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**Does Money Matter?
Foster Parenting and
Family Finances**

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2008

Child
welfare
fare

Recommended Citation

Smithgall, C., DeCoursey, J., & Goerge, R. (2008) *Does money matter? Foster parenting and family finances*. Chicago: Chapin Hall at the University of Chicago

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ACKNOWLEDGMENTS

This study emerged from the recognition that foster parents bring an important voice to discussions of foster care experiences. We are grateful to the Illinois Department of Children and Family Services for supporting this project and for demonstrating the value of these voices. We are deeply appreciative of the foster parents who shared their homes, their personal experiences, their beliefs, and their feelings with us, not only once, but twice.

We have many Chapin Hall colleagues and former staff to thank for their contributions and thoughtful engagement in the process of developing this work. We are grateful to members of the Chapin Hall research team who led this project throughout its development and data collection and who engaged the participating foster parents with respect and professionalism: Eboni Howard, Jennifer Tobin, LaShaun Brooks, Marcia Gouvea, Isaura Pulido, Victoria Stos, and Andy Zinn. We thank several other Chapin Hall staff who were instrumental in the completion of this report: Ada Skyles and Andrew Zinn for their thoughtful review of an earlier draft; Matthew Brenner for his eye for detail and accuracy as he explored policy developments and assisted with references; and Anne Clary for her patience throughout many discussions of analysis and framing of some sensitive issues, her insights in crafting the content of this report, and her invaluable attention to editing.

We are grateful for the many contributions of others and the collective input that, we feel, has improved this paper throughout its development; however, we assume full responsibility for the focus and interpretation represented here.

INTRODUCTION

In 2005, the Illinois Department of Children and Family Services (DCFS) contracted with Chapin Hall Center for Children to conduct a study exploring factors thought to contribute to placement instability (Zinn, DeCoursey, Goerge, & Courtney, 2006). The primary sources of information for that study were administrative records and a survey of caseworkers about the characteristics and life circumstances of foster homes. Members of an advisory group for that study questioned whether caseworker interviews and analysis of administrative data would yield sufficiently detailed information about the characteristics of foster homes, caregivers, and children's wellbeing and their relation to placement instability. For example, researchers assumed that caseworkers would have minimal information regarding such matters as foster parents' employment, finances, health, transportation, and childcare—all of which may have a significant impact on their abilities to function as caregivers. Moreover, caseworkers and foster parents might think differently about the essential qualities of a nurturing environment; how to best meet the mental, social, and physical health needs of foster children; and ways in which household circumstances impact the fostering experience. In response to the concerns raised by the advisory group, and in recognition of the fact that foster parents bring an important voice to discussions of foster care experiences, DCFS approved and funded this qualitative study of foster parents.

In this paper, we present findings from an analysis of in-depth interviews conducted in 2005 and 2006 with 35 Illinois foster parents, 28 of whom were interviewed twice at time points approximately a year apart. We explore their motivations for fostering and their circumstances with regard to finances, family composition, employment, and a number of other domains. We examine how financial strain might impact the ways in which foster parents assess, carry out, and choose whether or not to continue their roles. Reflective of—and drawn from—the sample for the Zinn et al. (2006) study, the families interviewed for this study include both kin and nonkin caregivers. Although kin and nonkin foster parents are frequently examined separately in other qualitative studies in child welfare, the fact that over 50 percent of the children in foster care in Illinois experience placement with a relative at some point during their time in care underscores the importance of understanding both types of care and how they do or do not differ.¹

As we explore the themes that emerged from this study, our goal is to evoke the complexity of child welfare system and family system dynamics that underlie the experiences of these families, particularly as they relate to financial resources and foster parents' role in securing and supporting needed services and activities for the children in their care. In the next section of this paper, we provide a brief discussion of the study sample and methods. Then, in the section on findings, we first describe the foster parents' motivations for fostering, followed by their perceptions of their financial circumstances and such components of those circumstances as

¹ Illinois, California, and New York have the largest kinship care populations. Between 1986 and 1995, the proportion of children in relative placements increased from 27 percent to 57 percent of all foster care placements in these states (Testa, Shook, Cohen, & Woods, 1996). Recent analysis of Illinois administrative data suggests that although the percentage of children in care who spend any time with a relative remains high, between 1996 and 2001, the proportion of children who spend their *entire* time in foster care with a relative has been declining (Smithgall, 2008). Thus, it is increasingly important to understand more thoroughly the dynamics of kinship care placements.

family composition, employment, and kinship caregiving. We identify three groups of foster parents that are distinguished by their reports of financial well-being (or its lack). The third section of the findings addresses activities for foster children—both organized and informal—and the ways in which foster parents in different financial circumstances perceive and access them. Services for children are the focus of the fourth part of the findings section, and we explore foster parents’ perceptions of their children’s need for services as well as their own role in accessing and providing them. Last, we examine foster parents’ considerations and experiences regarding permanency decisions—adoption, guardianship, and reunification—for the children in their care. We conclude this report with a discussion of opportunities for supporting foster parents, financially and otherwise, with the goal of encouraging and facilitating their efforts to meet the needs of the children in their care.

METHODOLOGY

Sample Selection

As noted in the introduction, the concept for this project grew out of the Zinn et al. (2006) study on placement instability. The sample for this study was drawn directly from the set of caseworkers and homes represented in that placement instability study. The sampling frame for that larger study included all children in relative and nonrelative foster home placements as of March 1, 2005, who met certain criteria regarding age (16 years old or younger) and length of time spent in care. That sampling frame was further limited to children placed with foster families with whom children’s caseworkers had at least six weeks prior work experience (see Zinn et al., 2006). As of June 2005, 894 child welfare caseworkers had completed the survey. Among the foster homes represented by that set of 894 caseworkers, 498 homes were in Cook County or the surrounding collar counties, where in-person interviews of foster parents were feasible (with regard to travel and accessibility). So, for the purposes of conducting this study, a stratified random sample of 46 foster families was selected from the 498 foster homes identified as of June 2005. The sample was stratified on three case characteristics: relative vs. nonrelative foster parents, DCFS vs. private agency case oversight, and location in Cook County vs. the collar counties.²

There were two phases of data collection for this study. The first round of interviews occurred over a 5-month period from July to November 2005. The second round of interviews occurred over a 5-month period from April to August 2006. A total of 35 foster parents—76 percent of the sample—completed at least one interview, and 28 of those foster parents completed two interviews. Many qualitative studies of foster parents have relied on focus groups or self-identification and voluntary participation. Although the sampling approach used in this study was not a true random sample, it was also not a convenience sample, and significant effort

² For the purposes of sampling, the classification of relative vs. nonrelative homes was based on a “Home of Relative” placement code in administrative data files. However, analysis of the interviews revealed that the distinction between relative and nonrelative was not as clear as might have been expected; in three cases the foster parent interviewed served as a relative foster parent at one point in time or to one particular child but was a nonrelative foster parent to other children or at another point in time. We considered these three foster parents to be relative foster parents as they were related—in a biological or fictive sense—to a foster child currently in the home.

was made to achieve a high completion rate, including repeated visits to the residence when phone contact was not successful.

Interviews

Each interview averaged 90 minutes in length, and short follow-up phone calls were conducted when necessary to ensure completeness of the information. Foster parents were provided a \$30 cash payment for their participation in each interview. With consent of the foster parents, interviews were recorded and transcribed, providing a high level of detail and preserving the language of the participants.

The interview questions were based on an adaptation of the Ecocultural Family Interview (EFI). The EFI is a conversation with parents about how they organize their everyday routine—that is, how they plan, create, change, and sustain family activities with the foster child in their care (Ecocultural Scale Project, 1997; Weisner, 1997). Throughout the interview, the foster parents also have an opportunity to talk about their fostering experiences as they relate to topics such as employment, education, social support, childcare, social services, housework, and other resources and constraints that make up their family ecology. The EFI focuses on learning from participants—in their own words and from their own perspectives—about the resources they have available and what constraints challenge them.

Analytic Approach

For the first level of qualitative coding, researchers reviewed six to eight transcripts and labeled units, such as a phrase, sentence, or paragraph, with a descriptive code of the unit's content. Those descriptive codes were then reviewed and discussed, and codes were clarified until a consensus emerged, resulting in a set of broad, non-mutually-exclusive coding categories. These categories made up the initial coding scheme for analysis of the interview transcripts. Using Atlas.ti, each transcript was coded by one member of the research team. At two different times in the coding process, a total of five interviews were fully coded by both researchers and assessed for coding reliability. In addition to the coding categories, the “families” function in Atlas.ti was used to track and separate content from wave 1 vs. wave 2 interviews and relative vs. nonrelative interviews. Separating the content allowed us to observe how themes varied across time and by type of foster home.

In an initial round of analysis, content began to emerge that suggested considerable variability in the financial circumstances of households represented in this sample. Based on this initial analysis, researchers established criteria for categorizing foster families based on how they described their financial well-being, their reported employment history and status, and their household composition. Coded interview content from the transcripts were then reanalyzed to apply these criteria and establish a typology of households based on perceived financial well-being. This typology then became both a finding of the study and a factor used in further analyzing themes embedded in other content categories, such as motivations for fostering, children's use of services, children's participation in activities, and permanency. Consideration was also given to the type of home (relative or traditional) and the age of the child. In an iterative process, the themes and findings that emerged from these analyses were further informed by the existing research literature. Supporting quotations were drawn from Atlas.ti.

FINDINGS

Although it was clear from the interviews that financial payment was not a primary motive for fostering, it was equally clear that finances played a role in how these families functioned. In order to lay the groundwork for a discussion of the impact of financial circumstances on foster parents, and thus on the children in their home, we present a brief discussion about parents' motives for fostering. Analysis of the interviews allows us to group the foster parents into three categories of financial well-being. We find that the families within each category shared some perspectives and experiences with regard to activities and services for the children. The next section of this report will describe those categories, and the families that they include. We will then turn to a fuller discussion of the families' perspectives on providing and participating in activities and services. Our last set of findings concerns retention of foster parents, and explores some considerations that impact their decisions to continue or discontinue fostering. In conclusion, we will discuss some leverage points that DCFS might exploit in order to recruit and retain foster parents who can best meet the needs of the children in their care.

Motivations for Fostering

A 2003 survey of registered voters revealed that over one-quarter believe foster parents are “mostly interested in financial gain.”³ According to the research, however, foster parents seldom identify financial considerations as a motivation to foster children. In fact, the most frequently reported reasons for becoming a foster parent are altruistic or personal—for example, giving back to the community, wanting to raise children despite not being able to have them, or providing an abused or neglected child with a warm, loving home (MacGregor, Rodger, Cummings, & Leschied, 2006; Rodger, Cummings, & Leschied, 2006; Rhodes, Cox, Orme, & Coakley, 2006).

Like the families in the research cited above, foster parents in this study were initially motivated by a range of considerations. Some said clearly that their sole intent was to adopt the child in their care. Several had been in foster care or had been adopted themselves (or had siblings with these experiences). Others were altruistic, expressing the intention to “help” by caring for children, or felt a responsibility to the children in their community or cultural group. A significant number were motivated by a desire for companionship, in some cases combined with the extra time they gained through retirement. These motivations proved to be quite fluid; some foster parents began fostering intending to take a certain kind of child (a particular age or race), but were persuaded by caseworkers to take on a different child. Some began fostering a relative, and then took in other children.

Interestingly, in addition to the stated motives, almost two-thirds of the nonrelative foster parents commented that prior to becoming a foster parent they either knew others who were foster parents or they or a sibling were in foster care or adopted as a child. This suggests that

³ On April 14 and 15, 2003, Peter D. Hart Research Associates and Public Opinion Strategies conducted a survey among registered voters nationwide on behalf of the Pew Commission on Children in Foster Care. <http://pewfostercare.org/docs/index.php?DocID=21>

social networks may play a strong role in how individuals interested in fostering reach a point of acting on those interests.

Relatives' motives for fostering kin varied as well and in very different ways. Although all kin caregivers felt a sense of family responsibility, some were driven by the need to keep their relatives from being placed with strangers. Other kin caregivers had been caring for the child before any legal placement in the child welfare system occurred. Some indicated they were the only family members willing to take on the responsibility, or the only family members with the means to care for the child.

Consistent with prior research involving foster parents, and counter to some public perceptions, none of the foster parents in this study indicated financial motives for becoming a foster parent. Furthermore, a recent analysis of the adequacy of foster parent payments suggests that becoming a foster parent would hardly be a profitable endeavor (Children's Rights, National Foster Parent Association, University of Maryland School of Social Work). At the same time, discussions with foster parents about their finances and employment prospects—to be detailed in the next section—suggest that financial considerations are certainly not irrelevant.

Considering the motives articulated by the foster parents in this study and the implied, if not stated, significance of their financial considerations, the findings in this study support a more nuanced understanding of the underpinnings of foster parents' motivations, as suggested by Swartz (2004), who argued that “economic interests and altruistic motives coexist” Our exploration of the “economic interests” of foster parents begins with the taxonomy of financial well-being described in the next section.

Perceptions of Financial Well-Being

In the child development literature, a substantial body of research has established the significant role of financial strain, which is defined as “an individual's perceptions of financial pressures and lack of resources, often described as a feeling of having difficulty ‘making ends meet’.” (Dunifon, 2002). Supporting research suggests that financial strain impacts parents' health and mental health, which in turn impacts their parenting behaviors, ultimately contributing to such negative child outcomes as poorer health, problematic behaviors, and lower academic achievement (Dunifon, 2002; Jackson, Brooks-Gunn, Huang, & Glassman, (2000); Jackson, Brooks-Gunn, & Duncan, 1997; Coley & Chase-Lansdale, 2000; Skinner, Elder, & Conger, 1992; Mistry, Vandewater, Huston, & McLoyd, 2002). Although this research does not focus specifically on foster families, it is reasonable to think that the connections between financial strain, parenting behaviors, and children's well-being are also applicable to foster families.

DCFS policy regarding foster parent licensure requires applicants to demonstrate the capacity to manage household bills without inclusion of foster parent payment. According to Zinn et al.'s (2006) survey of caseworkers, over 90 percent of caseworkers reported that the foster family in question had “sufficient income to provide for children's basic needs.” However, work and employment status can change over time, as can other factors that might influence the household finances, including who is living in the home. Moreover, objective measures of income can differ from subjective experiences of financial sufficiency and stability.

In this study, we examined the language foster parents used to describe their financial situation as well as the descriptive information they provided about their household composition, combined income sources, other sources of assistance, and change in these factors over time. This entire set of circumstances informed our understanding of why certain families were strained while others were secure. The interviews also showed that childcare and employment security as well as caring for kin had a significant relation to foster parents' perception of financial well-being.

The analysis of foster parents' responses to questions about income, employment, and household composition yielded a typology in which foster parents fell into one of three groups. We have labeled the three groups financially *strained*, *secure*, and *managing*. In categorizing the families, emphasis was placed on how they described their financial well-being—that is, how comfortable they were with their current financial picture.

The following summaries describe each of the three groups:

Strained

Eight of the 35 families were considered to be financially *strained*. Foster parents in this group described themselves as having outstanding or unpaid bills, lacking money to do laundry, having had the phone turned off, or “going without,” and being “stressed out about paying the bills.” In the words of one foster parent, they “struggle from month to month . . . usually the bills don't get paid until you get the little pink notice.”

Secure

There were 10 families in which the foster parents indicated that they were financially *secure*. In describing their financial circumstances, they said they “have plenty,” were “generally comfortable,” “financially secure and settled,” “better off than some,” or able “to afford to give [the foster children] extras.” Foster parents in this group report having retirement, vacation, education, or other savings accounts.

Managing

The remaining 17 foster parents—representing half of the total group of foster parents interviewed—were “managing okay” with respect to finances. They characterized their financial situation as being “able to pay my bills” or “okay,” and referred to themselves as “someone who doesn't run into big financial problems.” Several foster parents in this category did note that the DCFS payment is not sufficient, specifically commenting on the inadequacy of the payment for such things as clothing or food.

Table 1 summarizes select household descriptors across the three categories. Although we are cautious about drawing conclusions from the percentages among such a small sample, this table demonstrates some key differences among these groups. Foster parents in the *secure* group were more apt to be married, and not only did all of these families have one employed adult but most had two steady incomes; they also had fewer children in the home—foster and biological. In contrast, fewer foster parents in the *strained* group were married, and half relied on sources of fixed income that often failed to keep pace with inflation. Foster parents in the

managing group were similar in marital status to those who were *strained*, but in the *managing* group, more were employed. On the other hand, that financial support from employment frequently had to cover three or more foster children.

Table 1. More *secure* families were married and employed; *managing* and *strained* families had fixed incomes and more children in the home.

	Categorization of Perceived Financial Well-Being		
	<i>Strained</i>	<i>Managing</i>	<i>Secure</i>
Number of families in this category	8	17	10
Number who are relative caregivers	3	8	2
Household/Income Characteristics	(%)	(%)	(%)
Foster parent is married	25	24	90
One full-time employed adult in home	25	47	100
Steady income from two adults	0	24	90
Household relies primarily on fixed-income sources (Social Security, disability, pension, etc.)	50	41	0
Three or more foster children in home	0	35	20
Multiple, nonsibling foster children in the home	0	29	10
Two or more biological, adopted, or other nonfoster children, ages 0–17, in home in addition to foster children	25	18	20

Relatives as Foster Parents

Thirteen of the families in this study were relative caregivers, and only two were categorized as *secure*. The fact that relative caregivers are more apt than nonrelative foster parents to be in the *managing* or *strained* group may be explained in part by lower payment rates provided for unlicensed relative care. In fact, none of the relative caregivers who were financially *strained* were licensed. Furthermore, among those who were *managing*, almost all of those who were *not* licensed mentioned receiving or being able to borrow money from other family members. Thus, for those relative caregivers who were not receiving the higher payment rates associated with licensure, informal sources of financial support may have been critical in differentiating the *strained* group from the *managing* group.

The Influence of Employment and Childcare on Financial Well-Being

Not only did the presence of a steadily employed adult differ across these groups, but so did the type of work and associated benefits. Few of the households in the *strained* group had an adult with steady full- or part-time employment, and those who were employed typically held jobs with relatively low earnings and no health insurance or other benefits. Foster parents in this group reported sources of income such as baby sitting and doing odd jobs. In contrast, not only did foster parents in the *secure* group typically have jobs in professional fields (e.g., law, social work, administration, accounting, etc.) with benefits and flexibility in scheduling, but at least a third of this group indicated they had been in their current job for over 10 years. Within the *managing* group, the picture was more varied—quite a few of these foster parents relied on fixed-income sources (e.g., pensions or disability payments). Several foster parents in this group

reported that they stopped working shortly after taking in a foster child, and a couple of others changed jobs over the course of this study. The types of jobs these foster parents reported taking were generally unskilled or entry-level jobs, such as bus driver and daycare or classroom assistant.

Among those who were employed in the *strained* and *managing* groups, balancing the economic benefits of employment with the costs of childcare was a dominant concern and significantly affected decisions around work and day-to-day finances. As noted, few of the foster parents in these two groups were skilled workers. The low wages and general lack of scheduling flexibility offered by employers for low-skill jobs, combined with concerns about inadequate DCFS childcare reimbursement rates, minimized the perceived financial gain from employment. One foster parent in the *managing* group said she had periodically worked part time, but:

that is not the case right now and hasn't been for a while . . . mostly because you can't work at a place and say I need Tuesday off for a dentist appointment and Thursday off for a doctor's appointment . . . especially when I'm not that skilled.

In the second interview, she discussed the added challenges of arranging childcare, saying :

I mean how can you go be making (*sic*) \$7.60 an hour and you got to pay a babysitter. . . . I might as well stay home and babysit someone else.

Although the financial concerns around childcare payments were felt differently by families in the three groups, payment was of critical importance for *all* employed foster parents and foster parents considering employment. Among the foster parents in the *secure* group, low DCFS childcare payments were a source of aggravation and challenge in their commitment to fostering. As a foster father and lawyer described his dilemma:

Well daycare service was going to be a very important component 'cause obviously we both work full-time. So I'm thinking that DCFS has some daycare providers who accept DCFS's rates all set up here. . . . Then there are no daycare providers who will [accept DCFS rates]—And to the extent that they would, DCFS is usually like a month or two behind in paying. So not only do you have to find a daycare provider who would accept that rate, you have to find one who would be willing to bill DCFS and wait a month or two to get paid. Nobody's going to do that. . . . So bottom line for two kids it was probably going to be about \$1,500, \$1,600 a month to go to a like a [name of agency] type deal. And so with the money that DCFS would have paid, it probably that would have knocked it down to \$800 per month. So that would have been another \$800 that comes out of . . . my pocket to pay for daycare for these kids. Well that's not something we're prepared to do . . . just find \$800 in our budget every month. So now the trick becomes find a daycare that will accept the DCFS rate. Well it so happens that [another agency] does. But I had to find that out on my own.

It is clear that employment and childcare have serious impacts on the costs of living for families who choose to foster, and may cause some families to choose not to foster or to live with less financial security. These choices may have important ramifications for the foster parent's satisfaction with and ability to continue as a foster parent.

It is, perhaps, noteworthy that two of the foster parents in the *secure* group were considered "professional foster parents"; the agency they worked for required that they *not* work outside the home (although both had spousal income), but then provided them with higher compensation rates and benefits. It has been argued that professionalization removes economic disincentives to fostering, improves the supply of caregivers in low-income neighborhoods, and lessens the need to place children away from their communities.⁴

Although these three groups of foster parents showed some distinct patterns of marriage, employment, and overall household composition, it appeared to be the combination of circumstances that led to their feeling financially strained, financially secure, or somewhere in between. For example, in the *strained* group, the married grandparents with two young adult children still in the home had one steady source of employment income with no health benefits and a DCFS payment for nonlicensed relative care to provide for themselves, their adult children, and several young grandchildren. On the other hand, the only single foster parent in the *secure* group had been employed for many years in a professional position with benefits and was caring for herself and the two young foster children placed with her.

The next sections of this report describe how this perception of financial well-being was related to such aspects of parenting as participating in activities and accessing recommended services. Then we turn to the question of permanence and continued fostering, and explore how financial circumstances are related to foster parents' considerations of whether to provide long-term placements or seek guardianship or adoption for the children in their care.

⁴ A 1999 study of one particular professional foster parent program found that the program outperformed regular foster care in the areas of placement stability, keeping sibling groups intact, placement proximity to birth family, and reunification with birth family, but performed poorly in terms of placing children in adoptive families or in permanent guardianships (Testa & Rolock, 1999).

Activities for Foster Children

It is well understood that participating in family activities and encouraging children to socialize and explore various interests encourages healthy development. In a meta-analysis of 73 evaluated programs, Durlak and Weissberg (2007) found that youth who participate in afterschool programs improved significantly in three major areas: feelings and attitudes, indicators of behavioral adjustment, and school performance. In his survey of caseworkers, Zinn et al. (2006) found that for about 47 percent of children, caseworkers reported that “recreational or after-school programming” would help to maintain children’s foster care placements”; yet 40 percent of the children for whom workers had recommended recreational or afterschool programming were not, according to workers, currently participating in these programs.

From day-to-day unstructured play to day trips to zoos and amusement parks to vacations, sports, and organized clubs and lessons, foster parents’ comments in our interviews demonstrate that they understood participation in activities as a part of normal child and family life. However, participation in these activities was not equally distributed across the three financial groups. In this section, we discuss the types of activities that foster parents arranged for the children in their care, and how the degree of financial strain or security related to participation or to such barriers to participation as access and costs and foster parent attitudes toward various activities.

Participation in Activities

Foster parents in the *strained* group, discussing the activities their children engaged in, identified playing in the house and occasionally outside, going for walks or on picnics, shopping, and reliance on watching TV. Some foster parents said that they took the children to places such as the zoo, church, carnivals, restaurants, and entertainment venues such as Navy Pier, although these outings were infrequent. Only two of the eight families reported that the foster children were participating in organized activities.

In contrast, children living in foster families who were *managing* or *secure* were much more involved in activities, both unstructured and organized. The unstructured activities included playing inside and outside, swimming, and bike riding. Foster parents in these groups had more resources for playing, including swing sets, safe yards, and swimming pools, than the *strained* families. Outings included visits to the park, pools, splash parks, movies, library, skating parks, recreation centers, city venues, baseball games, restaurants, theatre, family vacations, and church. In addition, approximately three-fourths of the children in the *managing* and *secure* families participated in organized activities. These activities represented a wide variety of interests including day and overnight camp, choir, church groups, baseball, karate, dance, gymnastics, soccer, afterschool programs, girl scouts, boy scouts, and general interest classes.

Barriers to Participation

Foster parents in each of the financial groups experienced certain barriers to participation in activities. Foster parents in the *strained* group discussed neighborhood safety and the financial costs of participation. One foster parent discussed her efforts to limit the children’s play at the nearby park, stating the “big kids are too wild on the playground, and it is not safe.” Another

foster parent explained that she had enrolled her child in swimming lessons at a local youth center but then explained that there were too many gangs there.

The expense of activities and outings was also frequently described by foster parents in the *strained* group as a barrier to participation in activities, and while expense may not have precluded participation for families in the *managing* group, it was still a challenge. According to one foster parent:

The pool here is very close, but it cost a lot of money and that is why we go to the one [further away]. . . . Imagine that for each time you go [to the pool nearby] it cost \$6.00.

Foster parents in the *managing* and *secure* groups seemed to live in neighborhoods with fewer safety concerns and more community resources. These foster parents discussed a wide variety of providers of organized activities, from park districts and YMCAs and to Alvin Ailey Dance classes and American Youth Soccer Organization (AYSO).

However, unlike families in the financially *secure* group, a number of families who were *managing* said their foster children did not engage in all the activities the children wanted because their resources were limited. These foster parents reported that their experiences with DCFS policies for reimbursement and/or payment for activities and accompanying costs, such as T-shirts were ambiguous and inconsistent over time. As one foster parent said:

We wanted Amanda to go to camp. And sometimes [DCFS] did pay for it. But sometimes they won't. Sometimes they might say your camp costs \$275 and the most we'll pay is \$200. . . .well right now it might be a little tight.

Foster parents in the *strained* and *managing* groups may not be as well positioned to tolerate these inconsistencies and/or use their own financial resources to support participation. In order to cope with the costs of activities, some foster parents in the *managing* and *secure* groups spoke about seeking out free activities. One foster parent in the *secure* group discussed taking part in a DCFS-sponsored camp for children who proved their immunizations were up to date. As another foster parent in the *managing* group explained:

When he and I do things, we do things that don't cost money. That's why we bike and we walk and we go to parks and things . . . we do things that are free. A lot of times there is a band in the park; we'll go to the band in the park or things like this.

Unlike either of the other groups, foster parents in the financially *secure* group reported several instances in which they attempted to access financial assistance for activities. Several foster parents in this group asked their park districts and other community-based children's centers for discounts. One foster parent tells how she learned to ask for assistance:

I remember sitting in my [foster parent] training, and there was somebody that worked for a park district saying, "You know, give me a call if you ever get kids

because I can . . . get you this free or do that free.” Which made me think, hmmm, “I’m going to ask my park district.” The park district pays for up to \$200 per season for activities for the kids so I don’t have out-of-pocket expenses for that . . . I know that was there and I’ve called other places and said, “Can you get them anything?”

The time and energy that participation in activities requires may also play an unacknowledged role in participation. Enrolling children in organized activities and encouraging active participation requires resources including money, time, and persistence. One foster parent in the *secure* group described a typical week:

Some days are really busy. . . . On Wednesdays [I] leave work right at 3:00. We have piano lessons, then we have to get to another town for speech therapy. We’re there about an hour and a half. We have to get home and get homework and piano and all of that done, so those nights are kind of tough. Our other therapy is on Friday nights, which is not that big of a deal. And then, [foster child] has OT therapy one evening so we usually try to come home and have something to eat and then take him to therapy for that. So, yeah, it’s busy. It’s busy.

Clearly, foster parents who are grappling with concerns about funds for transportation, payment for activities, and work schedules with less flexibility, among other challenges, have more difficulty in undertaking and managing such a daily routine. When foster parents are required to manage other elements of a foster child’s life, such as visitation requirements, consultation with professionals involved in managing a child’s case, and participation in needed services, those who are under more financial stress may have neither the monetary nor nonmonetary resources to facilitate participation in unstructured or organized activities.

Value of Participation in Organized Activities

Foster parents in the three financial categories showed important differences in the value they placed on participation in organized activities. The foster parents who reported financial strain rarely discussed the value of organized activities. With the exception of two families, these foster parents did not discuss enrolling children in organized activities. One foster mother explained that she had not signed her child up for more activities because the child (age 5) was too young.

I haven’t signed him up . . . because I’m trying to see . . . what he wants to do. Maybe by the time he gets to second or third grade. . . . Now I think it’s too early because I don’t know which way he wants to go. . . . Now is kind of early.

Foster parents in the *managing* and *secure* groups clearly valued unstructured and organized activities as a way for children to gain access to a variety of experiences and to learn. In contrast to the foster parent in the *strained* group who was waiting to enroll her 5-year-old foster child in activities until she was clear about his interests, these foster parents saw enrolling young children in activities as a way to encourage their interests. As one foster parent said:

They have done computers, they have done piano, they have done an arts class, they've done um, every sport imaginable. . . . Anything that they're interested in we'll try to sign them up for and get them involved.

Foster parents in the *managing* group did differ from those in the *secure* group with regard to foster children with special needs. Those who perceived themselves as *managing* tended to report that their foster children with special needs were limited in their ability to participate in organized activities. One foster parent in this group discussed her foster son, who—despite behavioral problems—wanted to play football and baseball:

I wanted to put [him] in baseball . . . but . . . I can't sit there during his practices so he can't be turned loose and be on his own at all . . . I can't leave him there for the practice because I know he won't listen. . . . I know that the coach is not going to be able to just put all of the focus on him and keep him in line. So he can't do it.

Another foster parent in the *managing* group discussed her difficulty in finding an activity for her oldest fosterchild who had a learning disability:

We're not positive of what she can do because she is at the age where she could have a job, but her understanding is not very well for counting money, or you know, anything like. . . . so I don't really know what kind of program we gonna have for her this summer.

These foster parents also had several other foster children in their homes. It is possible that large numbers of children in the home—foster or otherwise—limit the foster parent's ability to monitor and support participation in activities, especially among children with mild to moderate special needs, such as behavioral problems and learning disabilities.

In contrast, those who perceived themselves as *secure* generally said that exposure to unstructured and organized activities is valuable, regardless of the child's special needs, and foster parents in this group sought out activities to help children with special needs. For example, one foster parent explained that because her foster child had behavioral problems and other special needs, she needed activities with small groups of children. This foster parent sought out classes through an organization that conducts small group classes. Another foster parent described how piano lessons helped her child's anger management as well as fine motor skills.

Accessibility, cost, and the perceived value of participation all influence the degree to which foster children in a variety of homes participate in unstructured and organized activities. DCFS may have many opportunities to increase participation in activities, especially among the families experiencing the most financial strain. Easing the financial concerns associated with both unstructured and organized activities may be partially accomplished by providing clarity about DCFS policy for reimbursement for activities. In addition, education about how to ask for financial assistance is important. Foster parents who did access financial assistance outside of DCFS reimbursement often seemed to learn how to ask for this assistance by chance. Upon one success, they tended to repeat requests for assistance. Further, foster parents in the financially

strained group clearly needed their caseworker's help or other professional help accessing available activities and organized programs. Finally, all foster parents, especially those experiencing financial strains, may benefit from increased education about the value of activities for all children in order to justify the monetary and nonmonetary costs of participation and understand the benefits and satisfaction participation brings for both foster children and parents. As one foster parent said, "They are on the football team, basketball team . . . the baseball team . . . and, [foster son] had violin last semester and now he is taking piano." She described the effects of participation on her children stating, "They are so happy. I see a difference in them. . . ."

Services

Children in foster care often have a host of needs for medical, mental health, special education, and other services—some identified by foster parents and some recommended by caseworkers or school personnel. The research on foster parents' role in children's receipt of services is limited, but there is consensus that foster parents can play a central role in service delivery. In fact, among those studying foster parent competencies, "meeting children's physical and mental health needs" is considered one of the domains central to successful foster parenting (Buehler, Rhodes, Orme, & Cuddeback, 2006). Meeting those needs can be particularly challenging when foster parents have little historical information on the child's well-being. Pasztor et al. (2006) raise concerns that "foster mothers who have limited experience with a child in their care may not be aware of the full range of children's problems" and that failure to identify and address the problems increases the likelihood a child may experience placement instability.

Despite the emphasis in the field on identifying children's needs and securing appropriate services, Zinn et al.'s (2006) survey of Illinois foster care caseworkers found that, on average, about a third of caseworker-recommended services were not being delivered, largely because referrals to specific services were not made or because families did not take up the services to which they had been referred. For example, in placements in which a specific mental health service had been recommended, workers reported that one in five had not received those services at the time of the survey.

In this section, we explore foster parents' role in accessing services for their children. For the purposes of this discussion, we considered services to include mental health assessments as well as counseling and behavioral health services, medical evaluations and treatments, Alcohol or Other Drug Abuse (AODA) services, WIC and other food programs for children, basic life skills training, and/or ongoing developmental disabilities support services such as occupational, physical, and speech therapies.⁵

We find meaningful variation among the three financial well-being groups, and between kin and nonkin foster families, in their uptake of services and in their grasp of the nature, purpose, and importance of services. We begin with a discussion of what foster parents

⁵ Although some foster parents mentioned participation in structured recreational programs, childcare programs, and services for adults such as respite care, we did not include such material in this particular analysis of children's involvement in services.

understand about services and service provision. We then discuss how foster parent finances and the type of home (relative versus nonrelative) may relate to child participation in services.

Degree of Knowledge about Services and Service Provision

In attempting to learn which foster children receive needed services, it is important to know something about the foster parents' knowledge and understanding of the services that the children were receiving—in other words, the extent to which the foster parents were aware of the reason for services, the content or focus of the appointments, their opinions about the effectiveness of the services, and their thoughts about the providers. Although there were few differences between relative and nonrelative foster parents in their understanding of services, our analysis does demonstrate differences based on foster parents' perceived financial well-being.

Few foster parents in the *strained* and *managing* groups articulated more than basic knowledge about the services in which their foster children participate. Slightly fewer than half of foster parents from these two groups discussed details about services their foster child received, such as the agency that provides the service, the name of the provider, and/or the reason for the service. It may be that those foster parents were not aware of such details or they chose not to share them. For example, one foster parent in the *managing* group responded to questions about services stating that the child does attend counseling twice a week, but she did not know the name of the agency or provider of counseling. When asked if the child participated in any other services, she stated, "None that I know of."

More foster parents in the *secure* group provided explicit details about services, such as the names of providers, the length and frequency of appointments, reasons for services, and their opinions about the effectiveness and quality of the services. For example, one financially *secure* foster parent described not just enrolling the foster child in services based on her belief that the child had a substance abuse problem, but also advocating for a higher-quality service.

The first time I took him to [service provider] I sat there and had a very unpleasant experience, in that the counselor that came, young guy, and I guess as most substance abuse centers that the counselors are ex-substance abusers. And the language he used and his mannerism was totally unacceptable to me. So I had to go up to the administrator and talk to her about it. And I brought him home because I didn't want him in that environment...So after going to the administration and writing letters, and I'm good at writing letters and stuff, she called me and I brought, I took him back. And he had another counselor that was very, very nice.

Although the differences between the *secure* and *strained* groups were striking, we did see evidence that foster parents may discover their role as an advocate for children as they become more experienced. One foster parent in the *managing* group described her transformation from a foster parent who felt afraid to ask for services to one who observes a need and advocates for appropriate services. During the first interview with this foster parent, she discussed her willingness to enroll the child in group activities, but described her reliance on the caseworker to arrange for services for the child. She discussed her active role in connecting the child to

tutoring, a youth drop-in center, and an afterschool program. However, when discussing her experience obtaining services to meet the child's therapeutic needs, she took a decidedly different and less active role in arranging services. She explained:

I'm not able to get a [referral] for that [a speech therapist]. . . . I did my job by informing her [the caseworker] that his occupational therapist said he needs to see a speech therapist.

In the second interview—a year later—this same foster parent reflected on a dramatic shift in her willingness to request and arrange for needed services:

I figure I'm asking for too much, you know, "Let's get rid of this foster parent, she's asking for too many services." . . . I don't want to ask for more, but the child needs this help. But I didn't want them to say, . . . "This foster parent asks for this help . . . We can put them in another home, we ain't got to do all these services," . . . I felt I'm uncomfortable asking them for services, and I used to tell the worker . . . she said, "It's probably you helping the children." But I said, "I feel I'm asking too much, I feel that I'm asking for too much." And I talked with the kids' attorney and she said" . . . "You're not asking for too much, you're helping the children." But within myself, I felt I was asking for too much. . . . You know at first I was kind of ashamed about asking for the help with the schooling and stuff, but it's for the children so I just asked. I don't want in my life to be a burden on nobody, but . . . I thought foster parents are only supposed to do so much, but it's for the children, and I . . . asked for them and I got them.

Foster Parent Role in Initiating and Facilitating Services

Research findings by Leslie et al. (2002) support the idea that foster parents can play a pivotal role in service access. The authors state that, "Caregivers and social workers may have [a role] as de facto 'gatekeepers' into the mental health system." Nevertheless, research also suggests that foster parents are not clear about their responsibility for accessing and facilitating services for their foster children. In a series of focus groups with foster parents and caseworkers, Pasztor et al. (2006) found that foster parents experience frustrations about the ambiguity of their role. The foster parents Pasztor interviewed said they were treated as "glorified babysitters," despite the fact that they considered themselves to be essential members of the care team.

Our study supports and amplifies those findings in that there was considerable variability in the extent to which foster parents felt it was their role to identify the service needs of the children in their care and to facilitate connections to the providers of such services. Foster parents in the three financial groups articulated different perceptions about their role—some expecting the caseworker to take the lead in identifying services (which we have termed *passive involvement*) and others taking more initiative, advocating more strongly, and directly pursuing service providers (which we have termed *active involvement*).

Passive Involvement of Foster Parents

Foster parents who rely on caseworkers and school personnel to identify needed services and arrange for their provision rather than actively advocating for the children in their care may be guided by certain misconceptions about what services are and by a particular view of their role as foster parents. For example, several foster parents in the *strained* group responded to questions about service participation by naming food pantries, Section 8 housing, and energy assistance programs as services they access.

One foster parent responded to service questions with comments about needing more money for food. Another foster parent said she doesn't get paid enough. Foster parents who are financially *strained* and some who are *managing* appear to consider their service-providing role to be limited to maintaining daily life by providing food and shelter and monitoring day-to-day activities. These foster parents may perceive the role of connecting the child to physical and mental health services as solely the purview of the caseworker.

Fewer than half of the *managing* group and very few foster parents in the *strained* group who do access services for children discussed making the effort themselves to initiate or advocate for services. Instead, they rely on the caseworker or schools to identify needs and to ensure that the child accesses the services that are needed. One foster parent in the *strained* group described how DCFS and medical doctors arranged for developmental, occupational, and physical therapy services for the children in her home:

When a child come into the system anyway and it is something wrong with the child or whatever, DCF (*sic*) go through with that [assessment and location/provision of services] anyway with the child. . . . And whoever they get, those the people who I talks to when they come out to my house.

A number of foster parents who were financially *strained* or *managing* expressed frustrations around inaction on the part of the caseworker. These foster parents believed that it is not within their role or ability to access services independently. In one example, a foster parent suggested that if she had had better training, the placement would not have disrupted.

I don't have a degree. They know what is available to me, but I don't. So, I just felt they should have offered more things to me to get help.

Foster parents in the *strained* group—including relatives and nonrelatives—often named schools as a source of services such as occupational, physical, and/or speech therapy, and counseling. This may be a consequence of policies requiring schools and other agencies to identify and refer young children in need of these types of services. It is also possible that caregivers understand and respond to behaviors that interfere with school functioning differently than they do behaviors that are exhibited in the home. Other research on mental health service use has raised questions about whether school-related concerns are a primary factor in caregivers' propensity to identify problems and seek out services (Smithgall et al., 2006).

Active Involvement of Foster Parents

In contrast to foster parents in the *strained* and *managing* groups, many of whom spoke of the foster care stipend or the daily costs of living (i.e., food) in the context of services, those in the *secure* group discussed what they did to facilitate access to and support services for the children placed with them. These foster parents believed their contribution to their child's participation in services was clearly part of their role, notwithstanding the caseworker contribution to this effort.

Foster parents in the financially *secure* group located children's service providers through the placement agency or through independent providers, in contrast with the *strained* group's reliance on school-initiated services. Foster parents who were financially *secure* spoke of their efforts to access services for children independently when the child appeared to have an unmet need. For example, a financially *secure* nonrelative foster parent to two boys described her efforts:

As far as like speech and OT and all of that, I have pushed through the doctor and just my own background and that stuff to have these boys evaluated and then to get services set up and I've kind of taken care of that myself. You know I let him [caseworker] know that we're going in for PT eval or going in for an OT eval and this is why I think we need one and yes, now we're having services or whatever. He seems indifferent to the information so you know, I just do it because I feel like I'm supposed to. But that, that pretty much has been all of me doing that.

The financially *secure* foster parents alluded to their professional backgrounds and the personal characteristics that helped them to access services. For example, one foster parent interviewee and former teacher relied on her knowledge of child development to pinpoint problems and access appropriate services. Another couple discussed their concern that families without this knowledge may be less able to advocate effectively:

My wife working in social services and me being an attorney, I thought, We're pretty resourceful people. We understand the system and we've worked it before. . . . But things like the loss of services for this kid because people weren't returning phone calls, stuff like that. I got to thinking it's like no wonder there's so many kids still in the foster care system... They can't get them, find foster parents, because most people in my humble opinion do not have the, the stones to fight through that system and all those issues that pop up.

Although foster parents in the *secure* group described how their personal resources helped them know how to access services, most of these foster parents as well as some in the *managing* group expressed frustrations with locating providers on their own; they were particularly concerned about the time and effort it took to locate providers who accept Medicaid. One foster parent explained that she had to arrange for her children to be cared for while she spent several hours at a time locating doctors and managing paperwork for billing. Another foster parent who fosters children with serious behavior problems and ADHD said:

these kids need help. They need the proper help. There is basically nowhere around here where you can get that help. Because a lot of these places do not take the medical card for them and this [the medical card] is what they have. You have to get a phone book and sit down go through the book to see who you can get.

Another foster parent explained:

the permanency goal was to return them to their parents. But even when they came to our house, we were like, “Man, if only we could adopt them, just at that point, so that we could put them on our insurance plan,” so we wouldn’t have to wait for anything. Professionals don’t take Medicaid. There are just so few doctors and psychiatrists that will take Medicaid, that if you find one you have to wait 3 months to get them in. So we had to live with the problem for a long time before we could get them in. So, it’s stuff like that that makes it extraordinarily difficult to parent these children. You can’t just say, “Okay, my kid has an issue, I’m gonna find a doctor on my health plan and go make an appointment and get in there and see him.”

The challenges in locating providers who accept Medicaid have been discussed in other research on child welfare and/or relative caregiver populations. In a study of grandparents caring for children, over 70 percent of children in the study relied on public health insurance; yet only 20 percent of providers in a corresponding survey reported accepting Medicaid (Smithgall et al., 2006). Pasztor et al. (2006) found that many foster parents reported frustrations finding physicians who would accept Medicaid, and among those that did accept Medicaid, some refused to treat foster children due to their complex health-related needs and the possibility they might be asked to testify in court.

Service Participation among Relative and Nonrelative Foster Parents

Almost all nonrelative foster parents, regardless of financial well-being, reported that the children in their care were participating in services, generally services that were recommended by the child’s caseworker. Among relative caregivers, however, very few indicated that the children in their care were participating in services. The literature about service use among relative and nonrelative foster care providers supports the finding that relative caregivers access fewer services than nonrelatives. In a review of the research on kinship care, Cuddeback (2004) cites 10 different studies stating, “There is strong evidence that kinship foster families receive less training, fewer services, and less support than nonkinship foster families.” However, less is known about the dynamics that contribute to this finding. Are lower levels of service use reflective of differences in need, acceptability of service use, knowledge of providers and services, accessibility of services, differences in advocacy skills among relative and nonrelative care givers, and/or the influence of foster parent finances or perceived financial security?

Among relatives in our study, it seemed in some cases that the recommended services were not perceived as having value above and beyond other options. For example, one relative

foster parent of a child with spina bifida believed that the foster child's attendance at day camp is of greater value than the physical therapy prescribed by the child's doctor:

He is at the day camp where he is out being active with the other kids. He is doing, well, not really exercises, but he is up on his crutches all day. . . . I figured that was better than trying to shuffle him up to a one hour therapy session once a week. . . . I will probably get in trouble for it, but I really don't care.

Fostering Over Time: Provisional Parent or Possible Permanency?

When it comes to maintaining a consistent supply of high-quality foster homes, there are many points in the application, licensure, and relicensing process where numbers decline and foster parents have many reasons for ceasing to provide care. An ASPE study of administrative data from three states revealed that up to 20 percent of foster homes provided fewer than 90 days of care, and between 47 and 62 percent of foster parents ceased fostering within a year of the first child being placed in their home (Gibbs, 2004). In some cases, the decision to stop fostering may be associated with increased stability for the child as the foster parent decides to adopt the child and discontinue temporary care. In fact, a majority of children adopted from the child welfare system are adopted by their foster parents (United States Department of Health and Human Services, 2000).

In this section, we explore the complex factors, including financial circumstances that impact foster parents' decisions to seek permanent arrangements for the child in their home and/or continue fostering. Because we find that foster parents' decisions regarding permanency for the child often reflected their motives and/or the circumstances that influenced their decision to become a foster parent, we briefly revisit the motives for fostering that were articulated by the financial groups, both relatives and nonrelatives.

Foster Parents who Intend to Adopt

Foster parents in the financially *secure* group were primarily motivated by their desire to adopt. Seven of ten of these foster parents expressed their intention to adopt and/or confirmed that they had adopted by the second interview. Even one of the two relative foster parents in the *secure* group entered fostering with the intention to adopt. Thus, this group of foster parents may serve as a valuable resource to a subgroup of children who fit these foster parents' preferences and ultimately need permanent homes.

That being said, the state still has an obligation to reunify children with their parents, and these foster parents in particular may struggle with the fact that the placement is temporary until parental rights are terminated. In this study, some foster parents in the *secure* group spoke of their experiences managing attachment. One foster parent in the *secure* group who experienced reunification during the course of the study described how the process influenced her considerations about continuing to foster:

I loved it but I don't think we're going to do it again . . . for her sake and our sake for our children. We treated her like she was one of ours. I still say I

have three kids even though I only have two. . . . It's just too hard letting go. She was here so long; 3 and a half years. So I don't think we could. We don't want to go through that again. . . . It's still raw.

It is possible that foster parents in the *secure* group may benefit from additional supports around managing the emotional challenges inherent in efforts to provide a long-term stable home with strong attachment and also being able to facilitate transitions or reunifications. With such supports, these foster parents may be more likely to choose to foster again.

Foster Parents Who Do Not Intend to Adopt

Most nonrelative foster parents in the *strained* and *managing* groups were not motivated by adoption or guardianship goals, but stated their motivations were altruistic. In fact, many of these foster parents seemed hesitant to commit to adoption, saying that they were “still thinking about it,” or that they “weren't sure.” Often, these foster parents still had not reached a decision about adoption at the time of the second interview. A few specifically said that their decisions not to adopt were influenced by financial concerns. Others were clearly concerned about managing the child's developmental, behavioral, and emotional needs. One foster parent, describing both of these concerns about the consequences of adoption, explained:

Because everything is on me then and I don't know if I would be able to afford it. I wouldn't want to take that [art classes and behavioral management services] away from her.

Many nonrelative foster parents in the *managing* and *strained* groups described altruistic motives such as providing children with safe homes and providing temporary loving homes until children could be reunified with their families.

I care about them but I don't care about them to the point that I try to keep them or keep them away from their families. . . . We're not here to create no brand new families. We are foster parents, temporary parents, until these mothers or fathers or whoever get they self (*sic*) together and they can go back home. [Going home] is what my goal would be for any child that comes into this house.

Relatives Face Unique Challenges

Relative foster parents are typically motivated to foster out of a sense of family attachment or obligation, and most intend to provide a temporary placement until the child is reunified with a parent or parents. In some cases, these children already have an established relationship with the foster parent. In other cases, the foster parents stated they were the only relative willing to take in the child. However, it should be noted that, during the second interview, most of the foster parents in the *managing* and *strained* groups who intended to adopt or become guardians were actually relatives.

Despite perceiving their role as temporary, relative foster parents often find themselves in the position of having to take on a much longer commitment than they anticipated and eventually adopt or assume guardianship of the child. A relative foster parent in the *managing* group who does ultimately plan to take guardianship of her foster child described how her initial motivations to foster changed over time:

My intention was to keep [the foster child] for a year until she [the child's mother] could get herself together, till she get her house or apartment or whatever the situation is. At least she can get three of her kids back, the rest of them is adopted and grown. So now she don't have the rights to that no more, most likely I will probably adopt [foster child] or be his legal guardian. . . .

For relative foster parents, permanency decisions are further complicated because they frequently have direct contact with other members of the child's family, sometimes even the biological parents. These relationships often make relative foster parents privy to more information about the biological parents than is typically the case for nonrelative foster parents. One foster parent described how her relationship as a family member impacts her discussions with DCFS regarding permanency.

I said, it's been going on 2 years now and they [DCFS] want[s] to close the case. Cause his case is only supposed to be open for six months. So about 2 months ago they came and said either we gon (*sic*) move for adoption or we gon (*sic*) move for guardianship. . . . We decided to do [guardianship]. But now, [the biological mother] doesn't want to do that. She wants him back. But Easter Seal[s] is saying, . . . "She's not in a position where he can come back now." So . . . I [am] just waiting to see whatever they [DCFS] decide[s]. I already told her I can't go on much longer being in limbo. Because right now she's not dealing with Easter Seals, I am . . . It'd been easier if it wasn't family because it's family, it's all messed up . . . If it wasn't family and I felt like the situation wasn't progressing then I could say, "Maybe y'all [DCFS] need to look into something else." But he [is] family.

Exposure to the opinions and concerns of other relatives and/or the biological parent(s) can make decisions about day-to-day life, and even adoption or guardianship, more complicated. Navigating one's role as family member, foster parent, and potential guardian is complicated, and may result in less attention being paid to engaging services and activities than for children in the other groups. Additional trainings and supports may be needed to address the inherent conflicts that relative caregivers often experience.

Differences in Motives, Perceived Role, and Permanency Outcomes

How foster parents facilitate their foster child's participation in services and activities and their decisions about permanency does relate to their motivations for fostering and their sense of financial security. However, the relationship is complicated and reflects many other factors that influence foster parents' and children's pathways through the child welfare system.

By taking on placements that foster parents believe to be temporary, *strained* and *managing* foster parents may not be as proactive in facilitating children's participation in services and activities. For example, foster parents in the *managing* group, who were more likely to view the arrangement as temporary, gave greater consideration to the long-term goals and short-term constraints when approaching their role in connecting the child to services and activities. A foster parent in the *managing* group suggested she was reluctant to engage her foster child in an activity because he may not be with her for a long period of time.

He wants to sing in the choir, but I don't know if I want to allow him to sing in the choir because . . . you really can't bring kids into something that's going to be broken from them.

Perceiving their home as a temporary placement, these foster parents could be inadvertently preventing children from opportunities to make attachments and connections that would facilitate their development. On the other hand, foster parents in the *secure* group frequently approach their role with the intention to become permanent parents. Foster parents in this group may view their role in services and activities as an investment in the future development of their child and their family.

Differences in motives in combination with financial security (or lack thereof) seem to partially explain differences among foster parents' perception of their role in organizing and facilitating activities and services. These differences can be a framework from which child welfare systems can observe and address disparities in homes and better prepare foster parents to meet the needs of children in their care.

DISCUSSION

The challenges of recruiting and retaining foster parents are well documented (USDHHS, 2002; Gibbs, 2004) and policy analysts have suggested that shortages in foster homes may lead to relaxed criteria and thus the inclusion of “marginal” foster homes (Christian, 2002). At the other end of the spectrum, having large numbers of foster parents who cease to foster—whether by their own choice or as a consequence of the licensing agency’s decision—is likely to have an impact on the continuity of care for children. This connection is confirmed by Zinn et al. (2006), who found that “Over three-fourths of children’s most recent moves were due, at least in part, to foster parents’ inability or unwillingness to continue fostering.”

This study emerged from a recognition that more detailed information about foster family circumstances and foster parents’ perspectives might enhance our understanding of the connection between foster parents as a system resource and children’s placement experiences. The findings demonstrate the importance of perceived household financial well-being, and illuminate how financial circumstances are intertwined with foster parents’ approach to and understanding of their role. Financial considerations may not be the sole factor in individuals’ initial decisions to become foster parents, but financial constraints may well impact *how* they parent. Although none of the foster parents in this study reported that obtaining extra income was a motivation for becoming a foster parent, the interviews provide a more nuanced picture of the influence of financial circumstances on foster parents’ perceptions and behaviors—specifically in seeking out and facilitating access to activities and services for the children in their care, thereby demonstrating how financial supports and constraints can impact the experiences and outcomes for foster children. We address three core issues that are suggested by the interviews in this final Discussion section: economic supports for foster parents, clarification of roles for foster parents and caseworkers, and aspects of fostering that may be unique to relative caregivers.

Supporting Foster Families’ Economic Well-Being

In 2008, three pieces of proposed legislation in Illinois (HB5095, HB4590, and SB2361) sought to provide additional financial supports to foster parents. This legislation and prospective increases in payments have the potential to address the deficits identified in a national report and also the reported gap in Illinois created by stagnant foster payment rates despite increases in the cost of living (Sexton, 2008). A strained economy and the perception among even a portion of the public that some foster parents are motivated by money may make enacting such legislation challenging, and it is likely that some people will continue to be skeptical of increasing payments for fear of incentivizing inappropriate arrangements. However, increased payments to foster parents could very well attract a wider range of potential homes so that DCFS may have more homes to choose from when making placements, hopefully including a greater number of high-quality homes. Furthermore, concerted efforts to be more responsive to current foster parents’ concerns about reimbursements and supports might also create more stability among existing homes where nurturing care is provided despite strained resources. Ultimately, though, we must also recognize that comments made in these interviews may be shaped less by objective income amounts than by household circumstances—and changes in those circumstances over time—that drive both the allocation of those resources and the perceptions of financial security.

The fact that foster parents vary significantly in their perceptions, roles, and behaviors is to be expected; after all, so do biological parents. What this study illuminated were the ways in which that variation aligned with foster parents' reported levels of financial well-being. We do not mean to suggest that only people with greater financial means should be recruited as foster parents. Certainly, foster parents who are financially *strained* can provide good-quality care in a loving home, and, conversely, not all financially *secure* individuals will provide the care children need, nor will they be appropriate for the often-temporary caregiving responsibilities of foster care. However, financially *strained* foster parents may need a wider range of economic supports and other services, and they may need them more acutely over a longer period than their counterparts who already have more resources. The intensity of some foster parents' individual or household needs can be such that they create a distraction from meeting the foster child's needs. Intensive social service supports, greater attention to helping strained foster homes and parents, and increased stipends should all serve to meet the needs of the foster children.

In addition, the child welfare system might also reevaluate the criteria used to determine whether prospective foster parents have "adequate household resources" and whether those resources or their adequacy has changed over time. It is possible that this assessment will eliminate some of the foster parents who clearly struggle to meet their own needs and cannot meet the needs of the children placed in their homes. Such reevaluation may also point more clearly to the kinds of supports and attention that could be provided to help foster parents in this group carry out their responsibilities and improve the well-being of the children placed in their care.

Childcare is one support that seemed, according to our interviews, to be closely related to economic well-being. Although the foster parents in the *secure* group were most vocal about their frustrations around childcare supports, that may be more reflective of the fact that many of them held professional positions and did not anticipate that assuming care of a foster child would interfere with their ability to continue in their jobs. Foster parents in the *managing* and *strained* groups also spoke of significant challenges in balancing work and childcare demands, often seeking out jobs that would allow them to carry out their role as foster parents and terminating jobs that did not—which may translate to greater household financial strain. A review of policies regarding childcare supports available to foster parents and greater attention to how that information is conveyed to foster parents may be one critical way in which the child welfare system can continue to support foster parents who are or seek to be employed.

Finally, it is important to note that there is likely a correspondence between financial circumstances and individual or household attributes that we cannot disentangle. Both household finances and personal attributes are probably related to parenting or fostering approaches—that is, individual attributes that contribute to lower educational attainment and the individual's education level are likely associated with lower earnings and therefore lower perceived financial well-being. Those same individual attributes may be associated with a less active role in arranging activities or services for the foster child. Solely addressing any financial needs in the household will not necessarily lead directly to changes in foster parents' perceived roles or behaviors.

Caseworkers and Foster Parents: Clarifying Roles, Coordinating Responsibilities

Both caseworkers and foster parents have critical skills and knowledge necessary for monitoring and promoting foster children's health and well-being. Foster parents have insights into children's daily routines, experiences, and feelings, and caseworkers bring institutional knowledge and resources to bear. Ideally, both caseworkers and foster parents receive training and supports and can therefore work together effectively to comprehensively identify and address foster children's needs. Nevertheless, a considerable amount of research has shown breakdowns in communication and a lack of clarity around roles, particularly concerning education and health and mental health services (Pasztor et al., 2006; Smithgall, Gladden, Howard, Goerge, & Courtney, 2004; USDHHS, 2002; USDHHS, 1993).

One of the least costly and perhaps most helpful approaches to child welfare system improvement would be to work with both caseworkers and foster parents to clarify role expectations, and then make sure that the appropriate training and supports are in place for each to carry out those roles. This does not mean that the respective roles of the foster parent and caseworker need to be codified in policy at the system level. To exhaustively prescribe which tasks and responsibilities are to be carried out by the caseworker and which are to be carried out by the foster parent would be to ignore the fact that one or the other may possess greater skill or face fewer constraints. Instead, the child welfare system might encourage caseworkers and foster parents to develop an agreement through which, based on mutual assessment of the foster parent's strengths, resources, and competencies, they decide who will take the lead in communicating with the schools and providers and who will take the lead in locating and securing activities, etc. Based on that agreement, each party might seek out or be referred to specific trainings and resources that will provide the necessary supports in carrying out their designated role. Training curricula may also need to be reviewed to clarify these roles and responsibilities.

It is important to note that roles and agreements about responsibilities will likely change and need to be revisited over time. According to Buehler et al. (2006), "Time (a year or two) and experience might be needed for foster parents to develop certain competencies to a desired level of success." In this study, we found examples of how foster parents changed the ways they fostered over time to develop greater competencies and improve their ability to meet the children's needs. Thus, both the levels of communication and support may be greatest for newly recruited foster parents, newly trained caseworkers, or when a child is newly placed in a home, particularly in cases where a child has special needs or a difficult time adjusting to a new home or experience.

Supports for Relatives

The circumstances that bring a relative to care for a child involved with the child welfare system are often complex and distinct from those of nonrelative foster parents. Our analysis shows that many relative foster parents find that the commitment is longer and, sometimes, more permanent than they originally anticipated. Often, there is a greater degree of complexity around biological and extended family relationships, surfacing not only at the point of deciding who will care for the child but throughout the child's development as needs and family circumstances change.

As already noted, findings in the research literature and the findings from this study confirm a strong relationship between kinship status and a lack of or lower levels of involvement with service providers. But neither the prior research nor this study offers greater clarity on whether this lower level of involvement might reflect differential needs of children in relative care or relative caregivers' preferences; and there is little understanding of how the action or inaction of both caseworkers and relative caregivers might contribute to this dynamic. As in nonrelative homes, participation in services may also be affected by factors related to financial stability, with the financial needs of unlicensed homes potentially even more pronounced than licensed homes.

Commenting specifically on the differential payment structure for kinship and nonkinship foster care, Schwartz (2002) suggests that policies regarding monetary payment for services signal the value of those services and/or their contribution to society. Illinois has a long and varied history of how kinship care fits into the state's overall array of child welfare services. The extended family support program is one example of DCFS's efforts to provide supports to relative caregivers where there is no determination of maltreatment but the family might still benefit from additional services or supports. Further research on the family dynamics and resources available to unlicensed relative foster parents might inform the development of additional programs to support these foster families.

CONCLUSION

The results of this study show clear variation in foster parents' motives and financial circumstances, and corresponding variability in the ways in which foster parents perceive and perform their roles. To some extent, the effect of financial security or strain on parenting perspectives and choices may be felt by all families, both foster families and biological families.

The child welfare system should not necessarily use these findings as a statement of the relationship between foster parents' financial security and their capacity to support a child. Instead, when developing recruitment and retention strategies and implementing efforts to improve the quality and sustainability of foster homes, child welfare agencies may choose to consider providing a range of supports—through services, trainings, and financial payments—that will provide a more positive experience for all foster parents and their foster children.

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