, amount of material covered and length of session. The information provided by this scale was used to maintain training homogeneity. This

scale was completed by the co-trainers at the end of each session. Data pertaining to attendance and completion of assignments is presented in Chapter Four.

Frequency of use and perceived usefulness of the parenting skills taught were measured by the Utilization and Usefulness Scale. This scale was made up of two Likert-type items each consisting of a different subscale. One item assessed frequency of use, while the other measured perceived usefulness.

Data Collection

The procedure that was followed in collecting data for each assessment period is described below under separate heading for each period.

Pretesting

The Family Environment Scale, the Foster Parent Parenting Efficacy Scale and the Foster Parent Profile Questionnaire were administered to the subjects by the co-trainers at the first meeting prior to the onset of training. Subjects who were absent from that session were tested during the first session they attended, prior to participating in training.

The co-trainers collected the completed scales and returned them to the researcher. Since many subjects

experienced difficulties with the Foster Parent Profile Questionnaire, they were allowed to take it home with the understanding that it was to be returned at the next training session. Subjects were encouraged to complete the other scales at the training site.

While co-trainers were aware that two training conditions were being manipulated, they were unaware of which condition constituted the experimental and control group. The trainers distributed the tests to the participants, read test instructions and answered subjects' questions.

Posttesting

Because of an unexpected holiday that fell on one of the last training days, the classes within each training condition were combined into one, forming only two classes. Following the same procedure used previously, the co-trainers administered the Family Environment Scale, the Foster Parent Parenting Efficacy Scale and the Treatment Information Scale to all subjects who attended the two sessions. Successful subjects who did not attend the last sessions were administered the scales at home or at the agency by co-trainers within two weeks after training ended. Four subjects declined to complete the scales, two from the experimental group and two from the control group.

Follow-Up

Co-trainers and agency employees who had weekly contacts with the participants were approached by the researcher and asked to serve as examiners. Subjects were contacted by telephone by the researcher to inform them that they would be asked to complete the scales at their next scheduled meeting with agency personel and to thank them for their cooperation in the previous training sessions. Subjects completed the scales individually at the agency or at home. Of the 23 subjects who completed the scales at posttest, 13 responded at follow-up. The examiners indicated that other subjects declined to complete the scales for various reasons stated earlier. Data for this period were collected within a two-week period, two months after training ended.

It is suspected that examiners' behavior may have affected subjects' reluctance to complete scaled measures at follow-up. Three examiners indicated they had forgotten to administer the scales during their contact with the subjects and it appeared as though administration of the scales did not have the same priority it had had during the first two testing periods. It was later learned that the agency was experiencing difficulties related to staff turnover and foster parent dissatisfaction with agency personnel.

Analysis

Demographic variables were analyzed using the chi-square technique and *t*-tests for differences between means. A repeated-measure analysis of variance was performed on outcome measures. A statistical significance level of .05 was chosen for the analysis of outcome measures.

CHAPTER FOUR

ANALYSIS OF DATA

Because of attrition, a three-tier analytic strategy was employed. The results of the analysis are presented in the following manner: results pertaining to subjects who completed all assessment measures will be discussed first, followed by results for subjects with complete assessment measures at pretest and posttest only. Results relating to the differential effects of training on more cooperative and less cooperative subjects will also be presented.

Thirteen subjects, nine blacks and four whites, completed assessment measures at follow-up. The ages of these participants ranged from 32 to 59 years, with a mean age of 46 years. Experience ranged from zero to six years, with a mode of one year, and an overall mean of 1.13 years. Fifty percent did not complete high school, while 10 percent reported having had some college. Fifty-nine percent of the subjects were single female heads of households.

Since age and experience have been found to be positively related to placement stability (Boyd & Remy, 1978), subjects in the two training conditions were compared with respect to those variables. The

comparison with respect to age produced a *t*-value of 0.0 (*df* = 7, p = .1), which was not statistically significant at the .05 level.

Similarly, no significant differences between the two training groups were found with respect to experience. A *t*-value of -1.68 with 9 degrees of freedom was obtained. This value is statistically significant at the .13 level.

Because the relatively high level of attrition raised concerns over the initial equivalence of the two training groups, a *t*-test for significant differences between means was conducted on pretest data. Table 4.1 summarizes the results of those mean comparisons.

As can be seen from this table, there were no significant statistical differences between the two groups on pretest measures.

Since it has been reported that behavior problems are positively associated with placement breakdowns and maladaptive interactional patterns in families in general, data pertaining to the behavior difficulties of foster children were analyzed (Tables 4.2 to 4.4). As can be observed from Table 4.2, participants in the two training conditions did not differ significantly with respect to the types of behavior they confronted at Time 1. Table 4.3 shows that the two groups significantly differed with respect to the number of children, displaying stealing and lying behaviors at posttest, while Table 4.4 reveals that at

Table 4.1

Summary of t-Test Results On Pretest Data

Scale	df	t-Value	p
Cohension	11	-.54	.60
Conflict	11	-.41	.69
Control	11	.10	.92
Efficacy	11	-.84	.42
Req. for removal	11	-.92	.38
Unreq. removals	11	0	1
Run aways	11	0	1
Home contacts	11	-.13	.90
Office Contacts	11	-1.53	.15
Phone Contacts	11	-1.28	.23

Table 4.2

Results of Fisher's Exact Test for Presenting Problems at Time 1

Presenting Problem	p
Minor or no behavior problem	.76
Noncompliance	.76
Bed wetting	--
Stealing/Lying	.07
Truancy	.70
Inappropriate sexual behavior	.88
Antisocial	.39
Hostile aggressiveness	.91
Emotional disturbance	.37
Other	.63

Table 4.3

Results of Chi Square and Fisher's Exact Test for Presenting Problems at Time 2

Presenting Problem	df	X(chi)	FET	p
Minor or no behavior problem			.86	
Noncompliance	1	.31		.58
Bed wetting	1	.96		.33
Stealing/Lying	1	5.70		.02*
Truancy	1	1.05		.30
Inappropriate sexual behavior	1	2.01		.16
Antisocial	1	2.01		.16
Hostile aggressive	1	.31		.58
Emotional disturbance	1	.002		.96
Other	1	2.01		.16

*Significant at .05 level

Table 4.4

Chi Square Results for Presenting Problems at Time 3

Presenting Problem	df	X (chi)	p
Minor or no Behavior Problem	1	.01	.91
Noncompliance	1	4.33	.04*
Bed wetting	1	2.30	.13
Stealing/Lying	1	3.15	.08
Truancy	1	5.64	.02*
Inappropriate Sexual behavior			
Antisocial	1	.01	.94
Hostile Aggressive	1	.01	.91
Emotional disturbances	1	.002	.96
Other	1	2.30	.13

*Significant at .05 level

Times 3, subjects in the two training conditions differed significantly in regard to children who displayed noncompliant and truant behavior.

Because foster children moved into and out of the participants' homes during the course of the study, an analysis of the data pertaining to the number of children cared for was performed. This was done in order to assess the initial equivalence of the two groups with respect to that variable and the maintenance of that equivalence over time (Tables 4.5 and 4.6).

Table 4.5

Repeated Measures Analysis of Variance of Foster Children[a]

Source	df	MS	F	p
Training	1	.22	.074	.79
Subjects	11	2.98		
Time	2	1.87	2.78	.08
Training X Time	2	.71	1.05	.37
Subjects X Time	22	.67		

[a] Number of subjects: Experimental = 6, Control = 7

Table 4.6

Mean Number of Foster Children for Training Conditions [a]

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
Experimental	1.33	2.33	2.50	2.06
Control	1.71	2.00	2.00	1.90
Mean of Means	1.54	2.15	2.23	1.98

The results of the analysis suggest that the two training conditions did not differ significantly with respect to the number of foster children for whom the participants cared [F (1,11)= .07, p = .79]. While those in the experimental condition accepted more foster children across the time periods, no training X time interaction effect was obtained [F(2,22)=2.78, p=.37]. Those in both training conditions experienced an increase in foster children from Time 1 to Time 2. Experimental subjects increased the number of children they cared for consistently across the time periods observed. A 75 percent increase was noted between Time 1 and Time 2 for those in the experimental training condition, compared to a 17 percent increase in number of children for the control group for the same time period. From Time 2 to Time 3, a 7 percent

increase was noted for the experimental group, compared to none for the control group.

In addition to the analysis of the data pertaining to the number of children fostered, data related to attendance, amount of material mastered and number of completed assignments were also analyzed in an effort to assess intergroup homogeneity. No significant differences between the two groups was found with respect to attendance (t=-.1, df=11, p=.92). Experimental subjects had a mean attendance of 5.5 sessions, compared to 5.6 for those in the control group.

Analysis of the data related to amount of material learned, as measured by classroom tests, revealed that experimental subjects obtained a mean score of 1.83, compared to 3.14 for control subjects. These results were not significant (t=-2.11, df=11, p=.06). Similarly, the two groups did not differ significantly with respect to the number of assignments completed (t=.84, df=11,p=.42). The experimental subjects obtained a mean score of 2.16, compared to 3.43 for control subjects.

Data related to the utilization and usefulness of the skills taught were also analyzed. Analysis of the utilization data suggest that there was no significant difference between the two groups (t=1.45,df=10,p=.18). Experimental subjects obtained a mean score of 3.17, compared to 2.5 for control subjects. There was also no

significant difference between the two groups with respect to perceived usefulness of the techniques taught (t=-.35, df=10, p=.73). A mean score of 2.5 was obtained by experimental subjects, compared to 2.67 for control subjects.

Hypothesis Testing

The research hypotheses were grouped by the research questions from which they were generated. For example, hypotheses 1.1 to 1.3 related to question #1, while hypothesis 2.1 pertained to question #2 and so on.

> Question #1: Does training in parenting and self-management skills, as compared to training in parenting skills only, lead to improved family environment as perceived by foster parents?
>
> Hypothesis 1.1: Foster parents trained in parenting and self-management skills will score significantly higher on the Cohesion scale of the Family Environment Scale than those trained in parenting skills only.

This hypothesis was not accepted. No significant difference between the two groups was found at the .05 level (F(1,11)=.89, p=.37]. In addition, there were no significant effects for time (F(2,22)=.09,p=.92) and no significant training by time interaction (F(2,22)=1.90, p=.17). Table 4.7 summarizes the results of the analysis, while Table 4.8 presents the means.

Table 4.7

Repeated Measures Analysis of Variance of Scores on the Cohesion Subscale[a]

Source	df	MS	F	p
Training	1	7.38	.887	.336
Subjects	11	8.33		
Time	2	.102	.089	.915
Training X Time	2	2.19	1.897	.174
Subjects X Time	22	1.15		

[a] Number of subjects: Experimental = 6, Control = 7

Table 4.8

Means of Scores on Cohesion Subscale

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
Experimental	7.16	7.16	6.33	6.88
Control	7.71	7.42	8.14	7.76
Mean of Means	7.46	7.30	7.30	7.35

As can be seen from Table 4.8, these results were contrary to expectation. Those in the experimental training condition experienced a decrease in perceived cohesion among family members between Times 2 and 3, while those in the control condition experienced an increase. Control subjects experienced a decrease in score from Time 1 to 2, while experimental participants underwent no perceived changes. Those in both training conditions experienced a decrease in perceived cohesion relative to their Time 1 scores.

> Hypothesis 1.2: Foster parents trained in parenting and self-management skills will score significantly lower on the Conflict Scale of the Family Environment Scale than those trained in parenting skills only.

This hypothesis was not accepted. The analysis revealed no significant effect for training condition ($F(1,11)=.18$, $p=.68$) nor for time ($F(2,22)=.05$, $p=.96$) at the .05 level. Training condition by time interaction was also not significant at the .05 level ($F(2,22)=.015$, $p=.99$). Table 4.9 summarizes the results of the analysis, while Table 4.10 presents the means for training conditions and time periods.

Table 4.10 revealed that the results were in the predicted direction. The experimental group had a lower mean score for conflict than the control gorup at Times 2 and 3. Contrary to the control group, however, it experienced an increase in conflict from Time 1 to Time 2.

Table 4.9

Repeated Measures Analysis of Variance of Scores on the Conflict Subscale of the FES [a]

Score	df	MS	F	p
Training	1	.71	.176	.683
Subjects	11	4.01		
Time	2	.08	.045	.956
Training X Time	2	.03	.015	.985
Subjects X Time	22	1.72		

[a] Number of subjects: Experimental=6, Control=7

Table 4.10

Means of Scores for Conflict Subscale

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
Experimental	1.66	1.83	1.83	1.77
Control	2.00	2.00	2.14	2.04
Mean of Means	1.84	1.92	2.00	1.91

Those in the experimental group perceived less stress in their family environments across the time periods than did those in the control group.

> Hypothesis 1.3: Foster parents trained in parenting and self-management skills will score significantly higher on the Control Scale of the Family Environment Scale than those trained in parenting skills only.

This hypothesis was not accepted. The analysis revealed no significant effect for training condition ($F(1,11)=.92$, $p=.36$) nor for time ($F(2,22)=.43$, $p=.66$) at the .05 level of significance. Training X time interaction was also not significant at the .05 level ($F(2,22)=.79$, $p=.75$). Table 4.11 summarizes the results of the analysis, while Table 4.12 presents the means for training conditions and time periods.

Table 4.12 shows that the results were not in the predicted directions. Control subjects perceived their family environments as more controlled than experimental subjects. Both groups experienced a decrease from Time 1 to Time 2. Experimental subjects, however, experienced a greater decrease in perceived control than control group subjects. While both groups experienced an increase from Time 2 to Time 3, control group subjects obtained a greater increase.

Table 4.11

Repeated Measures Analysis of Variance of Scores on the Control Subscale of the FES [a]

Source	df	MS	F	p
Training	1	1.59	.920	.358
Subjects	11	1.73		
Time	2	1.00	.429	.657
Training X Time	2	.67	.286	.754
Subjects X Time	22	2.33		

[a] Number of subjects: Experimental = 6, Control = 7

Table 4.12

Means of Scores for Control Subscale

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
Experimental	5.50	4.83	5.16	5.16
Control	5.42	5.28	6.00	5.57
Mean of Means	5.46	5.07	5.61	5.37

Question #2: Does training in parenting and self-management skills, as compared to training in parenting skills only, lead to an increased sense of parenting efficacy in foster parents?

Hypothesis 2.1: Foster parents trained in parenting and self-management skills will score significantly higher on the Foster Parent Parenting Efficacy Scale than those trained in parenting skills only.

This hypothesis was not accepted. The analysis revealed no significant effects for training condition ($F(1,11)=.10$, $p=.76$) nor for time ($F(2,22)=.10$, $p=.91$) at the .05 level. Training by time interaction, also, was not significant at the .05 level ($F(2,22)=2.25$, $p=.13$). Table 4.13 summarizes the results of the analysis, while Table 4.14 presents the means for training conditions and time periods.

Table 4.14 shows that the results were in the predicted direction. An increase in mean score was observed across the time periods for the experimental condition. Subjects in the control group showed a mean increase in self-efficacy from Time 1 to 2, but a decrease from Time 2 to Time 3. The difference in mean score between the two training conditions, however, was greatest at Time 1.

Question #3: Does training in parenting and self-management skills, as compared to training in parenting skills only, lead to fewer placement breakdowns?

Hypothesis 3.1: Participants trained in parenting and self-management skills will express significantly fewer requests for removal than those trained in parenting skills only.

Table 4.13

Results for Repeated Measures Analysis of Variance of Scores on the FPPES [a]

Source	df	MS	F	p
Training	1	4.52	.099	.759
Subjects	11	45.54		
Time	2	.72	.099	.906
Training X Time	2	16.34	2.25	.129
Subjects X Time	22	7.27		

[a] Number of subjects: Experimental = 6, Control = 7

Table 4.14

Means of Efficacy Scores

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
Experimental	27.83	28.50	30.33	28.88
Control	30.00	30.28	28.42	29.57
Mean of Means	29.00	29.46	29.30	29.25

This hypothesis was not accepted because analysis revealed no significant effects for training ($F(1,11)=.76$, $p=40$) or for time ($F(2,22)=1.47$, $p=.25$) at the .05 level. Training by time interactions were also not significant ($F(2,22)=1.27$, $p=.30$). Table 4.15 summarizes the results of the analysis, while Table 4.16 presents the means for training conditions and time periods.

Table 4.15

Repeated Measures Analysis of Variance on Number of Requests for Removal[a]

Source	df	MS	F	p
Training	1	.06	.758	.403
Subjects	11	.08		
Time	2	.08	1.474	.251
Training X Time	2	.07	1.274	.300
Subjects X Time	22	.05		

[a] Number of subjects: Experimental = 6, Control = 7

Table 4.16

Mean Number of Requests for Removal

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
Experimental	0	.05	.12	.06
Control	.04	.29	.07	.13
Mean of Means	.02	.18	.09	.10

Table 4.16 shows that the results were partially in the predicted direction. Both groups experienced an increase in requests for removal at Time 2, but this increase favored the control group. While the experimental group continued to experience an increase, from Time 2 to Time 3, a decrease was noted for the control group. The means for the time periods revealed an increase in removal requests from Time 1 to Time 2, that was followed by a decrease from Time 2 to Time 3.

> Hypothesis 3.2: Foster parents trained in parenting and self-management skills will experience signficiantly fewer unrequested removals than those trained in parenting skills only.

This hypothesis was not accepted. The analysis revealed no significant effect for training ($F(1,11)=.59$, $p=.46$) at the .05 level, but a significant effect for time was observed ($F(2,22)=3.48$, $p=.049$). No significant training by time interaction was observed. Table 4.17 summarizes the results of the analysis, Table 4.18 presents the means for training conditions and time periods.

Table 4.17

Repeated Measures Analysis of Variance for Number of Unrequested Removals[a]

Source	df	MS	F	p
Training	1	.003	.589	.459
Subjects	11	.005		
Time	2	.020	3.477	.049
Training X Time	2	.003	.589	.564
Subjects X Time	22	.005		

[a] Number of subjects: Experimental = 6, Control = 7

As can be seen from Table 4.18, the results were not in the predicted direction. While both groups experience an increase from Time 1 to Time 2, those in the experimental training condition experienced more requests for removal than the control group. Visual inspection of the means for

Table 4.18

Mean Number for Unrequested Removals

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
Experimental	0	.10	0	.033
Control	0	.04	0	.014
Mean of Means	0	.07	0	.023

the three time periods suggested that the increase in unrequested removals from Time 1 to Time 2 was equal to the decrease noted from Time 2 to Time 3. This would suggest that both sets of contrasts are significant.

> Hypothesis 3.3: Foster parents trained in parenting and self-management skills will have significantly fewer foster children running away from their homes than those trained in parenting skills only.

This hypothesis was not accepted. The analysis revealed no significant effects for training ($F(1,11)=.67$, $p=.43$) nor for time ($F(2,22)=2.15$, $p=.14$) at the .05 level. Training X time interaction was also not significant ($F(2,22)=.81$, $p=.46$). Table 4.19 summarizes the results of

the analysis; Table 4.20 presents the means for training conditions and time periods.

Table 4.19

Results of Repeated Measures Analysis of Variance for Runaway Children[a]

Source	df	MS	F	p
Training	1	.05	.666	.432
Subjects	11	.08		
Time	2	.06	2.146	.141
Training X Time	2	.023	.805	.460
Subjects X Time	22	.03		

[a] Number of subjects: Experimental = 6, Control = 7

Table 4.20

Mean Number for Runaway Children

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
Experimental	0	.17	.17	.11
Control	0	.11	0	.04
Mean of Means	0	.14	.08	.07

Table 4.20 shows that the results were not in the predicted direction. While both groups experienced an increase in runaways, the experimental group obtained a higher mean score than the control group. Moreover, while the experimental group appeared to maintain the same mean score from Time 2 to Time 3, the control group experienced a decrease in runaways.

Question #4: Does training in parenting and self-management skills, as compared to training in parenting skills only, lead to fewer contacts with agency staff?

Hypothesis 4.1: Foster parents trained in parenting and self-management skills will need significantly fewer home visits than those trained in parenting skills only.

This hypothesis was not accepted. The analysis revealed no significant effect for training ($F(1,11)=.43$, $p=.53$) nor for time ($F(2,22)=.73$, $p=.49$) at the .05 level of significance. Training by time interaction was also not significant ($F(2,22)=.31$, $p=.74$). Table 4.21 summarizes the results of the analysis, while Table 4.22 presents the means for training conditions and time periods.

Table 4.22 revealed that the results were not in the expected direction. The experimental group had more home contacts than the control group. An increase was noted from Time 1 to Time 2 for the experimental group, while the control group mean score remained stable. Though both

Table 4.21

Repeated Measures of Variance for Number of Home Contacts [a]

Source	df	MS	F	p
Training	1	.004	.427	.527
Subjects	11	.010		
Time	2	.004	.733	.492
Training X Time	2	.002	.306	.740
Subjects X Time	22	.006		

[a] Number of subjects: Experimental = 6, Control = 7

Table 4.22

Means of Home Contacts

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
Experimental	.07	.12	.07	.08
Control	.07	.07	.04	.06
Mean of Means	.07	.09	.05	.07

groups experienced a drop in contacts from Time 2 to Time 3, the change favored the control group.

> Hypothesis 4.2: Foster parents trained in parenting and self-management skills will have significantly fewer office contacts than those trained in parenting skills only.

This hypothesis was not accepted. The analysis revealed no significant effect for training ($F(1,11)=1.33$, $p=.27$) nor for time ($F(2,22)=2.10$, $p=.15$) at the .05 level. Training by time interaction was also not significant ($F(2,22)=.85$, $p=.44$). Table 4.23 summarizes the results of the analysis, while Table 4.24 presents the means for training conditions and time periods.

As can be seen from Table 4.24, the results were in the anticipated direction. The experimental group experienced an increase in contacts from Time 1 to Time 2 and a decrease from Time 2 to Time 3. While the control group experienced a continual decrease over the three time periods, mean scores did not drop below those of the experimental subjects. The initial differences between the two scores suggested that the two groups may not have been equivalent with respect to this variable.

> Hypothesis 4.3: Foster parents trained in parenting and self-management skills will have significantly fewer problem-related telephone contacts than those trained in parenting skills only.

Table 4.23

Results of Repeated Measures of Variance for Number of Office Contacts[a]

Source	df	MS	F	p
Training	1	.07	1.326	.274
Subjects	11	.05		
Time	2	.04	2.10	.146
Training X Time	2	.01	.846	.443
Subjects X Time	22	.02		

[a] Number of subjects: Experimental = 6, Control = 7

Table 4.24

Means of Office Contact

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
Experimental	.08	.12	.05	.08
Control	.24	.17	.09	.17
Mean of Means	.17	.15	.07	.13

This hypothesis was not accepted. The analysis revealed no significant effect for training ($F(1,11)=.003$, $p=.95$) nor for time ($F(2,22)=1.22$, $p=.32$) at the .05 level. Training by time interaction was also not significant ($F(2,22)=.132$, $p=.29$). Table 4.25 presents the means for training conditions and time periods.

Table 4.26 showed that the results were not in the predicted direction. The experimental group had a greater number of telephone contacts from Time 1 to Time 2, as compared to control subjects. While both groups experienced a drop in telephone contacts, the control condition had a higher decrease than the experimental group.

Table 4.25

Results of Repeated Measures of Analysis of Variance for Telephone Contacts[a]

Source	df	MS	F	p
Training	1	0	.003	.954
Subjects	11	.016		
Time	2	.007	1.215	.316
Training X Time	2	.007	1.323	.287
Subjects X Time	22	.005		

[a] Number of subjects: Experimental = 6, Control = 7

TABLE 4.26

Means of Telephone Contacts

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
Experimental	0	.08	.07	.05
Control	.06	.07	.03	.05
Mean of Means	.03	.08	.05	.05

Data Analysis for Subjects With Completed Scaled Measures at Posttest

Twenty-three subjects had complete data on outcome measures at posttest. Of these, 74 percent were black and 26 percent were white. Seventy-one percent of the sample consisted of single female heads of households, thirty-one percent were married.

The ages of these subjects ranged from 23 to 61 years, with a mean age of 44 years. Experience ranged from 0 to 20 years, with a mean of 2.85 years, a median of 1 year and a mode of 0 years. Thirty percent did not finish high school and 25 percent reported some college experience. Twenty percent finished high school. Two subjects or 11 percent of those who responded indicated that they were college

graduates. The preceding descriptive results are based on the responses of 19 subjects to these items.

T-tests for differences between means for age and experience proved not to be statistically significant at the .05 level. A *t*-value of -1.04 with 16 degrees of freedom, significant at the .31 level, was obtained for age. Experimental subjects had a mean age of 41.78 years, while control subajects had a mean age of 47.11 years.

Similarly, no statistically significant differences between the two training groups were noted with respect to experience. A *t*-value of -.04 with 11 degrees of freedom was obtained, which was significant at the .97 level.

In order to assess the extent to which the equivalence of the two groups with respect to the outcome measures might have been vitiated by attrition, *t*-tests for differences between means were conducted on pretest data. Table 4.27 summarizes the results of those mean comparisons.

As can be seen from Table 4.27, there were no significant statistical differences between the two groups on pretest measures.

Since it has been reported that generally behavior problems are positively associated with placement breakdowns and maladaptive interactional patterns in families, data pertaining to the behavior difficulties of foster children were analyzed. Tables 4.28 to 4.30 present the results of those analyses.

Table 4.27

Summary of *t*-Test Results on Pretest Data

Scale	df	t-value	p
Cohesion	21	-1.31	.20
Conflict	21	.54	.60
Control	21	1.21	.24
Efficacy	21	- .48	.63
Req. for removal	21	.70	.49
Unreq. removals	21	.87	.39
Runaways	21	.02	.99
Home contacts	21	.59	.56
Office contacts	21	-1.07	.30
Phone contacts	21	-1.16	.26

Table 4.28

Chi Square for Presenting Problems at Time 1

Presenting Problem	df	X (chi)	p
Minor or no Behavioral problems	1	.80	.37
Noncompliance	1	.02	.87
Bed wetting	1	.02	.88
Stealing/Lying	1	2.84	.09
Truancy	1	.07	.79
Inappropriate Sexual Behavior	1	.89	.34
Antisocial	1	2.20	.14
Hostile Aggressive	1	0.0	1.0
Emotional disturbance	1	.05	.82
Other	1	.02	.88

Table 4.29

Chi Square for Presenting Problems at Time 2

Presenting Problem	df	X(chi)	p
Minor or no Behavior Problems	1	.07	.79
Noncomplainice	1	0	1.0
Bed wetting	1	1.01	.32
Stealing/Lying	1	4.82	.03*
Truancy	1	.36	.55
Inappropriate Sexual Behavior	1	3.92	.05*
Antisocial	1	2.39	.12
Hostile Aggressive	1	0	1.0
Emotional disturbance	1	0	1.0
Other	1	1.01	.32

*Significant at .05 level

Table 4.30

Chi Square for Presenting Problems at Time 3

Presenting Problem	df	X(chi)	p
Minor or no behavior problems	1	1.88	.17
Noncompliance	1	.07	.79
Bed wetting	1	1.12	.29
Stealing/Lying	1	3.90	.05*
Truancy	1	1.81	.18
Inappropriate sexual behavior	1	1.28	.27
Antisocial	1	.35	.67
Emotional disturbance	1	0	1.0
Other	1	1.23	.27

*Significant at .05 level

As can be see from the above tables, subjects in the two conditions did not differ significantly in relation to the types of difficulties presented by their foster children at Time 1. While Table 4.30 shows that the two groups differed significantly with respect to experience with chidren who exhibited stealing and lying and inappropriate sexual behaviors at Time 3, Table 4.31 reveals that they differed in regard to children who displayed inappropriate sexual behaviors at Time 3.

Because foster children moved into and out of the participants' homes throughout the study, an analysis of the data pertaining to the number of children in the home was performed. This was done in order to assess the initial equivalence of the two groups with respect to that variable and to test for the maintenance of that equivalence over time. Tables 4.31 and 4.32 summarize the results.

The results of the analysis suggest that those in the two training conditions did not differ significantly with respect to the number of foster children they cared for ($F(1,21)=.53$, $p=.48$). Although those in the experimental condition accepted more foster children across the time periods than control subjects, no training by time interaction was observed ($F(2,42)=.20$, $p=.82$). A significant effect for time was observed ($F(2,42)=3.81$, $p=.03$) at the .03 level of significance.

Table 4.31

Repeated Measures Analysis of Variance of Foster Children [a]

Source	df	MS	F	p
Training	1	2.344	.528	.475
Subjects	21	4.438		
Time	2	3.304	3.814	.030
Training X Time	2	.170	.20	.823
Subjects X Time	42	.866		

[a] Number of subjects: Experimental = 6, Control = 7

Table 4.32

Means of Foster Children

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
Experimental	1.69	2.38	2.54	2.21
Control	1.50	2.0	2.0	1.83
Mean of Means	1.61	2.22	2.30	2.04

Sheffé post hoc comparisons revealed a statistically significant difference between Time 1 and Time 2 means ($F(2,42)$ p .025), and between Time 1 and Time 3 means ($F(2,42)$ p .01).

Those in both training conditions had an increase in foster children from Time 1 to Time 2. While experimental subjects continued to work with increasing number of children, control subjects kept their number of foster children stable from Time 2 to Time 3.

In addition to analysis of data on the number of children fostered, data related to attendance, amount of material mastered and number of completed assignments were also analyzed to assess intergroup homogeneity. No significnt difference was found between the two groups with respect to attendance at the .05 level of significance (t=.65, df=21, p=.52). Experimental subjects had a mean attendance of 5.92 sessions, compared to 5.6 for control subjects.

Analysis related to amount of material learned, as measured by classroom quizzes, revealed a mean score of 2.23 for experimental subjects, compared to 3.0 for control subjects. These results were not significant at the .05 level (t=-1.43, df=21, p=.17). As with the case for subjects who completed all outcome measures at follow-up, control subjects scored higher on the classroom quizzes than experimental subjects.

Similarly, control subjects completed an average of 3.5 assignments, compared to an average of 2.0 for experimental subjects. These means were not found to be significant at the .05 level (t=-1.49, df=21, p=.15).

Hypothesis Testing

Since the hypotheses to be discussed in the following sections are the same ones stated earlier, they will not be restated.

Hypothesis 1.1 was not accepted. The analysis revealed no significant effect for training ($F(1,21)$=1.23, p=.28) nor for time ($F(1,21)$=.02, p=.90) at the .05 level. Training X time interaction was also not significant ($F(1,21)$=.42, p=.52). Table 4.33 summarizes the results of the analysis, while Table 4.34 presents the means for training conditions and time periods.

Table 4.35 shows that the control group perceived their families as more cohesive than experimental subjects. The latter, however, had a gain of .23 from Time 1 to Time 2, compared to a drop of .20 for control subjects. The control group perceived their families as more cohesive prior to training. A difference of .98 favored the control group.

Hypothesis 1.2 was not accepted. The analysis revealed no significant effect for training ($F(1,21)$=.35, p=.56) nor for time ($F(1,21)$=.02, p=.90) at the .05 level. Training X time interaction was also not significant ($F(1,21)$=.01,

Table 4.33

Repeated Measures of Analysis of Variance of Scores on the Cohesion Subscale of the FES[a]

Source	df	MS	F	p
Training	1	6.555	1.233	.279
Subjects	21	5.317		
Time	1	.021	.018	.896
Training X Time	1	.524	.424	.522
Subjects X Time	21	1.235		

[a] Number of subjects: Experimental = 13, Control = 10

Table 4.34

Mean of Cohesion Subscale Scores

Training Conditions	Time 1	Time 2	Mean of Means
Experimental	6.92	7.15	7.02
Control	7.90	7.70	7.80
Mean of Means	7.34	7.39	7.37

p.91). Table 4.35 summarizes the results of the analysis, while Table 4.36 presents the means for training conditions and time periods.

As can be seen from Table 4.36, the results were not in the predicted direction. An increase in conflict was noted for the experimental group, while no gain was observed for control subjects. Experimental subjects, however, had a higher pretest mean score than control subjects.

Table 4.35

Repeated Measures of Analysis of Variance of Scores on the Conflict Subscale[a]

Source	df	MS	F	p
Training	1	2.023	.352	.560
Subjects	21	5.754		
Time	1	.021	.015	.902
Training X Time	1	.016	.012	.914
Subjects X Time	21	1.402		

Table 4.36

Means of Conflict Subcale Scores

Training Conditions	Time 1	Time 2	Mean of Means
Experimental	2.38	2.46	2.42
Control	2.0	2.0	2.0
Mean of Means	2.21	2.2	2.23

Hypothesis 1.3 was not accepted. The analysis revealed no significant effect for training ($F(1,21)=.03$, $p=.87$) nor for time ($F(1,21)=1.23$, $p=.28$) at the .05 level of significance. Training by time interaction was also not significant ($F(1,21)=1.74$, $p=.20$). Table 4.37 summarizes the results of the analysis, while Table 4.38 presents the means for training conditions and time periods.

Table 4.38 reveals that the results were not in the anticipated direction. Experimental subjects experienced decrease in perceived control of their family environments, while the control group experienced a gain in control.

Hypothesis 2.1 was not accepted. The analysis revealed no significant effects for training ($F(1,21)=.69$, $p=.42$) nor for time ($F(1,21)=.03$, $p=.88$) at the .05 level of

Table 4.37

Results of Repeated Measures of Analysis of Variance of Scores on the Control Subscale[a]

Source	df	MS	F	p
Training	1	.080	.027	.870
Subjects	21	2.969		
Time	1	3.673	1.232	.280
Training X Time	1	5.179	1.736	.202
Subjects X Time	21	2.983		

[a] Number of subjects: Experimental = 13, Control = 10

Table 4.38

Means of Control Subscale Scores

Treatment Conditions	Time 1	Time 2	Mean of Means
Experimental	6.46	5.30	5.88
Control	5.70	5.90	5.80
Mean of Means	6.13	5.56	5.85

significance. Training X time interaction was also not significant ($F(1,21)=.21$, $p=.65$). Table 4.39 summarizes the results of the analysis, while Table 4.40 presents the means for training conditions and time periods.

Table 4.39

Repeated Measures of Analysis of Variance of Scores on the FPPES[a]

Source	df	MS	F	p
Training	1	18.766	.685	.417
Subjects	21	27.414		
Time	1	.195	.025	.877
Training X Time	1	1.638	.207	.654
Subjects X Time	21	7.936		

[a] Number of subjects: Experimental = 13, Control = 10

Table 4.40 reveals that the results were not in the predicted direction. The control group experienced an increase in sense of efficacy or competence, while the experimental group had a decrease in that area. Control subjects started with higher level of efficacy scores than experimental subjects and increased these after training.

Table 4.40

Means of Efficacy Subscale Scores

Training Conditions	Time 1	Time 2	Mean of Means
Experimental	28.68	28.23	28.46
Control	29.60	29.90	29.75
Mean of Means	29.08	28.95	29.02

Since archival data was available, the following analyses included follow-up information on the subjects. Hypothesis 3.1 was not accepted. The analysis revealed no significant effects for training ($F(1,21)=.14$, $p=.72$) or for time ($F(2,42)=.96$, $p=.39$) at the .05 level. Training X time interaction was also not significant ($F(2,42)=1.66$, $p=.20$). Table 4.41 summarizes the results of the analysis, while Table 4.42 presents the means for training conditions and time periods.

As can be seen from Table 4.42, the results were mixed. While both groups experienced increased requests for removal from Time 1 to Time 2, more children were removed from the control group than the experimental group. A decrease in such requests was observed for control subjects from Time 2

Table 4.41

Repeated Measures of Analysis of Variance on Number of Requests for Removal[a]

Source	df	MS	F	p
Training	1	.01	.135	.717
Subjects	21	.076		
Time	2	.061	.961	.391
Training X Time	2	.105	1.663	.202
Subjects X Time	42	.063		

[a] Number of subjects: Experimental = 13, Control = 10

Table 4.42

Mean for Removal Requests

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
Experimental	.06	.09	.21	.12
Control	.03	.20	.05	.09
Mean of Means	.05	.14	.14	.11

to Time 3, but an increase was noted for experimental subjects.

Hypothesis 3.2 was not accepted. The analysis revealed no significant effects for training ($F(1,21)=.63$, $p=.44$) or for time ($F(2,42)=1.74$, $p=.19$) at the .05 level. Training X time interaction was also not significant ($F(2,42)=.15$, $p=.86$). Table 4.43 summarizes the results of the analysis, while Table 4.44 presents the means for training conditions and time periods.

Table 4.43

Repeated Measures of Analysis of Variance for Unrequested Removals[a]

Source	df	MS	F	p
Training	1	.003	.633	.435
Subjects	21	.005		
Time	2	.009	1.742	.188
Training X Time	2	.001	.151	.860
Subjects X Time	42	.005		

[a] Number of subjects: Experimental = 13, Control = 10

Table 4.44

Means of Unrequested Removals

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
Experimental	.023	.046	0	.023
Control	0	.030	0	.010
Mean of Means	.013	.039	0	.012

Table 4.44 shows that the results were not in the expected direction. The experimental group had had more foster children removed from their homes at Time 2 than had the control group. The latter, however, had a greater increase in such removals from pretest measures than experimental subjects. Both subjects experienced a sharp drop in such removals from Time 2 to Time 3, with the experimental group experiencing a higher decrease than control subjects in that interval.

Hypothesis 3.3 was not accepted. The analysis revealed no significant effects for training ($F(1,21)=.55$, $p=.47$) or for time ($F(2,42)=.96$, $p=.39$) at the .05 level. Training X time interaction was also not significant ($F(2,42)=.29$, $p=.75$). Table 4.45 summarizes the results of the analysis,

while Table 4.46 presents the means for training conditions and time periods.

As can be seen from Table 4.46, the results were not in the desired direction. Experimental subjects had more children who ran away from their home than control subjects across the three intervals. While both groups had the same number of runaway children at Time 1, the experimental group had an increase of runaway incidents from Time 1 to Time 2.

Table 4.45

Repeated Measures of Analysis of Variance for Runaway Children[a]

Source	df	MS	F	p
Training	1	.057	.548	.467
Subjects	21	.104		
Time	2	.049	.959	.392
Training X Time	2	.015	.291	.749
Subjects X Time	42	.051		

[a] Number of subjects: Experimental = 13, Control = 10

Table 4.46

Means for Runaway Children

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
Experimental	.10	.177	.077	.118
Control	.10	.08	0	.06
Mean of Means	.10	.135	.043	.09

Hypothesis 4.1 was not accepted. The analysis revealed no significant effects for training ($F(1,21)=1.40$, $p=.25$) or for time ($F(2,42)=1.74$, $p=.19$) at the .05 level. Training X time interaction was also not significant ($F(2,42)=.15$, $p=.86$). Table 4.47 summarizes the results of the analysis, while Table 4.48 presents the means for training conditions and time periods.

Table 4.48 shows that the results were not in the anticipated direction. Experimental subjects consistently had more home visits than control subjects across time. No increase in home visits was noted for the control group between Time 1 and Time 2. While both groups experienced a decrease in home visits from Time 2 to Time 3, the control group still had fewer home visits than the experimental group.

Table 4.47

Repeated Measures of Analysis of Variance of Home Contacts [a]

Source	df	MS	F	p
Training	1	.012	1.401	.250
Subjects	21	.009		
Time	2	.009	1.742	.188
Training X Time	2	.001	.151	.860
Subjects X Time	42	.005		

[a] Number of subjects: Experimental = 13, Control = 10

Table 4.48

Means of Home Contacts

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
Experimental	.08	.10	.054	.077
Control	.06	.06	.03	.05
Mean of Means	.07	.08	.043	.064

Hypothesis 4.2 was not accepted. The analysis revealed no significant effects for training ($F(1,21)=.12$, $p=.73$) or for time ($F(2,42)=1.55$, $p=.23$) at the .05 level. Training X time interaction was also not significant ($F(2,42)=1.28$, $p=.29$). Table 4.49 summarizes the results of the analysis. Table 4.50 presents the means for training conditions and time periods.

As can be seen from Table 4.50, the results were mixed. The experimental group had fewer office contacts at Time 2, but more such contacts at Time 3 than the control group. While both groups had a decrease in number of office contacts between Time 2 and Time 3, the control group had slightly fewer office visits than the experimental group.

Table 4.49

Repeated Measures of Analysis of Variance of Office Contacts[a]

Source	df	MS	F	p
Training	1	.007	.12	.73
Subjects	21	.056		
Time	2	.018	1.55	.23
Training X Time	2	.015	1.28	.29
Subjects X Time	42	.012		

Table 4.50

Means of Office Contacts

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
Experimental	.11	.12	.10	.11
Control	.18	.14	.07	.13
Mean of Means	.14	.13	.09	.12

Hypothesis 4.3 was not accepted. The analysis revealed no significant effects for training ($F(1,21)=0$, $p=.99$) or for time ($F(2,42)=.64$, $p=.53$) at the .05 level. Training X time interaction was also not significant ($F(2,42)=1.36$, $p=.27$). Table 4.51 summarizes the results of the analysis, while Table 4.52 presents the means for training conditions and time periods.

Table 4.52 suggests that the results were not in the hypothesized direction. Experimental subjects had more phone contacts than control subjects at Time 2 and Time 3. While the control group maintained telephone contacts at their pretest level at Time 2, experimental subjects had an increase in telephone contacts from pretest to posttest. Moreover, while the control group had a decrease of

Table 4.51

Repeated Measures of Analysis of Variance of Telephone Contacts[a]

Source	df	MS	F	p
Training	1	0	0	.99
Subjects	21	.012		
Time	2	.004	.64	.53
Training X Time	2	.008	1.36	.27
Subjects X Time	42	.006		

[a] Number of subjects: Experimental = 13, Control = 10

Table 4.52

Means of Telephone Contacts

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
Experimental	.023	.062	.077	.054
Control	.06	.06	.04	.053
Mean of Means	.039	.061	.061	.053

telephone contacts from Time 2 to Time 3, the experimental group had an increase in such contacts.

Supplementary Analysis

Since there were no significant effects for type of training, groups in the two training conditions were combined and those who attended four or more training sessions were compared with subjects who attended three or fewer training sessions (but at least one session). This was done in an attempt to assess the effects, if any, of duration of training on the two groups. In the following discussion, those subjects who attended more than three sessions will be referred to as more cooperative subjects, while those who attended three or fewer sessions will be referred to as less cooperative subjects.

Of the 52 subjects who attended at least one training sessions, 34 or 65 percent were single female heads of households. Seventy-one percent were black, 29 percent were white. These subjects had an age range of 23 to 67 years, with a mean age of 46.36 years. Experience ranged from zero to 21 years, with a mean of 2.51 years, a median of 1.07 and mode of 1 year of experience. Twenty-eight percent had some high school; 25 percent completed high school and 9 percent were college graduates.

The two groups that formed this sample did not differ significantly with respect to age. A *t*-value of -1.33 with

42 degrees of freedom, significant at the .19 level of significance was obtained, when the two group means for age were compared. Similarly, no significant differences were noted with respect to experience (t=.21, df=43, p=.84). More cooperative subjects had a mean of 2.65 years of experience, as compared to one of 2.36 for the less cooperative group.

Since the majority of the less cooperative subjects did not complete scaled measures at pretest, it was not possible to assess the two groups' equivalence with respect to the pretest measures. Only ten less cooperative subjects turned in completed pretest measures. Because archival data were available, however, it was possible to compare the two groups according to placement breakdowns and types of contacts. Table 4.53 summarizes the results of the t-test for these variables.

As can be seen from Table 4.53, a significant difference, favoring less cooperative subjects, was noted in regards to requests for removal. No significant differences at the .05 level were obtained with respect to the other variables.

Chi square analysis of data relating to presenting behaviors of foster children revealed no statistical differences at the .05 level. Table 4.54 to 4.56 summarize the results of these analyses.

Table 4.53

Summary of t-Test Results of Pretest Variables

Scale	df	t-value	p
Removal Requests	49	2.0	.05*
Unrequested removals	49	-.53	.60
Runaways	49	.72	.47
Home contacts	49	-1.21	.23
Office contacts	49	1.87	.07
Phone contacts	49	-.85	.40

*Significant at .05 level

Table 4.54

Chi Square Results for Presenting Problems at Time 1

Presenting Problem	df	X (chi)	p
Minor or no behavior problems	1	.13	.71
Noncompliance	1	.02	.88
Bed wetting	1	.82	.36
Stealing/Lying	1	.02	.90
Truancy	1	0	1
Inappropriate sexual behavior	1	.12	.73
Antisocial	1	.21	.65
Hostile aggressive	1	.23	.63
Emotional disturbance	1	0	1
Other	1	.22	.64

Table 4.55

Chi Square Results for Presenting Problems at Time 2

Presenting Problem	df	X(chi)	p
Minor or no behavior problems	1	.17	.68
Noncomplaince	1	.14	.71
Bed wetting	1	.26	.61
Stealing/Lying	1	.21	.64
Truancy	1	0	1
Inappropriate sexual behavior	1	.33	.57
Antisocial	1	.86	.35
Hostile aggressive	1	.06	.81
Emotional disturbance	1	0	.99
Other	1	.71	.40

Table 4.56

Chi Square Results for Presenting Problems at Time 3

Presenting Problem	df	X (chi)	p
Minor or no behavior problems	1	1.06	.30
Noncompliance	1	2.63	.10
Bed wetting	1	1.41	.24
Stealing/Lying	1	.55	.46
Truancy	1	.02	.89
Inappropriate sexual behavior	1	.62	.43
Antisocial	1	.71	.40
Hostile aggressive	1	.07	.78
Emotional disturbance	1	.26	.61
Other	1	.83	.36

As can be seen from the above tables, the two groups did not differ significantly regarding the presenting problems of the children they fostered.

As was the case for the two previous samples, an analysis of the data relating to the number of children fostered across the time periods was also performed. Tables 4.57 and 4.58 summarize the results of that analysis.

Table 4.57

Repeated Measures of Analysis of Variance of Number of Foster Children[a]

Source	df	MS	F	p
Training	1	3.11	.86	.36
Subjects	49	3.61		
Time	2	3.65	5.23	.01
Training X Time	2	.11	.16	.85
Subjects X Time	98	.70		

Table 4.57 shows that training duration did not differ significantly with respect to the number of foster children the two groups parented ($F(1,49)=.86$, $p=.36$). While there was no significant training X time interaction effect, a significant effect for time was observed ($F(2,98)=5.23$, $p=.01$).

Table 4.58

Means for Number of Foster Children

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
More cooperative	1.70	2.22	2.22	2.04
Less cooperative	1.50	1.83	1.96	1.69
Mean of Means	1.61	2.04	2.10	1.92

Scheffé Post Hoc comparison revealed contrasts significant beyond the .01 level. Differences between the means for Time 1 and Time 2 were statistically significant ($F(2,98)=6.73$, p .01), as were differences obtained in comparing the means for Time 1 and Time 3 ($F(2,98)=9.11$, p .01).

In contrast to the other two samples, analyses of data relating to attendance, amount of material mastered and number of completed assignments, revealed that the more cooperative and less cooperative groups differed significantly with respect to those variables. A t-value of 13.48, $df=50$, $p=.00$ was obtained for attendance. More cooperative subjects attended an average of 5.66 sessions, compared to an average of two sessions for the less cooperative group.

Less cooperative subjects obtained a mean quiz score of .44, while the more cooperative group achieved an average of 2.52. Comparison of the two means produced a *t*-value of 4.49 with 34 degrees of freedom. This value is significant at the probability of .00.

Similarly, significant differences were found between the two groups in number of assignments completed. A *t*-value of 2.60 with 35 degrees of freedom, significant at the .01 level was obtained. More cooperative subjects completed an average of 2.26 assignments, compared to a mean of .20 assignments for the less cooperative subjects.

The analysis of data relating to requested removals revealed no significant effect for training duration ($F(1,47)=2.88$, $p=.10$) or for time ($F(2,94)=1.13$, $p=.33$) at the .05 level of significance. Training X time interaction was also not significant ($F(2,94)=.14$, $p=.87$). Table 4.59 summarizes the results of the analysis, while Table 4.60 presents the means for training conditions and time periods.

Table 4.60 shows that the more cooperative group initiated more requests for removal than the less cooperative group. This pattern was consistent across time, starting at pretesting. A slight decrease was noted for more cooperative subjects while an increase was observed for the less cooperative group from Time 2 to Time 3. While both groups increased their requests for removal from Time 1 to Time 2, the less cooperative group experienced a greater increase than the more cooperative group.

Table 4.59

Repeated Measures Analysis of Variance on Number of Requests for Removal[a]

Source	df	MS	F	p
Training	1	.17	2.878	.096
Subjects	47	.06		
Time	2	.064	1.129	.328
Training X Time	2	.008	.143	.867
Subjects X Time	94	.06		

[a] Number of subjects: More cooperative = 27, Less cooperative = 24

Table 4.60

Mean Number of Requests for Removal

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
More cooperative	.09	.14	.13	.12
Less cooperative	0	.06	.09	.05
Mean of Means	.04	.10	.11	.09

The analysis of data pertaining to unrequested removals revealed no significant effects for training ($F(1,47)=.20$, $p=.66$) or for time ($F(2,94)=.66$, $p=.52$) at the .05 level. Training X time interaction was significant at the .05 level ($F(2,94)=3.59$, $p=.03$). Table 4.61 summarizes the results of the analysis, while Table 4.62 presents the means for cooperation with training over the time periods.

Table 4.61

Repeated Measures Analysis of Variance for Number of Unrequested Removals[a]

Source	df	MS	F	p
Training	1	.005	.20	.657
Subjects	47	.03		
Time	2	.01	.664	.517
Training X Time	2	.059	3.594	.031
Subjects X Time	94	.016		

[a] Number of subjects: More cooperative = 27, Less cooperative = 24

Table 4.62

Mean Number of Unrequested Removals

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
More cooperative	.01	.07	0	.03
Less cooperative	.02	.01	.08	.04
Mean of Means	.014	.04	.04	.03

As can be observed from Table 4.62, the more cooperative group experienced an increase in unrequested removals from Time 1 to Time 2, while the less cooperative subjects experienced a drop in such requests. From Time 2 to Time 3, the more cooperative subjects experienced a significant decrease, while the less cooperative subjects registered a significant increase in unrequested removals. The results suggest that between Time 2 and Time 3, more cooperative subjecs did not have as many children removed from their homes as did less cooperative subjects.

The analysis of data related to runaways revealed no significant effects for training ($F(1,47)=.24$, $p=.62$) or for time ($F(2,94)=.73$, $p=.49$) at the .05 level. Training X time interaction was also not significant ($F(2,94)=.99$, $p=.38$). Table 4.63 summarizes the results of the analysis, while Table 4.64 presents the means for cooperation with training and time periods.

Table 4.63

Repeated Measures Analysis[a] of Variance for Runaways

Source	df	MS	F	p
Training	1	.016	.245	.623
Subjects	47	.065		
Time	2	.023	.726	.487
Training X Time	2	.032	.988	.376
Subjects X Time	94	.032		

Table 4.64

Means for Runaways

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
More cooperative	.085	.122	.033	.08
Less cooperative	.041	.066	.070	.059
Mean of Means	.063	.094	.052	.070

Table 4.64 reveals an increase in runaways from Time 1 to Time 2 for subjects in both groups, with the less cooperative subjects showing a steeper increase. While the number of runaways then dropped for the more cooperative subjects, the less cooperative group experienced another slight increase.

Analysis of data relating to home contacts revealed no significant effects for cooperation with training ($F(1,47)=2.12$, $p=.15$) or for time ($F(2,94)=2$, $p=.15$) at the .05 level of significance. Training X time interaction was also not significant ($F(2,94)=1.56$, $p=.22$). Table 4.65 summarizes the results of the analysis, while Table 4.66 presents the means for cooperation with training and time periods.

As can be seen from Table 4.66, more cooperative subjects had fewer home contacts than less cooperative subjects. The latter group, however, experienced a greater decrease in contacts from Time 1 to Time 2 than the former. While both groups had fewer contacts with agency staff between Time 2 and Time 3, contacts between more cooperative subjects and agency personnel were lower than such contacts for less cooperative subjects.

The analysis of data pertaining to office contacts revealed no significant effects for cooperation with training ($F(1,47)=.47$, $p=.50$) or for time ($F(2,94)=1.35$, $p=.25$) at the .05 level. Training X time interaction was

Table 4.65

Repeated Measures of Analysis of Variance for Number of Home Contacts [a]

Source	df	MS	F	p
Training	1	.973	2.124	.152
Subjects	47	.458		
Time	2	.863	1.936	.150
Training X Time	2	.693	1.555	.217
Subjects X Time	94	.446		

[a] Number of subjects: more cooperative = 27, less cooperative = 24

Table 4.66

Means of Home Contacts

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
More Cooperative	.077	.075	.035	.063
Less Cooperative	.509	.095	.066	.223
Mean of Means	.293	.085	.051	.143

also not significant ($F(2,94)=1.91$, $p=.15$). Table 4.67 summarizes the results of the analysis, while Table 4.68 presents the means for training cooperation and time periods.

Table 4.68 shows that more cooperative subjects experienced a decrease in office contacts while less cooperative ones increased their contacts from Time 1 to Time 2. Both groups showed a drop in number of office contacts between Time 2 and Time 3.

Table 4.67

Repeated Measures of Analysis of Variance for Number of Office Contacts[a]

Source	df	MS	F	p
Training	1	.020	.469	.497
Subjects	47	.043		
Time	2	.021	1.350	.254
Training X Time	2	.030	1.906	.154
Subjects X Time	94	.015		

[a] Number of subjects: More cooperative = 27, Less cooperative = 24

Table 4.68

Means of Office Contacts

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
More cooperative	.150	.115	.080	.115
Less cooperative	.070	.125	.081	.092
Mean of Means	.110	.120	.080	.103

The analysis of data relating to telephone contacts revealed no significant effects for cooperation with training ($F(1,47)=.18$, $p=.67$) or for time ($F(2,94)=.003$, $p=.99$) at the .05 level. Training X time interaction was also not significant ($F(2,94)=.72$, $p=.49$). Table 4.69 summarizes the results of the analysis, while Table 4.70 presents the means for training cooperation and time periods.

As can be seen from Table 4.70, the more cooperative group had an increase in telephone contacts, while the less cooperative group had a decrease in such contacts between Time 1 and Time 2. The reverse was observed between Time 2 and Time 3, when more cooperative subjects had a decrease in telephone contacts, and less cooperative subjects increased their number of such contacts.

Table 4.69

Repeated Measures of Analysis of Variance for Telephone Contacts [a]

Source	df	MS	F	p
Training	1	.003	.184	.670
Subjects	47	.019		
Time	2	0	.003	.997
Training X Time	2	.006	.719	.490
Subjects X Time	94	.008		

[a] Number of subjects: More cooperative = 27, Less cooperative = 24

TABLE 4.70

Mean Number of Telephone Contacts

Training Conditions	Time 1	Time 2	Time 3	Mean of Means
More cooperative	.038	.059	.050	.049
Less cooperative	.070	.047	.058	.058
Mean of Means	.054	.053	.054	.054

In summary, subjects trained in parenting and self-management skills showed no statistically significant changes, when compared to those trained in parenting skills only. Comparison of more cooperative and less cooperative subjects revealed that the former had significantly fewer children removed from their homes after training than did the latter. No other significant differences were observed between the two groups.

CHAPTER FIVE

SUMMARY, DISCUSSION AND IMPLICATIONS

Over the last hundred years, foster family care has become the most widespread and preferred form of substitute family care for children with special needs and others requiring parental surrogates. Youngsters who do not have or cannot remain in their own homes, who would have been placed in institutions 50 years ago, are now placed with substitute families, thus enabling them to remain in their home communities. Children who are being kept out of institutions or those removed from institutions are retained in or returned to the community. Since the parents of these youngsters are for a variety of reasons unable to meet their needs, either temporarily or permanently, child welfare professionals have relied on foster family care to fill the parental void.

As indicated earlier, the increase of youngsters with special needs into the foster family care system has been a source of both challenge and strain for professionals in the field. However, no one bears more of the brunt of the strains and stresses created by such children than foster parents. Traditional foster care for children without

parents has changed to include care for those with ineffective or abusive parents, without concommitant changes in the foster family care system to accommodate the new clientele. Foster parents are expected to function as parental surrogates to children who require therapeutic handling in the form of parental care.

Realization of the new difficulties inherent in the role of foster parents has brought forth a reconceptualization in this role. Foster parents are beginning to be perceived as therapeutic agents who are essential for both the habilitation and rehabilition of youths with special needs.

With this reconceptualization has come a recognition of the need for specialized training for foster parents. Since the 1970s, a great many programs have been developed to provide this special training. The results of evaluative studies of these training programs have been encouraging but inconclusive. Reliance on paper and pencil measures and limitations in the designs of the investigations prevent definitive appraisal of their usefulness. Particularly, these studies do not evaluate training programs with respect to placement-related outcomes. Attitudinal measures and measures of perceptions of change in foster children's behavior tend to be the most common forms of outcome measurement. Placement stability, foster parent turnover, changes in family climate, and contact with agency child

welfare staff have not received sufficient attention as outcome measures. Thus, there is a need for evaluation to assess training programs with respect to placement-related outcomes that have the potential to alleviate or increase the burdens on the family foster care system.

Thus, it was the purpose of this investigation to assess the differential effects of two 16-hour behaviorally oriented foster parent training programs on perceptions of family climate, parenting efficacy, placement stability and dependence on agency staff. One curriculum emphasized child behavior management and self-management skills, while the other concerned only behavior management. Both types of training curricula had been found useful with various parent populations, but they had not yet been compared. The self-management component is designed to train parents in techniques of self-control that will allow them to reduce emotional arousal and thus facilitate the use of behavioral principles in crisis situations.

To evaluate the two curricula, a group X time research design was used. There were two groups and three time measurement points. Measurements were taken prior to training, at completion of training and during a two-week period 60 days after training ended.

Subjects for this research investigation were licensed foster parents affiliated with a child placement agency, who were required to attend training as one of the requirements

for maintaining their license. Assignment to training groups was done on a random basis. Although 98 subjects were assigned to the two training conditions, because of attrition in various forms, results are reported for three subsamples of the sample. These subsamples consisted of (a) subjects who attended four or more training sessions and completed all assessments at the three measurement points and (b) subjects who attended four or more sessions, but completed only pretest and posttest assessment measures. Supplementary results were calculated for (c) subjects who attended four or more training sessions vs. those who attended three or fewer sessions.

While both blacks and whites were represented, the majority of the subjects were black females, who are single heads of households residing in an urban area. Due to the subjects' reluctance to respond to items pertaining to income, it was not possible to ascertain their economic status. The majority of the subjects reported that they had finished high school.

Discussion of Results

Four research questions were formulated for this study, from which ten hypotheses were generated and experimentally tested. The previous chapter presented the results of the analyses pertaining to each hypothesis. In the review of the results in the next section, subjects who completed

measures at all three measurement points are referred to as "follow-up subjects," while those who had completed pretest and posttest measures only are called "posttest subjects."

> Question #1: Does training in parenting and self management skills as compared to training in parenting skills only, lead to improved family environment as perceived by foster parents?

The three hypotheses relating to this question were not accepted. The two curricula did not significantly differ in their effects on the foster parents' perceptions of family climate.

The results for the follow-up subjects did differ, however, from those of posttest subjects. While the results consistently favored subjects trained in parenting only for posttest sample, they were mixed for follow-up subjects. Experimental subjects in the follow-up subsample perceived their family environments as being less cohesive, with less control and lower levels of conflict than did control group subjects. Except for conflict, these results were not in the direction predicted. No change in cohesion was observed from pretest to posttest for experimental subjects, while a drop was noted for control subjects over the same period. Control subjects perceived their families as more cohesive over the time periods, with an increase in perceived cohesion noted after training ended.

Experimental subjects perceived less conflict in their family environments than did control subjects at all three

measurement points. An increase in perceived conflict was noted after training, but this leveled off in the two-month period between completion and follow-up. Control subjects, on the other hand, maintained their pretest scores at posttest, but perceived greater conflict in the time between completion of training and follow-up.

Both groups suffered a drop in perceived control from their pretest scores, but the control group perceived more control than did experimental subjects. Both groups increased in perceived control after training, although the increase favored control group subjects.

Experimental subjects in the posttest subsample consistently scored lower than control subjects on all measures of family environment after training ended. Experimental subjects perceived their family environments as less cohesive and more conflictual, with less control than did control subjects.

The above results suggest that training in parenting and self-management skills, as compared to training in parenting only, does not lead to more positive perceptions of family climate.

> Question #2: Does training in parenting and self management skills, as compared to training in parenting skills only, lead to an increased sense of parenting efficacy in foster parents?

The hypothesis generated by this question was rejected. No significant changes in perceived parenting efficacy were observed between the two groups. Experimental subjects in the follow-up subsample consistently improved on their pretest score, while the control group varied after pretest. An improvement on pretest mean score was observed at the end of training, while a decrease was noted two months following training.

The results for the posttest subsample varied from those of the follow-up subjects. Control group subjects posted an increase in sense of parenting efficacy, while experimental subjects experienced a decrease.

These findings suggest that training in parenting and self-management skills, as compared to training in parenting only, does not lead to significant changes in foster parents' sense of parenting efficacy.

Question #3: Does training in parenting and self-management skills, as compared to training in parenting skills only, lead to fewer placement breakdowns?

The three hypotheses that were generated by this question were rejected. It was hypothesized that experimental subjects would make fewer requests for removal of foster children from their homes, have fewer children removed by agency personnel and have fewer children running away from their homes than would control group subjects.

The results were contrary to those expected for both subsamples. Except for requests for removal, for which results varied, control subjects did better in retaining their foster children than did experimental subjects. Training groups in both subsamples made increased request to have foster children removed while in training. While the experimental groups in both subsamples slightly increased their requests, the control groups made more numerous requests. In the time period that followed the end of training, the opposite was true. Experimental groups made relatively more removal requests than control subjects. A significant time effect for unrequested removals was noted for the follow-up subjects. Both training groups in that subsample experienced an increase from pretraining scores that was followed by a decrease after completion of training. It is unclear at this time as to what was responsible for the significant time effect.

Since none of the observed differences between training conditions were significant, it appears that training in parenting and self-management skills, as compared to training in parenting skills alone, does not lead to greater placement stability.

Question #4: Does training in parenting and self-management skills, as compared to training in parenting skills only, lead to fewer contacts with agency staff?

The hypotheses based on this question were not confirmed. It was hypothesized that experimental subjects would have fewer home visits, office contacts and problem-related telephone contacts after training than the control group. As has been the case with the previous results, control subjects in both subsamples did better than the experimental group, with the exception of number of office contacts. Experimental subjects in the "follow-up subsample" had fewer office contacts during and after training than did the control subjects. The situation was slightly different for the "posttest subsample." The control subjects had more office contacts during training than they did afterwards, while the experimental group had more contacts after than during training.

Based on these results, it would appear that training in parenting and self-management skills, as opposed to training in parenting alone, does not lead to decreased dependence on agency staff.

Discussion

The lack of any significant training effect cannot be explained merely by relative inefficacy of the experimental training in producing the hypothesized changes. In spite of efforts to control for extraneous variables and reduce the probability for alternative explanations, the results of this investigation defy explanation on the basis of the

relative strength of the two training conditions. Several other factors relating to subject selection, intergroup homogeneity, attrition, training implementation, and dependent measures compete for the explanation of the obtained results.

The relatively high level of attritioin may have affected the equivalence of the training groups. The analysis of the data relating to deviant behaviour presented by foster children showed that the two groups of the "follow-up" subsample differed significantly on one variable at Time 2 and on two variables at Time 3. Results for the "posttest" subsample indicated that the two groups differed on two variables at Time 2 and on one variable at Time 3. While these results may have been due to chance because of the number of statistical tests conducted, they cannot be discounted entirely. In addition, there are reasons to think that the two groups may not have been equivalent with respect to interest in training. Control group subjects scored higher on classroom quizzes, completed more homework assignments and were perceived as more receptive by trainers than subjects in the experimental groups. Although these findings were not significant, they cannot be ignored in evaluating the results, for classroom quizzes and homework assignments afforded subjects the opportunity to receive feedback on their application of the principles and techniques that were taught. Interestingly, experimental

subjects, in the follow-up subsample, reported using the skills they learned more frequently than the control group, but with less satisfaction with their results. In short, attrition may have interacted with the selection process, to produce training groups that may have differed in their receptiveness to the training.

In addition to selection, intergroup homogeneity also needs to be considered in assessing the results of this investigation. It was observed that parents in the experimental groups tended to introduce nonrelevant topics into training sessions more often than control subjects and were less willing to participate in interactional exercises in the classroom that entailed engaging in some degree of introspection and self-examination. It is quite probable that the experimental subjects' behaviors were attempts to avoid participation in such exercises in a public forum prior to establishing some sense of trust with the trainers and other subjects.

Difficulties encountered in implementing training suggest that the time used for training may have been insufficient. Time difficulties stemmed from several sources. The agency and foster parents appeared to function in a state of almost continual crisis, resulting in frequent interruption of training sessions when agency personnel needed to speak to subjects. Subjects were pulled out of

training sessions, for a variety of reasons, which took time away from training.

Absenteeism also depleted the time allocated for training. Missed sessions frequently required repetition of previously covered material, reducing the time available to cover new concepts and practice new skills.

Another problem was some subjects' introduction of nonrelevant topics. This angered other subjects and may have contributed to poor attendance, as well as depleting training time. Nonrelated topics tended to concern controversial agency policies or irritation and anger with agency staff.

The loss of training time is suspected to have had more negative effects on experimental than control subjects, since the former group had to cover more material within the same amount of time. It is possible that this situation affected experimental subjects' ability to master and integrate the information.

A fourth factor that contributed to the loss of training time was related to the trainers' lack of knowledge of the learning style of predominantly black, low S.E.S., urban foster parents. While all of the trainers were sufficiently well versed in the concepts and techniques that were taught, they lacked experience in how to adapt their material to the needs and mode of learning of the majority of the parents. This situation may ahve contributed to the

difficulties they encountered in getting parents to focus on training-related issues.

A fifth factor that may have affected the results was reading and writing ability. Performance on classroom quizzes and written exercises suggested that many subjects in both training conditions had difficulties with reading and writing. The superior performance of control subjects on classroom quizzes and homework assignments suggests that these subjects may not have been as affected by inadequate reading and writing ability as they experimental subjects.

Apart from implementation difficulties, the dependent measures used may have contributed to the lack of any statistically significant findings. Subjects were very careful and cautious in completing the scaled measures. Many expressed concerns about being misunderstood and misperceived. Since the desirable responses could be easily recognized, it is quite possible that social desirability may have affected subjects' responses.

Another factor that may have affected the results was staff turnover at the agency. After the end of training, the agency's staff changes seemed to affect recorded information. It was observed that recent reports in the files were shorter and tended to have less pertinent information than those prior to the end of training. In light of this, the significant time effect observed for unrequestd removals and the overall tendency of the results,

based on archival data, to improve after training ended may be more of an artifact of insufficient information than the effect of the combined training curricula over time.

In summary, it would appear that the answers to the research questions posed by this investigation cannot be answer conclusively. The many competing explanations that have been discussed suggest the results of this study may have been affected by factors other than the training curricula.

Supplementary Analysis

Since no statistical significant changes were found for the two training conditions, subjects in the two training conditions were aggregated in one group and compared to foster parents who had attended less than four sessions.

While these two groups did not differ significantly with respect to the severity of behavior problems confronting them, nor in the number of children under their care, the more cooperative group had more requests for removal at pretest, significant at the .05 level of significance, than the less cooperative group. Another result that was significant at the .07 level of significance, in favor of the more cooperative group, was number of office contacts. More cooperative subjects had more office contacts than less cooperative subjects. This would seem to suggest that foster parents who did not

drop out of training may have been experiencing more difficulties with their children. This assertion is in agreement with the observation that parents who tended to participate in training were motivated to do so partly by the difficulties presented by their foster children (Boyd & Remy, 1978).

No statistically significant differences were noted in requests for removal, unrequested removals, runaways, home visits, office contacts and telephone contacts. A significant group X time interaction was obtained for unrequested removals ($F(2,94)=3.59$, $p=.03$). While more cooperative subjects experienced a significant drop in number of foster children removed from their homes, the less cooperative group experienced a significant increase in such incidents. Before training ended, however, more cooperative subjects experienced a relatively higher number of such incidents than less cooperative group. It is suspected the group X time interaction reflects the rotation of difficult children across the two groups. According to agency personnel, approximately ten percent of their difficult foster children move from home to home until no home is suitable for them.

Implications for Future Research

The results of this investigation indicated that the two training curricula did not statistically differ with

respect to their effects on family climate, sense of parenting efficacy, placement stability and dependence on agency personnel. These findings, however, are far from being conclusive. Several factors appear to provide competing explanations for the results. A replication of this investigation is indicated.

In replicating this investigation, it is suggested that arrangements be made to test all family members on the measure assessing family climate. The lack of research personnel prevented the application of that procedure in this investigation. A measure of family functioning which includes the scores of all family members is more likely to reflect training-related changes than a measure of only one person's perceptions.

Longer time periods are also recommended for future replications. Archival data gathered over longer time periods are less likely to be influenced by cyclical changes in staff than data collected over relatively short periods of time. A time period of six months would allow the data to average and stabilize. Using a larger number of subjects would also be helpful.

In view of the difficulties encountered with data collection at follow-up, it is advisable to have examiners who are part of the research team or to rely on paid personnel. Employee volunteers tend to experience priority

conflicts, which are resolved to the detriment of research objectives.

More important, however, the implementation of the training programs has pointed out the need for training curriculum to be adapted to the learning styles of individuals from lower social economic backgrounds. The increasing reliance on women from the lower classes to fill the needs for foster parents suggests that more attention be paid to the development of such programs.

Future programs need to include components that pertain to the resolution of conflict between foster parents and agency staff. In addition, it is suggested that future training curricula also involve the participation of agency staff.

Appendix A

APPENDIX A

FOSTER PARENT PROFILE QUESTIONNAIRE

Name _____
Address _____
_____
Phone _____

Directions: Please fill out this form as completely as possible

1) Total Years as Foster Parents ___ Total Number of Children Fostered ___

2) Husband's Present Age ___ Wife's Present Age ___

3) Husband's Occupation _____ Wife's Occupation _____

4) Husband's Religion _____ Wife's Religion _____

5) Husband's Race _____ Wife's Race _____

6) Husband's Education (Check One): Wife's Education (Check One):

__Post Graduate Degree
__College Degree
__Some College
__High School Graduate
__Some High School
__Completed 7th grade but less than 9th
__Completed less than 7th grade

__Post Graduate Degree
__College Degree
__Some College
__High School Graduate
__Some High School
__Completed 7th grade but less than 9th
__Completed less than 7th grade

7) Family Income (Check One): (Estimated where exact information is not available)

__Under $5,000
__$ 5,001 to $ 7,000
__$ 7,001 to $ 9,000
__$ 9,001 to $12,000
__$12,001 to $15,000
__More than $15,000

8) Please indicate the appropriate group for you. (Check one space in each column)

	Husband	Wife
a) Indian	_____	_____
b) Spanish-American	_____	_____
c) Black	_____	_____
d) White	_____	_____
e) Other: please indicate	_____	_____

9) Type of neighborhood you live in (Check one)

a) ____ Farm area

b) ____ Small town (1,000 or less)

c) ____ Large town (1,000 to 15,000)

d) ____ Small city (15,000 to 50,000)

e) ____ Large city (50,000 and above)

10) Type of housing (Check one)

a) ____ Single dwelling

b) ____ Apartment

c) ____ Other (please specify) _____

11) Is your home considered to be . . . . . (Check one)

a) ____ Regular foster home

b) ____ Foster family group home

c) ____ Shelter or emergency home

d) ____ Pre-adoption home

e) ____ Other (please specify)

12) How many children of your own (natural or/and adopted do you have?

a) ____ Boys Ages _____

b) ____ Girls Ages _____

c) ____ Number of boys still living at home

d) ____ Number of girls still living at home

13) How many foster children do you have presently living at home?

a) _____ Foster boys

b) _____ Foster girls

14) What are the ages of your foster children? What are their races? What are their religions? Ans how long has each been living with you (months, years)?

	Age	Race	Religion	Length of time with you
a) Boys:	___	___	_____	_____
	___	___	_____	_____
	___	___	_____	_____
	___	___	_____	_____
	___	___	_____	_____
b) Girls:	___	___	_____	_____
	___	___	_____	_____
	___	___	_____	_____
	___	___	_____	_____
	___	___	_____	_____

15) Altogether, how many years have you been foster parents? _____

16) Altogether, how many foster foster children have you had live with you (i.e., past and present)?

a) ____ Foster boys

b) ____ Foster girls

17) Which of these age ranges have you most enjoyed fostering? (Indicate one only.)

a) ____ Under two years old

b) ____ Pre-school over two years old

c) ____ Ages 6 to 12

d) ____ Teenagers

18) Please indicate which of the following types of children have been placed in your home: Check any which apply)

a) _____ Mentally retarded

b) _____ Physically handicapped

c) _____ Delinquent

d) _____ Emotionally disturbed

e) _____ Abused and neglected

f) _____ No experience with these types of children

19) How rewarding have you found the experience of being a foster parent? (Check one).

a) _____ Generally, very rewarding

b) _____ Generally, moderately rewarding

c) _____ Generally, seldom rewarding

d) _____ Generally, not rewarding at all

20) In the last year, how many different foster home case workers have been assigned to your home?

Indicate Number _____

21) During the average month, about how many contacts do you have with the foster home case worker assigned to your home? (Indicate number of each type.)

a) _____By phone

b) _____By visits in your home

c) _____By visits to the agency's office

d) _____Other _____

22) Please indicate your overall satisfaction with the service you have been receiving from your agency. (Check one.)

a) _____ Generally, very satisfied

b) _____ Usually satisfied

c) _____ Usually dissatisfied

d) _____ Generally, very dissatisfied

Appendix B

APPENDIX B

MOOS FAMILY ENVIRONMENT SCALE

The following is a list of statements about families. You are to decide which of these statements are true of your family and which are false. If you think the statement is True or mostly True of your family, circle T (True). If you think the statement is False or mostly False of your family, circle F (False). Give us your overall impression of your family as it is now, not necessarily as it may have been, but rather the way things are now. The people you leve with may or may not be blood relatives, but for the purpose of these questions, consider anyone you live with to comprise your "family".

		TRUE	FALSE
1.	Family members really help and support one another.	T	F
2.	We fight a lot in our family	T	F
3.	Family members are rarely ordered around	T	F
4.	We often seems to be killing time at home	T	F
5.	Family members rarely become openly angry	T	F
6.	There are very few rules to follow in our family	T	F
7.	We put a lot of energy into what we do at home	T	F
8.	Family members sometimes get so angry, they throw things	T	F

9.	There is one family member who makes most of the decisions	T	F
10.	There is a feeling of togerther-ness in our family	T	F
11.	Family members hardly ever lose their tempers	T	F
12.	There are set ways of doing things at home	T	F
13.	We rarely volunteer when something has to be done at home	T	F
14.	Family members often criticize each other	T	F
15.	There is a strong emphasis on following rules in our family	T	F
16.	Family members really back each other up	T	F
17.	Family members sometimes hit each other	T	F
18.	Everyone has an equal say in family decisions	T	F
19.	There is little group spirit in our family	T	F
20.	If there is a disagreement in our family, we try hard to smooth things over and keep the peace	T	F
21.	We can do whatever we want to do in our family	T	F
22.	We really get along well with each other	T	F
23.	Family members often try to one-up or out-do each other	T	F
24.	Rules are pretty inflexible in our household	T	F

25.	There is plenty of time and attention for everyon in our family	T	F
26.	In our family, we believe you don't ever get anywhere by raising your voice	T	F
27.	You can't get away with much in our family	T	F

Appendix C

APPENDIX C

FOSTER PARENT PARENTING EFFICACY SCALE

Listed below are a number of statements about the experiences of foster parents. Circle the number that best describes how you feel.

1. Strongly Disagree
2. Disagree
3. Agree
4. Strongly Agree

		SD	D	A	SA
1.	The problems of taking care of a foster child are easy to solve once you know your actions affect the child.	1	2	3	4
2.	It is difficult to be a foster parent because you seldom know whether you are doing a good or a bad job.	1	2	3	4
3.	I believe I can adequately handle the behavioral problems presented by foster children under my care.	1	2	3	4
4.	I feel I am successful most of the time when I try to get my foster children to do or not to do something.	1	2	3	4
5.	Since I seldom snow what my foster children will do, I usually feel tense and anxious.	1	2	3	4
6.	Even though being a foster parent could be rewarding, I feel frustrated in my efforts to help my foster children.	1	2	3	4
7.	There are times when I feel I cannot be helpful to my foster children.	1	2	3	4
8.	If I don't consult my caseworker or therapist, I don't know what to do when my foster children misbehave.	1	2	3	4
9.	Since becoming a foster parent, I go to bed feeling I have not accomplished a whole lot.	1	2	3	4
10.	Being a foster parent is harder than I expected	1	2	3	4

Appendix D

APPENDIX D

UTILIZATION AND USEFULNESS SCALE

For each of the questions below, choose the answer that best describes your experiences with the parenting techniques that you learned in training.

1. How often have you used the parenting skills taught in training in interacting with your foster children since training ended?

   A. All of the time
   B. Most of the time
   C. Some of the time
   D. None of the time

2. How often have you found these techniques useful?

   A. All of the time
   B. Most of the time
   C. Some of the time
   D. None of the time

Appendix E

APPENDIX E

FOSTER PLACEMENT INFORMATION SHEET

Name of parent -

Name of examiner -

Directions: List the presenting problems experienced by each foster child in the foster home at the time of his placement.

Foster child 1 presenting problem(s) _____

_____

Foster child 2 presenting problem(s) _____

_____

Foster child 3 presenting problem(s) _____

_____

Directions: Record the number of times each of the incidents listed below occurred in the last 2 months.

1. # of requests for removal of foster child _____

2. # of unrequested removals _____

3. # of foster child(ren) who ran away _____

4. # of home contacts _____

5. # of office contacts _____

6. # of telephone contacts _____

Appendix F

APPENDIX F

Test # 1

NAME _____

DATE _____

Choose the best answer from among the choices given for each question.

1. A 3 year old child has been crying and has been irritable all morning. You notice that the child has quieted down and is playing with a toy. What is the best thing for you to do?

   a. Ignore the child as he may start crying and fussing again, if you say anything to him.
   b. Tell him you will take the toy away if he starts acting again.
   c. Tell him you are pleased with his behavior since he is playing quietly.
   d. Tell him you are surprised that he is playing quietly because he has been so bad that morning.

2. "Behaviors are maintained by their consequences" means:

   a. Consequences are not related to behaviors.
   b. Changing consequences will not change behaviors.
   c. A parent may help a youth change his behavior by applying positive or negative consequences.
   d. Nothing to me.

3. Reinforcement is:

   a. A reward that is given after a child or youth has produced the desired behavior.
   b. Any gifts or presents that a foster parent gives to a child or youth.
   c. The act of taking something away from a youth.
   d. A reward given before the youth has produced the desired behaviors.

Test # 2

NAME _____

DATE _____

Choose the best answer from among the choices given for each question.

1. You obsreve that each time you tell your 15 year old foster youth it is his turn to do the dishes, both of you become involved in an argument that usually leaves you frustrated and angry and the dishes undone. What is the best thing for you to do?

   a. Tell the youth you will have him removed from your home if he does not do the dishes as everyone else.
   b. Tell the caseworker/therapist and let him handle the problem.
   c. Set a specific time period by which the dishes should be done and give the youth the choice of earning a positive or a negative consequence depending of his behavior.
   d. Do the dishes yourself and save yourself further aggravation.

2. Which of the following is an example of the proper way to use extinction?

   a. You consistently ignore the foster youth whenever he swears but pay attention to him when he does not swear
   b. You ignore the youth completely as if he no longer existed.
   c. You ignore the swearing behavior but tell your husband to punish the youth.
   d. You tell the youth you will wash his mouth with soap.

3. Which type of consequences is most helpful in teaching a youth a new behavior:

   a. Negative consequences
   b. Positive consequences
   c. Ignoring
   d. Yelling for not doing the right thing.

4. A teenage foster child has gotten into your favorite perfume without permission and accidentally broke the bottle. What is the best thing for you to do?

   a. Lecture to her about respect of other people's property for an hour.
   b. Break a favorite belonging of hers to show her how it feels to have her property ruined.
   c. Ground her for one month with no special privileges.
   d. Have her clean up the mess and replace the perfume out of her allowance money.

Test # 3

NAME _____

DATE _____

Choose the best answer from among the choices given for each question.

1. When the child fulfills the behavioral contract, you should always:

   a. Rip up the contract.
   b. Write another contract.
   c. Give the negotiated reward with praise.
   d. Ask what reward the child wants at that time.

2. Jill is a 14 year old girl who her foster mother describes as lazy and disobedient. In an effort to get Jill to do her work, her foster mother developed a contract with her in which she would get a sweater she has been wanting if she can be good for two weeks. Although Jill really wants the sweater and promised to be good, there was little change in her behavior. Why didn't this contract work?

   a. Jill did not really want the sweater.
   b. Jill needed to be punished for each day that she was not a good girl.
   c. Jill needed to know what specific behavior her foster mother wanted and needed to be rewarded on a daily basis for each behavior that she changed to please her foster mother.
   d. Jill will always be lazy because her natural mother was lazy and did not teach Jill how to obey society's rules.

3. If the child misbehaves while under the terms of the contract, you should always:

   a. Rip up the contract and forget about any negotiated rewards.
   b. Write a new contract since this one was not effective.
   c. Add a new condition to the behavioral contract.
   d. Deliver the consequences in a matter-of fact tone, with very little lecturing on scolding.

4. Contingency contracting is a situation in which:

   a. The parent writes a contract to change a child's behavior.
   b. A legal and binding contract which is signed by two persons.
   c. The parent and child decide together on the terms of behavior change in the contract.
   d. A contract is ripped up and is no longer binding.

Appendix G

APPENDIX G

TRAINER'S MANUAL

Session I

Materials Needed

1. Blackboard
2. Chalk

Goals:

1. discuss the need for specialized parenting training (10-15 minutes).
2. show that behaviors are maitained by their consequences (20 to 30 minutes).
3. make parents aware of the importance of modeling (5 to 10 minutes).
4. introduce and define the concept of reinforcement (20 to 30 minutes).
5. specify conditions optimizing the effectiveness of reinforcers (20 to 30 minutes).
6. explain homework assignment (5 minutes).

Sequence:

1. State the goals verbally and write them on the board. Do not encourage prolonged discussion of goals at this time. Tell participants each goal will be dealt with in this session. Say the following:

> Child rearing is not new to most of you. Many of you have a great deal of experience in that area and are very skilled parents. Each of you has discovered a way to raise children and has become good at it. All of you have foster parenting experiences. What similarities do you see between parenting natural and foster children.

For those foster parents who have never had children, ask them to describe their experience as foster parents in light of what they expected when they decided to become foster

parents. Allow time for the parents to respond. Acknowledge parents' contribution by a nod or a paraphrased statement. List parents' statements on the board. Avoid judgemental responses such as that's good or bad. Once the participants have exhausted the subject, ask about differences they have observed in the two groups of children. What are the similarities and differences between the two parental roles. List participants' ideas on the board. If the following points are not brought up in the discussion, introduce them.

a. Many foster children who have been placed require more time and effort.

b. Many have not had the opportunity to learn more desirable behaviors.

c. Many foster parents have expectations that may be too high for their foster children.

d. Foster parents' authority is limited and parental role is temporary.

Explain: Foster parents function under the supervision of the State via the placement agency and as a result, may not be able to use techniques that have worked with their own children. i.e. corporral punishment.

2. After it is clear that foster children's needs are different from those of natural children, state:

> There are ways of raising children with problematic behaviors that have been found helpful. Before we go any further, we need to establish some common ground. We need a common language and understanding. What I mean is some basic understanding of how we acquire behaviors. If we are to be effective in influencing behaviors, it would be helpful to know something about how we come to behave the way we do.

Read the following situations

a. Kevin, a 7 year old boy, is screaming his lungs out in the local supermarket because his mother would not give him a chocolate bar. Kevin's mother, distraught over his behavior, gives him the chocolate bar to stop him.

What is Kevin likely to do next time his mother refuses to give him a chocolate bar?

b. Pamela, a 14 year old girl, wants her parents to buy her a pair of designer jeans. Her parents explained to her that they are unable to buy them for her as the family budget was in a state of crisis. Pamela became furious and told her parents she wouldn't speak to any of them until they have bought the jeans. After a week of not talking to her parents, Pamela's father, in spite of the mother's objection bought Pamela the desired Jeans.

What would happen to Pamela's behavior toward her parents when she wants something?

c. Kevin is screaming his lungs out because his father would not give him a chocolate bar. His father spanked him to stop him.

Same question as above. Ask clients to share similar experiences with the group. Explain that just as we are able to influence the behavior of our children, they are equally able to influence our behavior toward them. Read the following:

d. Marylou bought a toy for her foster son Bill. At the sight of the toy, Bill jumps up and hugs Marylou.

How would that influence Marylou's gift giving behavior to Bill? How might Marylou feel toward Bill?

e. Marjorie buys a toy for foster daughter. When she gives her the toy, she acts casually, as if to say so what, what do you want? a star?

What effects would the foster daughter's behavior have on Marjorie's gift giving behaviors with respect to the foster daughter? Ask parents to share similar experiences. Conclude by stating that <u>behaviors are maitained by their consequences</u>. If these are thought to be good or rewarding, behaviors that precede them will increase. When consequences are seen as negative or non rewarding, behaviors that precede them will decrease.

3. The discussion dealt with how behaviors are maintained and not how they are acquired. Ask group to think about how they learned the things that they learned. If they don't bring up modeling, state:

> a great many of the behaviors we have in our repertoire were acquired by observing other people.

Read the following example:

> Foster parents scream at foster child for misbehaving. Later in the week, foster child screams at foster brother for playing with his toys.

Pause (15 sec.) - discuss example - ask for other similar experiences. Then state:

> Modeling allows us to acquire new behaviors quicker. Parents should always model the desired behavior as part of any behavioral intervention. This tells the child what is expected and provides him with an opportunity to acquire new skills.

Conclude by making the points that:

1. behaviors are acquired through modeling.
2. consequences associated with acquired behaviors determine whether or not, and under what conditions behaviors will be displayed.

3. the likelyhood of repeating an exhibited behavior.

4. Move to goal #4.

We have been talking about consequences. Now it is time to be more specific about what consequences are. Consequences are behaviors that are produced in response to another behavior.

Pause (15 sec.)

If we let a child watch television an extra hour at night for putting out the garbage at 7 o'clock each evening, watching television an extra hour is a consequence of his behavior, just as putting out the garbage on the agreed time is a consequence of our behavior of letting him watch television an extra hour. The two behaviors are reciprocally determined.

P⟷C

Parents' behavior affects child's; child's behavior affects parents'.

Pause: discuss

A consequence that increases a behavior is called positive reinforcement. It is the same as reward. In effect, a positive reinforcement is a reward. It has the effect of increasing the probability that the behavior preceding the reward would be repeated.

There are several types of reinforcement

a. Social reinforcement: verbal praise, smiles, hugs, touching.

   Jim, your 14 year old son, has sheveled the snow on the sidewalk in front of your house without being asked. When you run into him later in the day, you say to him "that was quite a job, Jim, thanks".

b. Extra privileges: staying up late, playing with parents, using the family car.

c. Rewarding activities which the child enjoy, but seldom has the opportunity to participate in: movies, skating, etc. or using positive activities to reward less probable ones.

d. Tokens, points, stars, when combined with back up reinforcers. These may be any of the reinforcers.

Jane, your 16 year old, has cleaned her room everyday, has done the dishes and the laundry as promised. For each chore, she received a specified number of points. At the end of the week, the points are tallied and she is given an extra $5 in addition to her allowance, so she could buy a present for her boyfriend.

e. Tangible rewards: snacks, toys, books, allowance, etc.

Pause. Ask for questions, thoughts, ideas, as ways of assessing participants' understanding. Then state:

Another type of reinforcement that also increase behaviors preceding it is negative reinforcement. Negative reinforcement occurs when parents remove a child from a punishing situation or remove the punishing consequences before they have been effective in reducing the problem behavior.

Read the following:

Sue, a 16 year old, did not do her chores as she agreed in the contract she negotiated with her parents. Her privileges to stay out until 11 PM on friday and saturday were cancelled in accordance with the contract. Sue, who had promised her boyfriend to go the rock concert with him, became despondent when her mother told her she would have to be home by dinner time (6PM) on friday and saturday to make up for the chores she didn't do by working on some previously agreed task. Sue became agitated and started screaming "it is not fair, you can't do this to me, you are just being mean". She went to her room, came out a few minutes later and yelled to her foster mother: "if it's blood you want, you -----, I'll give you blood, I'll kill myself if I don't go to the concert tonight". Sue's foster mother became very concerned and after a few minutes of silence said to Sue "well I guess nothing is worth your life, go ahead, but you'll have to do twice as much work tomorrow".

Pause (15 sec.)

By removing the consequences that were attached to f failing to do her chores, her foster mother has negatively reinforced Sue's use of threat and not doing

her chores. It can be expected that whenever the foster mother attempts to get Sue to carry out her agreement she will resort to threat.

Encourage participants to share similar experiences. Explain that the experiences do not have to be as melodramatic. This one was used to illustrate a point. Pause (30 sec.) before going to nest section.

Why is reinforcement important?

a. Because by reinforcing desirable behaviors, we diminish the opportunity for undesirable behaviors to occur. Since desirable and undesirable behaviors are incompatible, increases in desirable behaviors automatically leads to a decrease in undesirable behaviors.

b. Many parents spend more time interacting with their children when they exhibit undesirable behaviors than when they engage in desirable ones. How many of you have "caught your children being good". Since parents' attention to undesirable behaviors may increase their occurrences instead of decreasing them.

c. By using reinforcement, parents acquire reinforcing value for the child.

5. How to use positive reinforcement.

a. Determine what is rewarding to the child. This can be done by observing his behavior or by asking him. To think something will be rewarding for him because it is for you is to deny the individuality and the feelings of the child. Moreover, it will not work.

A husband asked his wife what she wanted for her birthday, she replied that she wanted a bouquet of roses. The husband shocked, retorted "what can you do with roses" to himself and decided to buy a microwave oven. On the day of her birthday, he happily presented her with the gift. To his dismay, she became sad and started to cry saying "I thought you cared for my feelings".

b. Tell the child exactly what he has to do to earn the reward. In another chapter we will teach you how

to be specific in your behavioral requests.

c. Don't set goals too high. Always start slightly below the child's ability. If a child swears at least once every hour, positive reinforcement will have no effect on his behavior if he is to be rewarded for not swearing for an entire day. Start by rewarding him for every hour that he does not swear, then gradually increase the time.

d. Be consistent. Reward each desirable behavior.

e. Reinforce immediately unless a point system is being used. With small children, always reinforce immediately.

f. Give appropriate amount of reinforcement.

g. Reinforce the desired behavior every time when attempting to increase its occurrence.

h. Always combine verbal messages that emphasize the child's accomplishment when delivering non verbal reinforcers.

   You are really working hard at not swearing; look at all the points you have earned.

i. Once desired behavior becomes a habit, gradually phase out reinforcement.

6. Homework

Before telling parents about the homework, ask them to state how often on the average they reinforce and reprimand their foster child in a day. Record the number of reinforcements and reprimands for each parent. Introduce homework assignment by saying:

> there is usually some discrepancy between what we think we do and what we actually do, there fore, in order for us to know for sure, it is best that we observe and record our own behavior.

Hand out the homework sheets (handout #1). Tell parents they are to put an O each time they reinforce their child,

and an X each time they reprimand him. Ask parents with more than one foster children to choose the one they find most difficult to handle. Tell parents to bring the form with them to the next session. Suggest that occurrences of either behavior should be recorded right away.

Session II

Materials Needed

1. Blackboard
2. Chalk

Goals:

1. review homework and discuss parents' reactions (10 minutes).
2. establish guidelines for selecting a target behavior (20 minutes).
3. train parents in pinpointing target behaviors (25 minutes).
4. train parents to observe and record target behaviors (30 minutes).
5. train parents to graph occurrences of target behaviors (25 minutes).
6. explain homework assignment (10 minutes).

Sequence

1. Review homework and discuss parents' reactions. The important point here is what was learned from the experience. Say the following:

> In order to influence the behavior of our children, we need to be aware of how we generally respond to them. As parents, we function as models to our children. The more we know about our behavior toward our children, the more control we can have over the behaviors we display toward them.

Remind parents that behaviors are maintained by their consequences and as parents they exert control over a wide range of reinforcers. Avoid lecturing, the previous thoughts are suggestions around which to structure the discussion generated from reviewing the homework assignment.

2. Some guidelines for choosing problem behaviors. State

> Before we can help a child change his behavior, we need to know which behavior we would like him to eliminate and more important which one we would like him to learn. In order to do that in a way that is fair to the child and conducive to his growth and development, we need some guidelines to help us decide which behaviors need to be eliminated.

Ask for suggestions; pause (15 sec.); discuss suggestions.

Say and write on board: here are some guidelines

a. Behaviors that are destructive of the child and of others. i.e. aggressive behaviors, fire setting, stealing.

b. Behaviors that are important for the long range general functioning of the child. i.e. education, employment, social interaction.

Point out that foster parents need to refrain from inducing foster children to change behaviors that are not in agreement with the parents' religious convictions or their view of what is appropriate behaviors when these in no way detract from the social/psychological functioning of the child and present no danger to the child and others. Examples of such behaviors include: child's refusal to go to church, clothing preference, hair style and the like. Encourage parents to verbalize their views. Do not attempt to persuade. Play the role of facilitator, once the point has been made. The purpose in bringing that issue is to sensitize foster parents to the rights of their foster children and establish some limitations on their use of behavioral technology. Trainer may want to state that the foster child's stay is not permanent; he will be returning to his home. To attempt to

change everything about the child would probably result in more problematic behaviors. Such attempt may cause the child to experience a need to retain a sense of his identity by defying his foster parents' efforts through increased display of negative behaviors (i.e. noncompliance, running away). Point out that this is very important to keep in mind when dealing with all foster children, especially adolescents. Be careful not to lecture. Bring the point up only if none of the participants brought it up. Be reflective in your responses as opposed to persuasive. Trainer may ask participants how would they feel if someone were to try to change everything about them? What kind of messages would they get? Is it possible that they might resent such attempt? Is that in some way similar to telling the child he is all bad and hasn't got anything good to keep? Do not provide any answers to these questions, let the parents react to them. Accept responses.

3. Choosing and defining a target behavior.

Selecting and defining target behavior is best done in positive terms. Remind participants that many foster children carry with them a history of negative experiences.

> By defining target behavior in positive terms, the child is more likely to earn rewards or reinforcements as opposed to negative consequences. Although it is probably the negative behaviors that will catch your attention at first, with a little effort, you can train yourself to thind of an incompatible behavior that can replace the negative one.

Pause (15 sec.); for reaction to above statement. Do not

rush this point. State:

> Always select a behavior that can be counted. If it can be counted, it can be specific and thus can be recorded reliably. This is very important because it allows both parents and children to know exactly what is expected and to determine objectively when and how often the target behavior occurs.

Write on board

Target behaviors:

a. are best described in positive terms

b. must be specific so that they can be easily counted.

Exercises.

Go over Burchard and Leitenberg's list of translated negative behaviors (p. 114-115 of the Vermont Foster Parent Training Program Trainers Manual).

Ask parents to make a list of problem behaviors. Practice the following.

a. state each behavior in specific terms.

b. identify a positive incompatible behavior.

Joey is hyper

Use own examples if available. If not, go with the following. The word hyper could mean several things. When expressed in specific terms, it could be interpreted to mean that Joey:

a. has moved from one place to another twenty times in one hour with no clear purpose.

b. is involved in more than one thing at a time.

c. turns the television dial six times in 15 minutes.

The desired behaviors to replace each of the above might be:

a. move three or four times an hour with clear purpose in mind.

b. involved in one thing at a time.

c. turns the television dial 4 times in 15 minutes.

Note that when hyper is broken down into specific behaviors, observing and counting are easier to handle and can be more reliably recorded by both parents. The translation in positive incompatible behavior helps parents know what behavior to teach and reinforce and tell the child what behavior is appropriate or desired. Start with small amount of desired behavior at first.

4. Recording target behavior

Observing and recording target behavior are important because they allow parents to determine the effectiveness of their intervention in an objective manner.

> Since there is always some discrepancy between what we think we do and what we actually do, the recording of actual behavior provides us with feedback of the amount of time we are on and off task. When applied to target behavior of a child, it provides feedback for the child about his behavior and provides us information about the actual occurrences of the target behavior.

Pause (15 sec.). Discuss.

Before intervening, parents need to get a count of the occurrences of the target behavior. Getting such a count before applying any corrective procedures is called a baseline. Work on worksheets.

5. Graphing

> In addition to counting occurrences, it is also helpful to graph the counted occurrences. When occurrences are graphed, they provide a quick and visual reflection of the amount of progress being made.

Seeing this progress is likely to be reinforcing for the child and the foster parents. Moreover, graphs allow parents to evaluate success of intervention. Though graphs may appear to be tedious, the gains far outweight the efforts put into graphing the occurrences of the desired behaviors. Refer to Burchard and Leitenberg data work sheets (1978, p 125-130). What to do when graphing occurrences of target behavior?

a. Define target behavior in specific and positive terms.

b. Choose an observation period.

1. observe throughout the day for behaviors that occur infrequently.

2. observe for a limited period for behavior with high frequency of occurrence (i.e. bet. 3 & 6 PM).

c. Record the number of times the behavior was observed to occur.

d. Graph the data to show how often and when the behavior occurs. (Burchard and Leitenberg, 1978,130)

6. Homework

a. Select a negative behavior you would like to help your foster child change.

b. Define the behavior in specific terms.

c. Identify a positive incompatible behavior that you would like your child to increase.

d. Define that behavior so it can be counted.

e. Set a period for observation.

f. Count number of times the desired behavior occurs during the period of observation.

g. Record data in data sheets.

h. Graph occurrences of desired behavior.

Session III

Materials Needed

1. Blackboard
2. Chalk
3. Video tape (optional)

Goals

1. review homework and discuss parents' reactions (40 minutes).
2. acquaint parents with methods of decreasing negative behaviors (60-70 minutes).
3. explain homework assignment (10 minutes).

Sequence

1. Homework review

Review the homework assignment. Ask parents to exchange assignment with another non related person, to give each other feedback. Acknowledge that this was a difficult assignmnet. Indicate, however, that other foster parents have been able to learn the procedure through practice. Move about the room, give each person positive reinforcement for what he did. More time may be spent on any part of the previous session requiring it.

2. Decreasing negative behaviors

> Two sessions ago, we talked about positive reinforcements. As you remember, these are ways of increasing desirable behaviors. Since parents are unlikely to prevent the occurrence of all problem behaviors, there are times when there will be a need to intervene, to stop the continuation of undesirable behaviors.

Pause (15 sec.)

> Sometimes it is better to let a behavior run its natural course without intervening. That is letting the child face the natural consequences of his behavior.

Read the following example.

Extinction

> Joey, a 6 year old boy, wants to play with his foster father's tool box. When his foster father refuses to let him play with the box, Joey throws a temper tantrum. Foster father leaves the room and let Joey have his temper tantrum.

Explain that this procedure is known as extinction. It consists of purposely witholding reinforcers. In order for it to be effective in reducing problem behavior, parents must systematically and consistently ignore the undesirable behavior. Do not argue nor discuss the behavior. Arguing may be reinforcing. Point out that the problem will often get worse before it gets better and both parents must ignore the behavior. If one parent ignores and the other reinforces the behavior, this method will not be effective. It is good to tell the child that the undesirable behavior will be ignored. Reinforcement of appropriate behavior will increase the effectiveness of this procedure. Summarize the following:

a. Problem behavior will get worse before it is discontinued.

b. Parents, other adults and children residing in the home must ignore the undesirable behavior. If the behavior is being reinforced, it will be more difficult to eliminate.

c. Undesired behavior must be consistently ignored.

Discuss participants' reactions and clarify points that are unclear. Encourage participants to identify and relate

experiences in using this method. Evaluate advantages and disadvantages of this procedure. Make the following points if they were not brought up. Encourage the participants to add to the list.

a. does not require physical contact with the child. No coercion necessary.

b. may be difficult to get members of the home to ignore the problem behavior consistently. ie grandparents.

c. limited to behaviors that are not destructive of self and others.

Pause (15 sec.)

At other times it is useful to apply some logical consequences to negative behaviors.

Read the following example

Response Cost

17 year old Jake took the family car for a drive with his friend without asking his foster parents' permission as they have agreed after a similar incident 3 months ago. His foster parents ground him for two consecutive weekends.

Explain that this procedure, which is very familiar to parents of teenage children, is known as response cost. It consists of penalizing a child for the occurrence of undesired behavior by removing or withdrawing a specified reinforcer. Such reinforeers might be privileges, like staying out late, having friends over, going to the mocies, allowance and the like. This procedure involves the loss of something prized to the child. Which reinforcer is forfeited and the degree of the loss must be agreed on in advance by foster parents

and child. Arbitraryness in the use of this technique may lead to resentment. Summarize the steps

a. Specify undesired behaviors clearly so that its occurrence can be readily identified.

b. Negotiate with the adolescent as to the reinforcer to be withdrawn and the amount of the loss. i.e. a parent may fine a teenager a specified amount of money from his allowance as opposed to the entire allowance.

c. Consistently apply the procedure whenever the problem behavior occurs.

d. Avoid nagging, scolding or lecturing when adolescent is penalized.

e. Set a specific time period for the duration of the agreement with a set date for evaluation and re-negotiation. Two weeks or a month, depending on the frequency and severity of behavior.

f. Renegotiate choice of reinforcer, if the one chosen loses its effectiveness.

Discuss participants' reactions and clarify points that are unclear. Point out that this topic will come up again when discussing interpersonal problem solving and designing behavioral intervention. Encourage participants to identify and relate experiences in using this procedure. Evaluate advantages and disadvantages as the participants see them. Make or summarize the following points. Encourage participants to add their own views.

a. the adolescent is involved in the process.

b. requires parents and adolescent interaction.

c. may influence adolescent perception of parents as reasonable.

d. may increase adolescent's self esteem, giving him some sense of control.

e. adolescent may resent having to give up privileges.

f. parents may feel negotiation is abdicating their parental responsibility.

g. reinforcers may lose their effectiveness, causing parents to appear capricious in their behavior.

h. it may be difficult to identify each instances of the occurrence of undesired behavior.

Pause (30 sec.) then go to the next section

Restitutional Overcorrection

> Kevin, an 8 year old boy, becomes angry at his foster parents and throws his glass of milk on the kitchen floor. His foster mother tells him that in order to help him control his temper better, next time he will have to mop the entire kitchen floor plus the dining area before he could go play baseball with his friend.

Explain that this procedure is known as restitutional overcorrection. It involves having the child face natural consequences of his negative behaviors, in addition, completing some related added tasks. If this procedure is to be employed, it is good to tell the child about it ahead of time. Point out that parents should not allow themselves to get embroiled in a discussion over the fairness of the procedure.

a. specify the undesired behavior clearly.

b. tell child of the consequence of negative behaviors.

c. apply restitutional overcorrection after the behavior has occurred.

Discuss parents' reactions and elaborate on points that are not clear. Encourage participants to identify their experiences in using this procedure. Evaluate advantages and disadvantages.

a. child may acquire new behaviors.

Pause (30 sec.) then go to the next section.

Positive Practice Overcorrection

> Nicole, who is 9 years old, has a tendency of running into the house and slamming the door behind her. Despite repeated requests to close the door gently, Nicole has persisted in that behavior. Upon advice from a friend, Nicole's foster mother firmly told her to go back outside and come in again the way she knows she is supposed to. Nicole went out and came back into the house at an appropriate pace. She repeated this behavior five times each time she came into the running and slamming the door. Before long Nicole was observed to slow her pace down before she goes inside the house.

Explain that this procedure is known as positive practice overcorrection. It consists of having the child practice a behavior that is incompatible with the problem behavior repeatedly. Parents need to model the desired behavior for their children and be sure that they understand what it is they have to do. Suggest that only one practice trial be required of the child after the first onset of the negative behavior. After the appropriate behavior has been modeled, parents should tell the child that future incidences of the negative behavior would require that he practices the modeled behavior for a specified number of times. Number of practice trials should be aversive enough to discourage the occurrence of the problem behavior.

a. Tell the child that his behavior is inappropriate, teach him the desired behavior.

b. Have the child repeat the desired behavior only once, the first time the procedure is used.

c. Inform that future occurrences of the negative behaviors will require that he practices the modeled behavior a specified number of times.

d. Apply procedure consistently after each time the unwanted behavior occurs.

e. Parents may increase the number of required trials, if the previously mentioned number does not appear effective in reducing the problem behavior. The added trials will have to be practiced at the next occurrence of the problem.

Discuss participants' reactions. Encourage them to share their experiences in using this procedure. Evaluate advantages and disadvantages as parents see them. Summarize or bring up the following points:

a. help child learn appropriate behavior.

b. has more enduring effects than punishment.

Pause (30 sec.)

Time Out

> Jennifer, a 7 year old girl, starts screaming and yelling after being told that she had to eat breakfast before she could watch television. Her foster mother tells her to stop screaming on the count of 3 or she will have to stand in the corner until she has been quiet for a full three minutes. She did not stop. The foster mother took her firmly by the hand and took her to the corner. She remained there until she stops for the full 3 minutes.

Ask how many of them have used this technique before and how it has worked for them. Explain that time out consists of removing the child from the presence of positive reinforcers. Parents are not always aware of what these reinforcers are. By removing the child from the immediate environment and putting him in a dull, non stimulating one, in a calm but

firm manner, parents reduce the influence of reinforcers inherent in the situation, even though they may not be aware what these are. When no reinforcers have been identified, the procedure is known as social isolation.

Steps in using T.O.

a. Tell the child clearly and specifically what behaviors will bring this consequence prior to its actual use.

b. Role play the procedure with the child prior to using it. Introduce it as a game in which going to T.O. means losing, doing what is required is winning.

c. Select an area or a room that is dull, no toys, no television, no games or any other distractions.

d. Use T.O. for 5 minutes or less of the desired behavior. Do not remove the child from T.O. when he is engaged in undesirable behavior.

e. Let the child out promptly after he has complied and spent the required time. Do not mention the problem behavior, scold or nag the child. If the child pouts or sulks, it is ok. That may be his way of expressing his anger. Act as casually as possible and go about your usual routine.

f. Do not hug the child or socially reinforce him right after coming out of T.O. You can plan some tasks for him, in which he is likely to succeed and when he does, reinforce him for successfully completing that task. In the above example, if after coming from T.O. Jennifer eats her breakfast, you can reinforce that behavior. For compliance training, do have the child comply with original command after leaving T.O.

g. Use T.O. consistently whenever the problem behavior occurs or if you tell the child you are going to use it.

h. Use T.O. immediatley after the occurrence of the problem behavior.

i. Be calm and authoritative in administering T.O. Take the child firmly by the hand to the designated corner or room.

j. Do not argue or plead with the child. If the child physically resists being taken, than another technique should be employed. Very early in negative behavior chain, give choice between T.O. and some other consequences.

After going through these steps, ask the parents to role play the parts of parent and child. Divide them into groups of players and observers. Each participant should play both roles (parent and observer). Parents should role play, pre, during and after T.O. behaviors. If video recorder is available, record role play and use for discussion. After the role playing exercises, discuss the participants' reactions. Point out the advantages and disadvantages if they do not surface. In any event, bring up or summarize the following

a. More effective with children who have desired to please parents.

b. May be difficult to find a dull place in the home.

c. Many of the foster children the parents work with, may require physical coercion in order to comply.

d. May not work with parents who do not exert authority over their children.

e. Useful only with younger children, usually 10 years old and younger.

Some general considerations when deciding to use punishment.

a. Since punishment is experienced as unpleasant, its use may lead to:

1. avoidance of parents

2. acquisition of other undesirable behaviors to avoid parents

a. running away

b. lying

3. inhibition of desired behavior

4. parental dependence on punishment

b. To minimize the occurrence of the above parents need to be

1. very clear and very specific about the behavior they want changed and the one that is acceptable

2. use punishment very infrequently. Many foster children have had prior contacts with aversive adults.

3. use punishment in conjuction with reinforcement for desired behavior

4. be consistent as much as possible

3. Homework

Start using any one of these methods whenever you think they are appropriate instead of your usual disciplinary techniques. Observe. Record number of times each technique has been used and observe what happens. Remember to:

1. Pay attention to your child when he is good.

2. Begin to get into the habit of paying attention to non problematic behaviors, although these may not be extraordinary. What may seem simple for you, may be difficult for the child.

Session IV*

Materials Needed

1. Blackboard
2. Chalk
3. Video Camera (optional)

Goals:

1. review homework and discuss parents' reactions (30-40 minutes).
2. familiarize participants with contingency contracting (45 minutes).
3. rehearse the steps in contingency contracting (30 minutes).
4. homework (5 minutes).

Sequence

1. Homework review

Ask parents to share their experience in using the techniques presented last week. Clarify misconceptions and summarize the materials covered thus far. Suggest that the best way to handle problem behaviors is to prevent their occurrences. Explain the need to pay attention to positive behaviors and to try to ignore negative ones. Emphasize the importance of catching your foster child being good.

2. Contingency contracting

State:

> It is important to get the child involved and to accept some responsibility for changing his behaviors. This can be done through contingency contracting.

Explain that

> When we freely commit ourselves, we are more likely to respect our commitment.

Define contingency contracting

> A situation in which the parent and child decide together on the terms for behavior change. This includes the behavior to be changed and the consequences for both desirable and undesirable behaviors.

Pause (15 sec.). State:

The following procedures must be followed in order for the method to be effective.

1. This "contract" is drawn up and agreed upon by both the child and parent(s) through active negotiation. Specific positive behaviors are outlined with specific positive reinforcers available if the child engages in those positive behaviors. Specific negative behaviors are also specified along with specific negative consequences if the child engages in those negative behaviors.

2. It is critical during these negotiations that the child be allowed to provide genuine input into the process of deciding what behaviors to change, how to change these behaviors, and what should be the reinforcers and punishers.

3. It is often useful to write up this "contract" with all the behaviors and consequences clearly specified. All parties should then sign this "contract". Such a procedure makes it more likely that everyone will feel invested in fulfilling the terms of this negotiated "contract".

4. When doing behavioral contracting, it is important to begin with a contract the child is likely to complete. Then, one can gradually increase the performance standards. Collection of baseline information is critical for determining where to start (i.e. begin the program just a little above the child's current level of functioning).

5. It is important to incorporate charting into this project; both to determine where the program should begin, and to monitor progress.

6. When your child fulfills the positive behaviors specified in the contract, it is important to follow through with the negotiated rewards combined with social attention and praise.

7. When your child misbehaves under the terms of the contract, the consequences should be delivered in a matter-of-fact tone, with little lecturing or scolding.

Before going into the next section, elicit parents' responses.

Clarify and explain as the need may be.

Steps in contingency contracting:

1. Sit down with your child(ren), and state as specifically as possible the behaviors which are concerning you. State that you feel that if that behavior were to change, you believe things would be more enjoyable in the home.

2. Elicit your child's view of the problem behavior. It may be that your child simply does not know that his or her behavior is problematic for you. In such a case, your providing information about the behavior may be sufficient to change it. However, in many cases this will not be enough, and you will have to go through the rest of the contracting steps.

3. After you have solicited your child's view of the problem behavior, state that you have an idea that can help change that behavior so that things are more enjoyable in the home, and that this idea is called "contracting".

4. Identify as specifically as possible, the appropriate behavior you want to substitute for the problem behavior (e.g. "instead of leaving your dishes in the living room, I would like you to place them in the sink in the kitchen".). Then ask the child if that behavior is possible for him to perform. Sometimes a child may have a good reason why a more appropriate behavior is not possible for him to perform. This is a good time to find out their reasoning.

5. State that the idea behind "contracting" is that you and your child will together come up with a plan regarding what should happen if your child does engage in the more appropriate behavior, as well as what should happen if your child engages in the problem behavior. Then begin negotiating the terms of the contract. You should try

to negotiate both daily (smaller) rewards and weekly (larger) rewards. Often rewards will be in the form of a special activity at the end of the week if a certain number of daily rewards are earned during that week. Daily punishments for misbehavior should be relatively mild (e.g. no desert that evening); with no use of weekly punishments. The idea is that your child should be more influenced by trying to earn positive rewards, then by avoiding punishments.

6. To determine an appropriate weekly goal (e.g. 4 evenings of brushing teeth = going to the movies on friday), charting can be used for one week to determine how often the behavior naturally occurs. If you already have a good idea of how often the appropriate behavior occurs, you can skip this step. However, be sure to proceed in small steps. Do not require perfect performance the first week.

7. Gradually, you can increase the demands of the contract. However, this should be done through further negotiation. Such increases in demands should occur when it is clear your child is easily fulfilling the contract.

An example: A family decides that Johnny's fighting with his brother is a problem. Consequently, the parents sit down with Johnny and his brother and negotiate that for every day that Johnny and his brother do not fight with each other, they will earn a star on a star chart. Based upon a baseline recording week, it was determined that if at the end of the week, they have earned five stars, then they will be able to purchase a special treat (this treat could be a favorite dessert, a family outing, a small toy, etc.). However, every day that they do fight with each other will result in their not being able to watch TV for the rest of the evening.

The important aspects of this example are:

1. The parents may decide the sibling fighting is a problem, but the specifics of how to go about changing this behavior are negotiated.

2. Charting remains an important part of the behavior change plan. For example, it was only through collecting one week of baseline that the family knew to require 5 stars in order to get the weekly reward. In other families more or less stars may be appropriate to require for the weekly reward, depending upon how frequently the children fight

with each other (ask how the parents might use such a baseline to decide this!).

3. Consequences for both misbehavior and appropriate behavior are clearly specified.

3. Rehearse

Ask parents to divide into small groups and role play the procedure. Discuss.

4. Homework

Ask parents to work out a contract to change the target behavior selected earlier. They are to bring the contract to class next week.

*this session is adapted from the Child Behavior Project, Department of Psychology, Michigan State University.

Session V (Control)

Materials Needed

1. Tape recorder
2. Video camera (optional)
3. Cassette tape

Goals:

1. review homework and discuss parents' reactions (30 minutes)
2. discuss rationale for interpersonal conflict resolution skills training (15 minutes).
3. acquaint foster parents with the conditions that facilitate resolution of interpersonal conflict (30 minutes).
4. practice conflict resolution procedures (40 minutes).
5. explain homework assignment (5 minutes).

Session V (Experimental)

Materials Needed

1. Tape recorder
2. Video camera (optional)
3. Cassette tape

Goals:

1. review homework and discuss parents' reactions (10 minutes).
2. discuss rationale for interpersonal conflict resolution skills training (5 minutes).
3. acquaint foster parents with the conditions that facilitate resolution of interpersonal conflict (10 minutes).
4. practice conflict resolution procedures (30 minutes).

5. acquaint foster parents with self management techniques (60 minutes).

6. explain homework assignment (5 minutes).

Sequence

1. Homework review

Go over last week's homework. Discuss parents' reactions to the task. Encourage those who weren't successful to try again without forcing the child to talk. Indicate that today's main topic deals with conflict in interpersonal relations. Such confilcts are usually very difficult to resolve, especially when the behaviors of either party do not violate some specific social norms or contrary to laws. Ask parents to share examples of interpersonal conflicts they have experienced either with their spouse, their children or agency representative.

> We mentioned the word conflict earlier in our discussion. Though we all know when we are having a conflict, many of us don't usually think of what a conflict really entails. When we can break things down to their simplest level, it helps us to get a better perspective of what it is we are actually concerned with. To help us do that, we are going to define what an interpersonal conflict is and based on that definition, we will talk about ways to reduce conflict in our relationship.

Using Patterson's definition:

> Conflict is a situation in which one person demands immediate behavior change and the other refuses.

What does it take to have a conflict?

a. at least two people

b. a demand

c. non compliance

A third aspect of conflict that is not included in the definition, is that over time the demands and refusals are expressed in negative and painful statements. For instance: George wants to talk to his son Bill; Bill does not want to talk to his father, George. There is a conflict, but perhaps no angry feelings. As George however, insists on talking and Bill insists on not talking, one or both may become irritated with the other and start making coercive statements to each other.

George: Who the h--- you think you are? (angry)

Bill: Not who I think I am. Who the h--- you think you are? (sarcastically)

Give a few of the examples below.

Some conflicts parents experience:

1. Sandra, 12, wants her parents to give her permission to start dating.
   Her parents, concerned that she might get hurt emotionally, refuse to give her permission.

2. Father wants son Ken, 17, to remove the purple dye out of his hair. Ken refuses, saying he has a right to do what he wants with his hair.

3. Carol, 16, wants her mother to let her choose her own friends.
   Mother is worried that she is going out with the wrong crowd.

4. Eric, 18, wants his parents to allow him to smoke pot in his bedroom.
   Parents sternly refuse.

5. Foster mother wants natural mother to stop visiting his son while he is at her house.
   Agency representative says this is not possible.

6. Foster parents believe in spanking and other corporal punishment.
   Agency representative does not condone such practices.

7. Sherry, 16, wants to drink beer, saying her girlfriend's parents let her do it. Why can't her foster parents? Her parents refuse. They believe drinking is a sin.

8. Jan, 14, invites boys over to her house when her parents are not home.
   Jan's foster parents want her to have boys over only when one of them is home.

Ask parents to share some of their conflicts with the group.

Bring up the following points after the discussion.

a. conflicts are a normal part of everyday life.

b. conflicts do not create bad feelings.

c. it is what we say when we are in conflict situations, that create the bad feelings which then perpetuate the conflict.

d. what we say in a conflict situation may contribute to good feeling or diminish the intensity of bad feelings, thereby helps resolve conflict.

2. Rationale

Why should we learn to handle conflict? This section is best handled as a group discussion. Ask parents to state the advantages of learning conflict resolution skills. Bring up the points listed below, if no one in the group mentions them. If they were brought up, state as a summary at the conclusion of the discussion.

a. requests for changes in behavior are an integral part of living together as a family.

b. escalation of conflict can be prevented.

c. accumulation of grievances may affect the way we feel toward each other.

d. there aren't always clear rules about what is right or wrong or who is right and who is wrong. Many of the conflicts we have, come from different sets of values about the problem behavior.

e. the older the person, the less control we have over reinforcers and punishers. Older persons have access to a wide range of reinforcers and punishers, competing for influence over their behavior. For example, peer acceptance for adolescent may be more reinforcing than parents' controlled reinforcers.

f. punishment is more effective when it is seen as a choice and not as an imposition. When it is perceived as an imposition, it is likely to lead to resentment and failure to accept responsibility for problem behaviors by adolescents.

g. allowing adolescents' real input into conflict resolution fosters increased self responsibility.

Elaborate on the last point.

Adolescence is a time when children are trying to assert their independence and define their identity.

Ask parents to share some experiences of their adolescent years.

3. Resolving conflicts

Now that we have agreed on what conflicts are, we focus next on what to do when they occur, to prevent them from escalating.

Negotiation.

1. Planning: allows us to schedule negotiation under conditions that would facilitate resolution.

   a. arrange a time and place for a discussion as soon as the problem arises. The longer you wait the more difficult it is to discuss the problem without recriminations.

   b. agree on a time when the persons involved are likely to be relaxed. If any of the party is tense, or experiencing other pressures, he is less likely to be cooperative.

c. agree on a time and place when the persons involved can be free from interruptions and distractions.

d. sessions should be brief 10 to 20 minutes.

e. discuss one problem per session.

f. agree on a specific time and place for further sessions.

2. Procedures: these allow discussions to remain focussed and reduce the likelyhood of coercive behaviors and punishing statements. They only serve to didetrack discussion of the problem.

a. victim is always right. (victim is the person who has a complaint)

b. victim must follow the following rules

1. state what the other person did.

2. state how it made the victim feel.

3. do not guess the other person's intentions.

4. do not make attacking statements.

c. after victim has finished, listeners must paraphrase in one or two sentences what the victim has said.

d. change role - listener becomes the victim. This is particularly important when the conflict involves parents and children. If the adolescent child does not get to bring out his side of the problem, it is unlikely he will respect any resolution of the conflict.

e. the listener paraphrases what the victim has said.

Read the examples below and ask parents to

1. identify the request implicit in each statement.

2. say how they would feel if they were approached in that manner.

3. restate the request.

a. Laura turns toward her husband Bill, who has been watching television since coming from work, and says "you never do anything; you are always in front of that stupid box; I am sick and tired of doing everything in this house".

b. Michael looks around the living room of their three bedroom house and says to his wife "what kind of a wife are you supposed to be? Look at this house, it gives me the creeps".

Summarize that in both examples, each speaker made coercive punishing and accusatory statements. Such statements are likely to lead to refusal to comply with the implicit request and thus contribute to development of conflicts that could have been avoided. An other example of discussion session between Laura and Bill. Both are relaxed. The children are in bed. The house is quiet. The television is off and they had set this time to talk. Although they have many other problems, they have chosen to talk about one thing tonight: Bill's watching television after work. Ask for two volunteers to roleplay the example below.

Bill: You say that I never do anything and that I am always in front of that stupid box. When you say these things to me, I feel hurt and uncared for.

Laura: You feel hurt and uncared for when I say you don't do anything and are always in front of the set.

Bill: Yeap! (acknowledge that's what he said)

Laura: When I see you sitting in front of the T.V. and I have to prepare dinner after working all day, I get resentful and angry.

Bill: You get resentful and angry when you feel you have to cook and see me watch television.

Participants may feel uncomfortable. Be persistent and encouraging.

4. Practice

Divide parents into groups of observers and players and practice the above steps. Ask parents to suggest conflict situations.

5. Self management (Experimental)

Ask parents to reconvene as a large group. Help them explore their reactions to the exercise. What was it like for them? What stood out? What are their impressions? Summarize the discussion. Indicate that conflict tend to trigger angry thoughts and feelings which may cause us to behave in ways that we are likely to regret at a later time.

Pause (15 secs.)

> Because of this we thought it would be useful to acquaint you with a method that can help you stay in control of your feelings

Pause (15 secs.). Allow parents time to respond. Some may disagree, saying that we cannot help the way we feel. Indicate that while many people feel that way, many others have learned to control their feelings. Give the following example:

> Georgia, a 15 year old foster youth, verbally abuses her foster mother in front of their visiting older children in response to being asked to turn down her portable cassette player. The foster parent turns toward Georgia sisibly angry and tried to get the casette player from her. The situation escalates into a physical struggle between Georgia and the foster parent's children.

After giving the example, ask the parents to put themselves in the place of Georgia's foster mother. How would they

respond? List the responses on the board. After doing this indicate that behaviors are usually preceded by feelings. Ask what would they feel if they were Georgia's parents. List the feelings on the board next to the behaviors mentioned earlier. Indicate that our feelings are usually set off by what we think of a situation or the way we see the situation. Help them articulate how they would perceive the situation. List the responses on the board next to the feelings mentioned earlier. Point to the relationship between perceptions (conclusions we reach), feelings and behavior. State:

> The conclusions we reach about an event arouse feelings which influence what we do. If we can change our conclusions, our feelings will be different and so will our behavior.

Pause (30 sec.). Allow the parents time to ponder about what was said. Go back to the board and use the listed responses to show that parents who do not perceive the situation the same way, indicate they would behave differently and vice-versa. If the responses were all in the same direction, then give the following examples:

Foster parent 1:

"Georgia is probably feeling ignored and left out today. She is angry with me because of this. Playing the radio that way is probably one way to get my attention. I don't like it when she behaves that way, I am going to have to help her learn other ways to get my attention (or to express anger toward me). My children are probably feeling the need to protect me, right now there is no need to let things get out of hand".

Foster parent directs her children away from the scene and approaches Georgia calmly to discuss her behavior.

Foster parent 2

"No one disrespects me in my own house and get away with it. She insulted me. She made me look bad in front of my children. I'll be d--- if she doesn't do what I tell her to do. This is my house. This child has no sense. She has no consideration for other people's feelings...".

Foster parent menacingly tell Georgia to turn the volume down. Georgia continue to refuse. Foster parent tries to grab the radio.

After reading the second example, ask:

> What conclusions have the first parent reached about Georgia's behavior? What conclusions have parent #2 reached about the same behavior?

After discussing the parents' responses, point out that if parent #2 could learn to come to the same conclusions as parent #1, her behavior would also be different. State:

> Many of you are probably wondering how could this be done. We respond so fast that we don't realize what happened until after it occurred. To help prevent this we need to look at the attitudes and beliefs we hold toward foster children. These are important because they generate self talk, which in turn influence the way we feel. We may not realize this, but we all talk to ourselves, we reason things out, we question, we rationalize, we reassure and justify our behaviors. We usually do that in the form of thinking.

Go back to the listed responses given earlier and help the group become aware of the beliefs underlying their perceptions. Once this is done, emphasize the role of self talk in maintaining our beliefs and influencing the way we think, feel and behave. Conclude by saying that the meaning we attribute to a youth's behavior determines how we will feel about his behavior and what we will do in interacting with

the youth. One way to change our beliefs is to change what we say to ourselves.

5. Homework: paraphrase instruction for homework.

A. In order to help put into practice the procedures outlined today, we would like you to do and tape record the exercises below.

1. First is to teach your child the procedures. Select a quiet and relaxed time and place. After dinner may be a good time. Select a conflict situation and roleplay the procedures learned today with your spouse or another person, with your child (or children) observing. Then ask one child to think of something he has not been pleased with that he would like either you or your spouse to change. Teach him to:

1. state the problem in specific terms.

2. express feelings related to the problem. (Reinforce his behavior socially by telling him how hood he is doing, ruffling his hair, winking at him and the like).

Practice the first two steps with different children or with the same child using different conflicts before going to the next step. A minimum of 3 trials is suggested for each child.

B. Begin to pay attention to the reasons you give for your behaviors. Choose two incidents involving you and one of your foster children. For each incident, describe the following.

1. What happened during the incident or event?

2. What did you think about it?

3. What did you say to yourself?

4. What did you do?

Select one incident that you considered unpleasant and one that you found pleasant.

Session VI (Control)

Materials Needed

1. Tape recorder

Goals:

1. review homework and discuss parents' reactions (40 minutes).
2. acquaint foster parents with interpersonal behavior exchange (45 minutes).
3. practice behavior exchange (30 minutes).
4. discuss homework (5 minutes).

Session VI (Experimental)

Materials Needed

1. Blackboard
2. Tape recorder

Goals:

1. review homework and discuss parents' reactions (15 minutes).
2. distinguish between helpful and unhelpful self talk (20 minutes).
3. acquaint foster parents with interpersonal behavior exchange (10 minutes).
4. practice behavior exchange (30 minutes).
5. acquaint parents with relaxation techniques (40 minutes).
6. explain homework (5 minutes).

Sequence

1. Homework review

Ask parents to form small groups of two or three. Have them take turn playing the recorded session and giving each other

feedback. Move around and spend about 5 minutes with each group. Do not give feedback directly. Rather phrase comments in the form of questions addressed to the entire group. After each person has had a chance to play his tape, ask parents to form a single group and discuss thoughts and reactions to homework and exercises. Bring up the point that the best way to break up ineffective conflict resolution pattern is to practice new methods. Summarize the main theme of the group discussion.

2. Self talk (experimental)

Ask parents to relate what they have learned about the instructions that they give themselves. Facilitate parents' sharing of their observation. After this is completed, point out that self talk can either be helpful or unhelpful. Read the following example.

> Jake and his foster son, Brian, are trying to resolve a conflict about curfew times. Brian behaves as if he doesn't want to hear what Jake has to say, saying he has nothing to say to Jake.

Unhelpful self talk

> I knew it wouldn't work. This kid is more stubborn than a mule. He is purposely ignoring me. He always does that to me. He is doing this on purpose. I don't care what he says, he is going to hear me out today. Who the h--- does he think he is. Nobody ignores me in my house. I knew this kid wasn't going to respond.

Helpful self talk

> I wonder why he is doing this now. This is new for me. May be it is for him also. Perhaps this is not the right time. I wish he would respond. I get angry when he tries to ignore me. The therapist did say that Brian is afraid of change. He did say that his behavior

sometimes trigger angry reaction in adults. I am going to have to work at this. It is harder than I thought.

3. Behavior exchange

Since communication alone may not lead to changes in behavior, it is helpful to get the parties to commit themselves to such changes through an exchange of behaviors. Read and discuss the following steps.

a. make a list of specific changes in the behavior of the other person that you would like him to change.

b. make a list of the behavior of the other person that you like.

c. exchange items on list. For each one that you get, you give something in return.

d. establish consequences for the violation or the agreement. Each person suggest some consequences for his violating of the agreement. Consequences should be negotiated when there is disagreement regarding their practicality, appropriateness and effectiveness. Parents may offer children a list of consequences from which to choose. Allow child to come up with at least one consequence of his own choosing.

e. record all exchanges and consequences, so that there will not be any future disagreement as to who agreed to what. Set a specific date for renegotiation.

f. apply consequences consistently.

4. Practice

Using a partner or another trainer, model the entire sequence. Ask parents to form small groups and practice the above steps on one of the conflicts they had mentioned previously. Move about the room and spend 10 minutes in each group,

explaining and clarifying the task.

5. Relaxation

As you know conflicts sometimes engender unpleasant and angry feelings, which make it difficult for us to remain calm and in control. To help you reduce the effects of such feelings on your behaviors, we would like to teach you a few techniques to help you relax.

Pause (30 sec.). Ask if anyone had heard of relaxation techniques or if anyone had had the opportunity to use any such techniques. Do not rush to the exercises. Take time to answer participants' questions. After this is done, do the following: ask participants to seat as comfortably as they can. Go over progressive muscle relaxation (Rim & Masters, 1979).

6. Homework

A. Same as homework for the last session. Parents should model and practice the exchange sequence with their children. Ask them to tape record one session for discussion next week.

B. Ask parents to practice the relaxation techniques taught at least once a day and to record their impressions.

Session VII (Control)

Materials Needed

1. Tape recorders
2. Blackboard

Goals:

1. review homework and discuss parents' reactions (45 minutes).
2. apply procedures taught earlier to problem behavior (30 minutes).
3. develop a behavioral intervention program (45 minutes).

Session VII (Experimental)

Materials Needed

1. Tape recorders
2. Blackboard

Goals:

1. review homework and discuss parents' reactions (10 minutes).
2. apply procedures taught earlier to problem behavior (60 minutes).
3. develop a behavioral intervention program (40 - 50 minutes).

Sequence

1. Hovework review and small group feedback.

Ask parents to form small groups, listen to each other's tape and give each other feedback. Spend 5 minutes in each small group to model positive criticism. Ask each group to select the best tape of their respective group. After each group member has had the opportunity to receive reaction to

his tape, reconvene into a single group. Play the selected tape and inquire as to what made them exemplary models. Before going on to another section, make the point that these procedures are not to be put away until there is some major crisis. In order for parents to comfortable with them and skilled in their use, they are to be employed as often as possible. This will prevent the development of coercive interactions and eliminate entrenched conflicts.

2. Applying learned procedures to problem behaviors.

> In the previous sessions we discussed a number of procedures that have been found helpful in elimination problem behaviors. Now in order to help us integrate these procedures into skilled interventions, we are going to apply them to selected behavior problems.

Ask parents to suggest problem behaviors they would like to work on. Before focussing on specific behavior problems, ask parents to state the procedures that should be followed in every behavioral interventions. Write these on the board. Once these have been reviewed, proceed to work on specific behavior problems. Go through this section at parents' pace.

A. General procedures.

1. define undesirable behavior in specific terms.
2. pinpoint an incompatible, positive, desired behavior. i.e. playing vs. fighting; compliance vs. non compliance; absence of negative behavior vs. presence of negative behavior.
3. note conditions surrounding occurrences of desired behavior. i.e. child complies when foster father is around, does not comply when around friends;

child swears after visit from natural parents or therapy sessions. It is important to note the conditions surrounding the occurrence of desired and undesired behaviors, especially with foster children. Some of these children's problem behaviors may be cyclical, that is they have been conditioned to certain events in the child's life. Such events include placement into a new home, visits from or to natural parents, therapy sessions, change in therapist, new social worker, termination and the introduction of another foster child within the family unit. These events may be experienced as stressful by the child, causing him to respond in impulsive manner with whatever behaviors have become conditioned with any of these events. Knowledge of conditions preceeding problem behaviors help parents

a. identify conditions associated with high and low probability of the occurrences of desired and undesired behavior.
b. determine what maintains these behaviors after they have been exhibited.
c. structure task that will facilitate success and not failure.

4. select an observation period. Depending on the behavior, the observation may be spread over a day or may be restricted to portion of a day. If the behavior occurs frequently, observe for only a part of a day. i.e. two hours. If behavior occurs infrequently, it needs to be monitored for a longer period of time. Observe behavior for 3 to 5 days.

5. record and graph occurrences of desired behaviors. This will allow parents to determine the effectiveness of intervention over time.

6. talk with child about problem behavior. Find out if the child is aware of more socially acceptable behaviors or is inhibited in his use of behaviors. For children 12 and older, initiate conflict resolution procedures. Regardless of age, give the child a choice: he can choose to learn new ways of behaving, be helped to use other behavior he has in his repertoire that he is not using, or face punishing consequences of his current behavior.

7. find our what can be used as a tangible reinforcer to back up social reinforcement. Best ways to identify reinforcers are to ask the child or to observe his reactions to things. Some possible

non social reinforcers are money, special meal, outings with parents, new clothes, cookies, etc.. Choice of reinforcers must depend on the preference of the child and the practicality of that preference.

8. teach the child the behavior he should use in the future or tell him which one he should use if he already has it in his behavioral repertoire. Be specific and start by reinforcing small components of the desired behavior.

9. tell the child about the procedure. Define your role and define his. Inform when and why he will be given a reward or be punished. Reward should be given at rate slightly higher than the rate of the desired behavior at first. Post record sheet in a location where the child can see it. It is good to ask the child where to post the record or graph sheet.

10. gradually increase the time required to earn a reward after the desired behavior has been learned.

11. always pair reward with verbal statements, emphasizing the child's control over his behavior. i.e. "look at all the points you earned, you must take doing your work seriously", may be said to a child who has done all his household chores.

12. deliver punishment immediately after problem behavior occurs, when it is part of the program. If it is not, ignore occurrences of undesired behaviors.

13. fade out tangible reinforcers after the desired behavior has been acquired, that is the child behave in the desired way most of the time, usually at a level tolerable to the parents. Inform the child that sometimes he will get rewarded for engaging in the behavior and at other times he will not.

14. always pair delivery of tangible reinforcers with social reinforcement.

15. if reinforcer or punishment is not effective, review intervention program. Frequent reason for program failure:
    a. initial steps to get reinforcement may be too large.

b. reinforcer might be too week.
c. mixing nagging, criticism and punishment with reinforcement.

B. Rehearse relaxation techniques

1. deep breathing

2. progressive muscle relaxation

C. Brainstorming

You may use the examples below or preferably, those suggested by parents. Read the problem and ask parents what methods they would use in dealing with the behavior. Inform them that the methods chosen may be different than the ones presented. Make a list of the suggestions on the board and ask parents to evaluate the consequences of each procedure.

a. Jane, a 13 year old, swears whenever she gets into an argument.

Methods.

1. Response cost: withdrawing a reinforcer, i.e. no TV watching, no dessert, reduction in allowance and the like.

2. Time out or social isolation: sending child to her room.

3. Ignore.

4. Reinforce absence of swearing words: 1 pt. to be converted into money for each 15 minutes he does not swear.

5. Reinforce incompatible behavior: use of more acceptable words to express her frustration (parents must teach acceptable expressions).

6. Have her rephrase what she says each time a swear word is used.

7. Lecture.

8. Wash mouth with soap.
9. Threaten to have her removed.
10. Slap her.
11. Yell and scream at her.

Discussion: review list and discuss the pros and cons of each procedure. Evaluate their consequences as the overall foster parent/foster child relationship and possible effect on the problem behavior. Solutions 1-6 are preferred over the other 5.

b. Joey, a 15 year old, bullies the children of his foster parents. He punches, kicks and pulls their hair when they refuse to do what he says.

Methods.

1. Response cost. (If parents suggest this method, ask them to state what privileges will be taken away. Privileges should not be confused with necessities.)
2. Social isolation.
3. Reinforce absence of any of the undesired behaviors.
4. Reinforce incompatible behaviors: verbal persuation, moving away.
5. Lecture.
6. Threaten to have him removed.
7. Beat with belt or paddle.
8. Ignore.
9. Yell or scream.
10. Hold him and let the other children hit him in return.

Discussion: same as before. Solutions 1-4 are preferred.

After the above examples have been discussed, move on to next section.

3. Putting program together.

> To help you put into practice the parenting and self-management techniques you learned earlier, we are going to practice putting a behavior program together.

Go over the example below with parents, asking them to suggest how they would go about developing a behavior and self management program.

1. Joey, 13 years old, bullies other children in his foster home.

Develop the program with parents as a large group. Explain that the purpose of this exercise is to help parents integrate the techniques into a program.

2. Donna, 13 years old, consistently forgets to make her bed in the morning, leaves her clothes sprawling all over her room, and pospones doing the dishes until someone else does them.

Ask parents to do the same as for example #1.

After going through the examples, ask parents to form small groups. Using the data they had gathered on the problem behavior they had selected, they are to design a behavior intervention program. Tell parents you will not be spending any time with any of the groups. They should attempt to answer each other's questions first before asking you to intervene. Encourage parents to provide answer to each other's questions. Each parent must design a behavior intervention plan. Ask parents to implement their plan. Ask them to bring their contract to class next week.

Session VIII

Materials Needed

1. Balckboard
2. Chalk

Goals:

1. review homework and discuss parents' reactions (60 minutes).
2. practice problem solving (50 minutes).
3. termination (10 minutes).

Sequence

1. Homework review

Ask parents to form small groups and go over each other's program. Spend 5 minutes in each group. Try not to answer questions directly, help the parents to find their own answers. After 30 minutes of small group time, reconvene into a large group and address the main problems that parents encountered.

2. Problem solving*

Parents will divide into small groups and given the following assignment. Each group is to identify a behavior for which it will develop a behavioral plan. After this is done, parents are to reconvene into a large group to evaluate their plan. Encourage other parents to make constructive criticism. When misconceptions come up, ask parents to provide another answer.

3. Termination

Ask parents to reflect on the training, thank them for doing a good job.

*Parents in the experimental group were instructed to develop a self management plan in addition to a behavior program.

Appendix H

APPENDIX H

Informed Consent

I, _____ agree to participate in the Foster Parent Training Project, a clinical evaluation program, examining the effectiveness of different foster parenting carricula. I understand that I have been assigned to one of two training curricula on a chance basis. I further understand there is no guarantee that training will render me more effective as a foster parent.

I understand that participation will involve:

1. periodic assessments of myself and members of my household 12 years and older a. before training b. after training c. one month after training

2. 8 weekly classes of 120 minutes each

3. the delivery of a certificate of achievement upon successful completion of training

I understand that participation in this project is completely voluntary and that neither myself nor members of my household are under any obligations to participate. I am free to decline entrance into the program, and I may withdraw my consent to participate at any time during the program. I understand that I may discontinue participation at any time without affecting my status as a foster parent. All records will be kept confidential.

I have read this consent form, and all my questions have been answered. I freely choose to participate. I understand that I may withdraw at any time.

_____ _____

Signature Date Witness Date

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